

* Please read the instructions given below carefully before filling the application form.

* The instructions given below are in the same sequence as the application and reference is made to the numbers appearing in the application for handy reference.

* Applications that are not complete in all respects are likely to be rejected.

* Strike of all columns/fields that are not applicable.

* Application to be filled by the Applicant in block letters.

Type of Account: Please indicate the resident Status & Sub-Status of the Sole/first applicant by ticking the appropriate box. **Applicant's Details:**

- a. Please note that accounts can be opened by an individual or as a joint account of up to three applicants.
- b. Please enter the name of the sole or first applicant in the Column in capital letters.
- c. Please enter Father's/Husband`s Name, Correspondence Address, Pin Code, Phone numberls)/Fax Number(s) and E-mail ID in the columns provided and tick the appropriate box in respect of Occupation, Please note that the name and address fields are mandatory and the application will not he accepted if these columns are not filled in.
- d. Please provide the STD code along with your Telephone/Fax numbers and do write the E-mail ID exactly.
- In case the application is made jointly please enter the e. names and other details of the joint applicant(s) in the Column Specified. Please note that all correspondence / communication in respect of this account will be sent to the sole/first applicant at the address on record.
- Please note that physical certificates can be dematerialised f. and credit given to the account only if the name(s) and sequence of the names appearing in the share certificate(s) are identical with the name(s) and sequence of name(s) provided in this application.

Financial Details: If the Applicant(s) is/are assesse(s) please provide the required details in the boxes provided. If the applicant(s) is/are not assessee(s) then please write NA in the appropriate field(s).

Guardian Details: If applicant is minor it would be necessary to fill up these columns. Please note that it is mandatory to fill up these fields if any of the applicants are a minor.

- Enter the name of the minor and his/her date of birth in the a. fields provided.
- b. Enter the name, address and relationship of the Guardian in the fields provided.
- In the event of the Guardian not being the natural guardian -C. that is the guardian is not a parent of the minor - it would be necessary to provide certified proof of the guardianship.

Non-Resident Indian (NRI) Particulars: In case any of the applicant(s) is/ are a NRI it would be necessary to fill up this field. In the event of more than one applicant being a NRI the additional details may be provided in a separate sheet in the same format. For NRI's these fields are mandatory.

- a. Please provide the Foreign address in the fields provided.
- In addition to filling in the RBI/Authorised Dealers reference b. number and approval date the applicant would need to submit a copy of the RBI approval/Dealers permission along with the application.

Bank Details: The applicant must provide details of the bank account to which he would like all dividends to be credited. This is mandatory.

- The sole/first named applicant must be one of the account a. holders in the account specified in these fields.
- The applicant must provide in these fields the Savings/Current b. Account Number, the Bank Name, the Branch address and the 9 digit code number appearing in the MICR cheque issued by the Bank.
- In addition the applicant must submit, along with the C. application, a cancelled MICR cheque leaf or a Xerox copy of the MICR cheque leaf.

Standing Instruction: Please tick the 'Yes' box if you want all purchases to be credited to your account automatically. If you tick the 'No' box then purchases will be credited to your account only after the DP receives a written confirmation from you. The normal practice is to allow automatic credit.

Nomination: If the applicant(s) wish to nominate a person who would be entitled to receive the securities in their account in the event of the death of the sole/all the joint applicants this set of field should be filled.

- If the nominee is a minor then the 7(A) will need to be filled. a. The applicant would need to provide the same information as was required under instruction number 3.
- b. Please note that the signature of the nominee must be witnessed.
- If the nominee is a minor, applicant should not be the C. Guardian.



Signatures and Specimen Signature Card:

- a. The sole/all the joint applicant(s) must sign in the places provided in the same order as in the application, This is mandatory.
- b. Thumb impressions and signatures in languages other than English, Hindi or any of the other languages contained in 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
- c. Please affix recent photograph(s) of the applicant(s) in the same sequence as in the application. The applicant(s) must sign across their respective photograph(s) and also sign in the box provided for specimen signature(s).
- d. Where applicable recent photograph(s) of the Guardian of applicant(s)/ Nominee/Guardian of the nominee would need to be affixed on the specimen signature card at the place provided. The Guardian of the applicant(s)/ Nominee/Guardian of the nominee must sign across their respective photographs and also sign in the box provided for specimen sig nature(s).

Proof of Identity

- I. Passport
- II. Voter ID Card
- III. Driving License
- IV. PAN card with photograph
- V. Map in Card
- VI. Identity card / document with applicant's Photo, issued by. (a) Central/State Government and its Departments, (b) Statutory/ Regulatory Authorities, (c) Public Sector Undertakings, (d) Scheduled Commercial Banks, (e) Public Financial

Institutions, (f) Colleges affiliated to Universities, (g) Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and, (h) Credit cards/Debit cards issued by Banks.

Proof of Address

- I. Ration card
- II. Passport
- III. Voter ID Card
- IV. Driving License
- V. Bank Passbook
- VI. Verified Copies of (a) Electricity bills (not more than two months old), (b) Residence Telephone bills (not more than two months old) and (c) Leave and License agreement / Agreement for Sale.
- VII. Self-declaration by High Court & Supreme Court judges, giving the new address in respect of their own accounts.
- VIII. Identity card /document with address, issued by a) Central/ State Government and its Departments, (b) Statutory/ Regulatory Authorities, (c) Public Sector Undertakings, (d) Scheduled Commercial Banks, (e) Public Financial Institutions, (f) Colleges affiliated to universities; and (g) Professional Bodies such as ICAI, ICWAI, Bar Council etc., to their Members.

In the event of documents such as passport, ration card etc., being provided, the original together with a copy must be submitted. The original document will be returned after verification.

Please ensure that the enclosed agreement are duly signed and also ensure that the agreement is duly witnessed with Address.

CHECK LIST

Applicant must submit the following documents

- duly signed (where applicable).
- 1. Account Opening Form
- 2. Schedule A of charges
- 3. Proof of Address and Identity
- 4. Specimen Signature Card with photographs affixed
- 5. Cancelled MICR cheque or Photocopy of MICR Cheque
- 6. Copy of the Pan Card

Note: Client's must bring original documents in support of Address & Pan for Verifications.



Date _____

Composite Investments Pvt Ltd

No.30/1, 3rd Floor, S J Towers, Mission Road, Bangalore 560027. Tel. : (+91) (80) 2224 4909 / 12 / 13 Fax : 080-2224 0553 Trading Code

Cash/Cheque No. _____

Rs. _____

APPLICATION FORM FOR OPENING A DEMAT ACCOUNT WITH CDSL

Please fill all the details in BLOCK LETTERS in English

Application	No.	Date	
DP Internal I	Reference No.		
DP ID	12065200	Client ID	

(To be filled by the Depository Participant)

I/We request you to open a Depository Account in my/our name as per the following details: Type of Account (Please tick whichever is applicable)

Status	Sub-status					
○ Individual	 Individual Promoter Individual Resident 	 Individual Margin Trading A/C(Mantra) 	0	Individual Director Relative	0 0	Individual HUF/AOP Other (specify)
O NRI	○ NRI Repartiable	○ NRI Non-Repartiable	0	NRI Repartiable Prom	noter	
	 NRI Non-Repartiable Promoter 	 NRI Depository Receipts 	0	Other (specify)		
○ Foreign National	○ Foreign National	○ Foreign National – Depository Receipts	0	Other (specify)		
○ Type of Account	\odot Basic \bigcirc RGESS \bigcirc	BSDA				

Enter Sole/First holder's details

Name O I O Miss (st		First	М	iddle	Last/ Sir name
Name of Fa	ther/ Husband				
Correspond	lence Address				
				City	
State		Country		Pin Code	
Tel. No.		Fax. No.		Mobile	
Email			Date of birth		
P.A.N. / G.I.	R. No.		UID No.		

Permanent				
(If Differen	t from Corr.Add.)			
			City	
State		Country	Pin Code	

Details of Guardian (if First Holder or Second Holder or Third Holder is a minor)

Name of Guardian		
PAN	Relationship	



	Automat	ic Credit
I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	O ^{Yes}	O 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 (<i>If not marked, the default option would be 'No'</i>)	O ^{Yes}	O ^{No}
Account Statement Requirement As per SEBI Regulation Daily Weekly Fortnightly	> Monthly	
I / We request you to send Electronic Transaction-cum-Holding Statement at the email	O ^{Yes}	O ^{No}
I / We would like to share the email ID with the RTA	O Yes	O No
l / We would like to receive the Annual Report Physical Electronic Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	tronic	
Do you wish to receive dividend / interest directly into your bank account as 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)	⊘ Yes	O No

Joint Holders - Second Holder's details

Name Mr Mrs Miss (suffix)		
Name of Father / Husband		
P.A.N. / G.I.R. No.	UID	
EMAIL ID	Mobi	e

Joint Holders - Third Holder's details

Name Mr Mrs Miss (suffix)		
Name of Father / Husband		
P.A.N. / G.I.R. No.	UID	
EMAIL ID	Mot	ile

Declaration:

I/We have read the terms & conditions DP-BO rights and obligations document 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 be 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 fortermination and further action. Please attach recent passport size photographs in the space provided below:

	Sole/First Holder	Second Holder	Third Holder
Name			
Signature			
		🚫 S1	🛆 т1
Passport Size Photo			
Please sign across the			
photograph			
			🚫 т2



Bank Details of Sole/First Holder

Account Number			
Bank Name			
Branch & Address			
А/с Туре	○ Savings ○ Current A/c ○ CC A/c	IFSC Code	
9-Digit MICR Code No.			

(i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)

(ii) Photocopy of the Bank Statement having name and address of the BO and not more than 3 months old.(or)

(iii) Photocopy of the Passbook having name and address of the BO, (or)

(iv) Letter from the Bank.

In case of options (il), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document and it should be self-certified by the BO.

Occupation	O Private / Publi	c Sector	O Govt. Service	O Business	O Professional	○ Agriculture
	○ Retired	○ Housewife	○ Student	○ Others (Specif	y)	
Gross Income	○ Upto 1 lac	○ 1-5 Lac	○ 5-10 Lac	○ 10-25 Lac	○ Above 25 Lacs	3

Additional Details

SMS Alert Facility <i>Refer to Terms & Conditions given as</i> <i>Annexure - 2.4</i>	+91 Mandatory, if you are giving Power of Attorney (POA) <i>(if POA is not granted & you do not wish to avail of this facility, cancel this option).</i>					
Transactions Using Secured Texting Facility (TRUST). <i>Refer to Terms & Conditions given as</i> <i>Annexure - 2.6</i>	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. I/We wish to register the following clearing member IDs under my/our below mentioned B0 ID. I registered for TRUST ○ Yes ○ No,					
	Stock Exchange Name/ID Clearing Member Name Clearing Member ID (optional)					
Easi	To register for easi, please visit our website www.cdslindia.com. Easi allows a BO to view his ISIN balances, transactions and value of the portfolio online					
BO ID (Please write your 8 digit Client ID)						

Holder's Name

Sole/ First	
Second	
Third	

Mobile number 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 _

Email ID:

(Please write only ONE valid email ID on which communcation, if any, is to be sent)

Sole /First Holder Signature	Second Holder Signature	Third Holder Signature					
🚫 F3	🚫 S3	🚫 ТЗ					



Nomination Form

[Annexure A to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July	
23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]	

9	Composi 30/1, S J Bar	Tov		Miss	sion F				FORM FOR NOMINATION (To be filled in by individual applying singly or jointly)																									
D	ate	D	D	Μ	M	Y		Υ		Y	Y	UCC/	DP ID		I	N	ř.							Client II	9									
N I/	/We wish fominatio We wish my / our	on Do	etails ake a	5									10	ng	pers	SOI	n(s) w	vhe	o sha	ll re	ce	ive all	the	assets he	d in 1	ny	/ ou	1 3	ccou	nt	in th	ne e	ever	nt
	ominatio ominees i					oto tl	hre	e	Details of 1 st Nominee							Deta	uil	of 2	^{ad} No	ominee		Details of 3 rd Nominee												
1	Name	of th	ie no	min	ee(s)	(Mr.	./M	[s.)																										
2	2 Share of Equally each [If not equally, please specify												%							%									9/0	b				
3	Relatio (If Ai		ip W	pe	rcentag	ge]		nt		Ai	iy oo	dd lot aj	fter divis	ion	n sha	all	be tr	an	sferi	red t	01	he fir	st no	ominee m	mtion	ed	in th	he.	form	•				
4	Addre City / I State &	Place			e(s)																													
					PE	V Coo	de																											
5	Mobile nomin			eleph	ione	No).	of																										
6	Email	ID o	of not	mine	ee(s)																													
7	Nomin [Please and pro Photo A accoun Demat	ograp adha	any deta h & ar D	y one ails c Sign S Proof	of san	follov ne] g P.	AN Ban	lg I Ik																										
Sr. N	Nos. 8-14	shou	ald b	e fill	led o	nly if	fno	omin	ie	e(s) is	a n	ninor:						-																
8	Date o nomin			{in c	ase	of mi	ino	or										T							Τ									
9	Name case of) {i	n		_							_	Ī																
10	Addre	ss of	Gua	ardia	nn(s)																													

Composite Investments Pvt Ltd

Corporate Identity Number (CIN) - U67120KA1995PTC016916 | 30/1, 3rd Floor, S.J. Towers, Mission Road, Bengaluru - 560027 Tel.: +91-080-41145828/29 SEBI Registration No. INZ000279531 | CDSL DP: IN-DP-CDSL-553-2010 |https://www.compositedge.com/



	City / Place: State & Country:					
	PIN Code					
11	Mobile / Telephone no. of Guardian					50 10
12	Email ID of Guardian					
13	Relationship of Guardian with nominee					
14	Guardian Identification details – [Please tick any one of following and provide details of same] Photograph & Signature PAN Aadhaar Saving Bank account no. Proof of Identity Demat Account ID					
		Name(s) of hol	lder(s)		Signature(s)	of holder*
Sol	e / First Holder (Mr./Ms.)					
Se	cond Holder (Mr./Ms.)					
Tł	ird 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)

Nomination Form accepted and registered vide Registration No. ______ dated ______

For Depository Participant (Authorised Signatory)

Composite Investments Pvt Ltd



Declaration Form for opting out of nomination

[Annexure B to SEBI circular No. SEBI/HO/MIRSD/RTAMB/CIR/P/2021/601 dated July 23, 2021 on Mandatory Nomination for Eligible Trading and Demat Accounts]

То	Date		D	D	Μ	Μ	Y	Y	Y	Y
Trading Member/Participant's Name	Composite Investments Pvt Ltd									
Trading Member/Participant's Address	30/1, 3rd Floor, S.J. Towers, Mission Road, Bengaluru - 560027									
UCC/DP ID	1	Ν								
Client ID (only for Demat account)										
Sole/First Holder Name		M 51								
Second Holder Name	Second Holder Name									
Third Holder Name										
I / We hereby confirm that I / We do not w	ish t	o appo	int any	y nom	inee(s) in my	/our	tradii	ng / d	emat
account and understand the issues involve	d in I	non-app	oointn	nent o	f nomi	inee(s)	and f	urthe	r are a	ware
that in case of death of all the account he	older	(s), my	/ our	legal	heirs \	vould	need t	to sub	omit a	ll the
requisite documents / information for cla	imin	g of ass	ets he	eld in	my / c	our tra	ding /	dem	at acc	ount,
which may also include documents issued	by C	ourt or	other	such	compe	etent a	uthori	ity, ba	ised o	n the
value of assets held in the trading / demat	acco	ount.								
Name and Signature of Holder(s)*										
12					3					

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

Introduction Details

Introduction by an extising account holder of	
I confirm the identity, occupation & address of the applicant(s)	(DP Name Pre-Printed)
Introducer'sName:	
BOID:	
Signature of Introducer	(To be certified by DP Official)
In case of minor holder, photograph of quardian has to be affixed along with minor's photograph	

Option form for issue of dis booklet Date DP ID Client ID Name of the Sole/First Holder Name of the Second Holder Name of the Third Holder

To,

Composite Investments Pvt Ltd

No.30/1, 3rd Floor, S J Towers, Mission Road, Bangalore 560027.

Dear Sir/Madam,

I/We hereby state that: (Select one of the options given below)

O Option 1

I/We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening my/our CDSL account though I/We have issued a Power ofAttorney (POA) / executed PMS agreement in favour of / with **Composite Investments Pvt Ltd** (name of the 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 Holder	Third Holder				
Name							
Signature	A F5	🚫 \$5	A T5				

\bigcirc Option 2

I /We do not require the delivery since I/We have issued a POA / Composite Investments Pvt Ltd (name of the 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 atany laterdate.

Yours faithfully

	First /Sole Holder)	Second Holder	Third Holder
Name			
Signature	A F5	🚫 \$5	🛆 T5

COMPOSITEDGE Discount Broking. Algo Trading. Smart Tools.



Schedule - A Tariff Structure (For Individuals / Huf / Corporates)

	,	· ,	(In Rupees)
Sl.No.	Details	POA Clients (Option 1)	General Clients (Option 2)
1	Stamp Charges actuals (Payable upfront)	Rs. 50/-	Rs.50/-
2	Custody Charges	NIL	NIL
3	Annual Maintenance Charges : (Payable monthly)		
а	Individuals	Rs.25/- + Service Tax	Rs.35/- + Service Tax
b	Corporates	Rs.25/- + Rs.500/- (Payable upfront per Annum CDSL Charges) + Service Tax	Rs.35/- + Rs.500/- (Payable upfront per Annum CDSL Charges) + Service Tax
4	Transaction Charges per ISIN :		
а	Buy (Receive)	NIL	NIL
b	Sell (Debit)	Rs.15/- + Rs 5.50 (CDSL Charges)	0.05% or Rs.12 whichever is higher + Rs.5.50(COSL) Charges)
5	Inter Depository / Off Market Transfer		
а	Buy (Receive)	NIL	NIL
b	Sell (Debit)	0.04% or Rs.8 whichever is higher + Rs.5.50(CDSL) Charges)	0.05% or Rs.12 whichever is higher + Rs.5.50(COSL) Charges)
6	Demat (Per certificate)	Rs.2/- + Rs 30 as courier charges	Rs 2/- + Rs 30 as courier charges
7	Remat (Per ISIN)	Rs.15 + Rs.10 for every 100 shares or partthereof or a flat fee of Rs 10 per certificate whichever is higher (CDSL Charges)	Rs.15 + Rs I0 for every 100 shares or part thereof or a flat fee of Rs 10 per certificate whichever is higher (COSL Charges)
8	Courier charges per Dematlfiemat request	Rs.30I-	Rs.30/-
9	Pledge per ISIN	Rs.20/- + Rs.12 per request (CDSL Charges)	Rs 30/- + Rs12 per request (CDSL Charges)
10	Unpledge per ISIN	Rs 20/- + Rs 12 per request (CDSL Charges)	Rs 30/-+ Rs 12 per request (COSL Charges)
11	Pledge Invocation per ISIN	Rs.20/-	Rs.20/-
12	Margin Pledge charges (per ISIN)	Rs.25/-	Rs.25/-
13	Periodic Statement :		
а	By Email	NIL	NIL
b	Physical	Rs.30/- (Courier Charges)	Rs.30/- (Courier Charges)
14	Adhoc / Non Periodic Statement Requests :		
а	By Email	Rs.50/- per request	Rs.50/- per request
b	Physical	Rs.50 per request upto 10 pages. Every additional page at Rs.5 + Rs.30/-(Courier Charges)	Rs.50 per request upto 10 pages. Every additional page at Rs.5 + Rs.30/- (Courier Charges)
15	Delivery Instructions * :		
	First Delivery Instruction Book(10 leaves)	Free	Free
b	Every Additional Booklet	Rs.30/- (Courier Charges)	Rs.30/- (Courier Charges)
16	Late Transaction Fee	NIL	NIL
17	Cheque Bounce / Per cheque	Rs.100	Rs.100
18	Failed Transactions	Rs.50 per ISIN	Rs.50 per ISIN
19	Account Closure	NIL	NIL

NOTE: • For all purposes the bill date shall be construed as the date of demand and the bills will be considered as the bill cum Notice for payment and CIPL reserves the right to Freeze Depository account for debit transactions in case of non payment of charges after two days from the bill date. • Interest @ 13 % p.a. will be charged on the outstanding bill amount if not paid within the due date. • The above tariff is subject to change. Changes if any will be intimated 30 days in advance.

• Option 1 in the tariff structure is available only to clients having POA account with Composite Investments Pvt. Ltd. • Annual Maintenance Charge (AMC) is non refundable. • Service Tax, Education Cess and Higher Education Cess @ 12.38% where ever applicable

* Clients registering for easiest can issue online instructions obviating the need for a Delivery Instruction Book.

Sole /First Holder Signature	Second Holder Signature	Third Holder Signature					
	💫 56	💫 т6					



Authorisation to debit Demat account operating charges

To

Composite Investments Pvt Ltd

No. 30/1, 3rd Floor, S J Towers Mission Road, Bangalore - 560027

Dear Sir,

Sub: Authorisation for debit the Demat Account Charges

Ref: Client ID :_____

I/We have opened/have a beneficiary account with your CDSL depository along with a trading account for investment and trading purposes. It would be difficult for me/us to keep issuing separate cheques against your depository bills. I/We, therefore authorize you to debit the charges payable towards operation of the above account. I/We are aware of the charges for operating the said account. Any such sum debited to my trading account shall be binding on me/us.

Thanking you,

Yours truly,

Sole /First Holder Signature	Second Holder Signature	Third Holder Signature					
▲ F7	💫 s7	A T7					
	~ 51	\sim "					



is the karta of the joint Family

ANNEXURE – A Declaration of HUF status

As I/We wish to open a DP account with you in my capacity as karta of HUF of ______ I/we

beg to say that the first signatory to this letter, i.e

and other signatories are the adult coparceners of said family.

I/We further confirm that the business of said joint family is carried on mainly by the said karta as also by the other signatories hereto in the interest and for the benefit of entire body of co-parcener of the joint family.

In view of the fact that ours is not firm governed by the Indian Partnership Act of 1932, we have not got our said firm registered under the said Act.

I/We hereby undertake to inform you the death or birth of a co-parceners or of any change occurring at any time in the membership of our joint family during the currency of the account.

Name of Karta

|--|

Name of Adult Co -parceners

1.	
2.	
3.	
4.	

Name of Minor Co -parceners

1.	
2.	
3.	
4.	

Date of Birth of Minors

Signature



ANNEXURE – B Declaration of NRI status

		Dated
1. PASSPORT DETAILS		
Number	Date of Issue	Date of Expiry
Place of Issue	Issuing Authority	
2. NATIONALITY	3. COUNTRY OF ORIGIN	
4. LOCAL ADDRESS		

5. PURPOSE OF STAY ABROAD

I declare that I am a Non-Resident Indian residing at	(City / Country of stay)
and Citizen of	(Name of Country) for the purpose of Foreign

Exchange Regulation Act 1973/ Foreign Exchange Management Act 2000 and shall immediately inform you in the event of any change in my address, citizenship and /or residency or other status.

I/We understand that the above account will be opened on the basis of the statements/ declarations made by me/us, and I/We also agree that if any of the statements/ declarations made herein is found to be not correct in material particulars you are not bound to allow the facility.

I/We would confirm that all debits to my/our accounts for the purpose of investment in India and credits of investments in India are covered either by general or special permission of RBI.

I will ensure that investments in shares/securities or in India out of funds held in my/our account with you are governed by respective regulations of Reserve Bank of India.

Applicant signature :

Encl.: Photocopy of Passport (Countersigned by applicant)

CHECKLIST (NRI) - HOLDING STATUS

In case already holding securities:

- a) In the account opening form, RBI reference no. and approval date is to be quoted. Photocopy of the same be provided.
- b) In case NRI has never acquired any holding or securities from secondary market in the relevant column he should write(i) In the column of Reference No.: "No holdings" (ii) In the column of Approval Date : "Present Date"
- c) In case NRI has acquired securities through allotment in primary market i.e. direct investment scheme the necessary approval would have been obtained by the issuer company, under such cases he should write

(i) In the column of RBI Reference No.: "Under General Permission" (ii) In the column of RBI Approval Date : "Present Date"

DEMAT DEBIT AND PLEDGE INSTRUCTION

, an individual / firm / corporate having his / her / its residence /

KNOW ALL MEN BY THESE PRESENTS THAT I/WE, Mr./Mrs./M/s._____

with Beneficiary Owner's

Client ID ___ registered office at

(hereinafter referred to as "the Client") wish to avail/have availed the Broking/E-broking/Demat facilities and other services offered (hereinafter referred to as "services") by Composite Investments Private Limited (hereinafter 'CIPL'), a company incorporated under the Companies Act, 1956 and having its office at No. 30/1, S J Towers, 3rd Floor, Mission Road, Bangalore-560 027.

WHEREAS CIPL is registered as a Trading Member/Stock Broker of the National Stock Exchange of India Ltd.(NSE), BSE Ltd.(BSE), Multi Commodity Exchange of India Ltd. (MCX) and as a Depository Participant of the (CDSL) with the Securities andExchange Board of India (SEBI).

WHEREAS in the course of availing the services and for meeting the obligations (settlement or otherwise) as set forth herein in compliance with the necessary guidelines, acts, rules and regulations imposed in this behalf by NSE/BSE/MCX/CDSL/SEBI and or any other Regulatory Authority, I/We hereby give our consent to do, execute and perform the following acts, deeds, matters and things, provided CIPL complies with all the applicable conditions of all or any of their services offered by CIPL in their capacity as Stock Broker/Trading Member/Depository Participant.

SI. No.	Purpose	Signature of Client
1	Transfer of securities held in the beneficial owner accounts of the client towards Stock Exchange related deliveries / settlement	First Holder
	obligations arising out of trades executed by clients on the Stock Exchange through the	Second Holder
	same stock broker.	Third Holder
2	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM) for the purpose of meeting margin	First Holder
	requirements of the clients in connection with the trades executed by the clients on the	Second Holder
	Stock Exchange.	Third Holder
3	Mutual Fund transactions being executed on Stock Exchange order entry platforms	First Holder
		Second Holder
		Third Holder
4	Tendering shares in open offers through Stock Exchange platforms	First Holder
		Second Holder
		Third Holder

WHEREAS, in case of settlement obligations, the client account shall be debited and the below mentioned Clearing Member Account shall be credited:

CIPL (CDSL) Clearing Member Account					
NSE CM A/C - 1206520000001134	BSE CM A/C 1206520000002051	SLB CM A/C - 1206520000029312			

WHEREAS for the purpose of pledge of securities towards margin obligations arising out of trades executed by the client on stock exchange platforms, the pledge shall be created in the below mentioned Margin Pledge account:

Client Securities Margin Pledge Account - 120652000038933

Made at ______ on this day of ______,(Month 20)____ at _____

(Place).

We hereby agree to execute Instructions in terms of the clauses mentioned herein above.