



ZANSKAR SECURITIES PRIVATE LIMITED

# SARAL

INDIVIDUAL ACCOUNT OPENING FORM FOR

**CDSL DEMAT & NSE – BSE (CASH SEGMENT)**

ACCOUNT HOLDERS DETAILS	
First Holder Name	
Second Holder Name	
Third Holder Name	
First Holder PAN Number	
Second Holder PAN Number	
Third Holder PAN Number	
UCC Code	
DP BO ID	
Date	

Version: 1.0 Dated 01.06.2025

**Registered Office:** 4<sup>th</sup> Floor, Raheja Point 17/2, Magrath Road, Opp. Garuda Mall,  
Bangaluru – 560025, Karnataka, INDIA.  
Member: NSE, BSE, MCX, MSEI CDSL

**Know Your Client (KYC)****Application Form** (For Individual Only)**ZANSKAR SECURITIES PRIVATE LIMITED****SARAL KYC FOR FIRST/SOLE HOLDER**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

Application Type:  KRA Based KYC New KYC Modification KYC

KYC Mode

 Normal EKYC OTP EKYC Biometric Online KYC Offline KYC Digilocker**1. Identity Details** (Please refer guidelines overleaf)

PAN Number \_\_\_\_\_

Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Father/Spouse Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender

 Male Female Transgender

Marital Status

 Single Married

Nationality

 Indian Other \_\_\_\_\_

Residential Status

 Resident Individual Non-Resident Indian Foreign National Person of Indian Origin

PHOTOGRAPH

Sign Across  
Photograph

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**Proof of Identity (POI)** (Submitted for PAN exempted cases, please tick) A - Aadhaar Card : xxxx-xxxx-\_\_\_\_\_ B - Passport C - Voter ID Card D - Driving License E - NREGA Job Card F - NPR Z - Others

Identity Number: \_\_\_\_\_

**2. Address Details** (Please refer guidelines overleaf)**A. Correspondance / Local Address**

Line 1 \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City / Town \_\_\_\_\_

District \_\_\_\_\_

PIN \_\_\_\_\_

State \_\_\_\_\_

Country \_\_\_\_\_

Address Type

 Residential/Business Residential Business Registered Office Unspecified**NAME OF THE APPLICANT****SIGNATURE OF THE APPLICANT**

Place \_\_\_\_\_

Date \_\_\_\_\_



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**B. Permanent Residence Address of the Applicant** (If different from above A / Overseas Address (Mandatory for NRI))

Line 1					
Line 2					
Line 3					
City / Town		District		PIN	
State		Country			
Address Type	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified				

**Proof of Address** - (Attested copy of any 1 POA for correspondence and permanent address each to be submitted)

<input type="checkbox"/> A - Aadhaar Card : XXXX - XXXX - _____	<input type="checkbox"/> B - Passport
<input type="checkbox"/> C - Voter ID Card	<input type="checkbox"/> D - Driving License
<input type="checkbox"/> E - NREGA Job Card	<input type="checkbox"/> F - NPR
<input type="checkbox"/> Z - Others	Identity Number: _____

**3. Contact Details** (in CAPITAL)

Email ID			
Mobile No.	<b>+91 -</b> _____		
Tel (Off)		Tel (Res)	


**4. Application Declaration**

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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/We are aware that I/We may be held liable for it.


I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our 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.

Place		Date	
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NAME OF THE APPLICANT		SIGNATURE OF THE APPLICANT	
Place		 F - 03 of 13	
Date			

**For Office Use Only****In-Person Verification (IPV) carried out by**

Emp. Name		Emp. Code		
Designation		IPV Date		
<b>POS Code: 1400316631 - ZANSKAR SECURITIES PRIVATE LIMITED</b>				
<input type="checkbox"/> Self certified document copies received (OVD)				
<input type="checkbox"/> True copies of documents received (Attached)				

**Know Your Client (KYC)****Application Form** (For Individual Only)**ZANSKAR SECURITIES PRIVATE LIMITED****SARAL KYC FOR SECOND HOLDER**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

Application Type:  KRA Based KYC New KYC Modification KYC

KYC Mode

 Normal EKYC OTP EKYC Biometric Online KYC Offline KYC Digilocker**1. Identity Details** (Please refer guidelines overleaf)

PAN Number \_\_\_\_\_

Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Father/Spouse Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Gender

 Male Female Transgender

Marital Status

 Single Married

Nationality

 Indian Other \_\_\_\_\_

Residential Status

 Resident Individual Non-Resident Indian Foreign National Person of Indian Origin

PHOTOGRAPH

Sign Across  
Photograph

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**Proof of Identity (POI)** (Submitted for PAN exempted cases, please tick) A - Aadhaar Card : xxxx-xxxx-\_\_\_\_\_ B - Passport C - Voter ID Card D - Driving License E - NREGA Job Card F - NPR Z - Others

Identity Number: \_\_\_\_\_

**2. Address Details** (Please refer guidelines overleaf)**A. Correspondance / Local Address**

Line 1 \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City / Town \_\_\_\_\_

District \_\_\_\_\_

PIN \_\_\_\_\_

State \_\_\_\_\_

Country \_\_\_\_\_

Address Type

 Residential/Business Residential Business Registered Office Unspecified**NAME OF THE APPLICANT****SIGNATURE OF THE APPLICANT**

Place \_\_\_\_\_

Date \_\_\_\_\_



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**B. Permanent Residence Address of the Applicant** (If different from above A / Overseas Address (Mandatory for NRI))

Line 1				
Line 2				
Line 3				
City / Town	District	PIN		
State	Country			
Address Type	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified			

**Proof of Address** - (Attested copy of any 1 POA for correspondence and permanent address each to be submitted)

<input type="checkbox"/> A - Aadhaar Card : XXXX - XXXX - _____	<input type="checkbox"/> B - Passport
<input type="checkbox"/> C - Voter ID Card	<input type="checkbox"/> D - Driving License
<input type="checkbox"/> E - NREGA Job Card	<input type="checkbox"/> F - NPR
<input type="checkbox"/> Z - Others	Identity Number: _____

**3. Contact Details** (in CAPITAL)

Email ID			
Mobile No.	+91 - _____		
Tel (Off)		Tel (Res)	


**4. Application Declaration**

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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/We are aware that I/We may be held liable for it.


I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our 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.

Place		Date	
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NAME OF THE APPLICANT		SIGNATURE OF THE APPLICANT	
Place		 S - 03 of 12	
Date			

**For Office Use Only****In-Person Verification (IPV) carried out by**

Emp. Name		Emp. Code		
Designation		IPV Date		
<b>POS Code: 1400316631 - ZANSKAR SECURITIES PRIVATE LIMITED</b>				
<input type="checkbox"/> Self certified document copies received (OVD)				
<input type="checkbox"/> True copies of documents received (Attached)				

**Know Your Client (KYC)**

Application Form (For Individual Only)

**ZANSKAR SECURITIES PRIVATE LIMITED****SARAL KYC FOR THIRD HOLDER**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

Application Type:  KRA Based KYC New KYC Modification KYC

KYC Mode

 Normal EKYC OTP EKYC Biometric Online KYC Offline KYC Digilocker**1. Identity Details** (Please refer guidelines overleaf)

PAN Number

Name

Maiden Name

Father/Spouse Name

Date of Birth

Gender

 Male Female Transgender

Marital Status

 Single Married

Nationality

 Indian Other \_\_\_\_\_

Residential Status

 Resident Individual Non-Resident Indian Foreign National Person of Indian Origin

PHOTOGRAPH

Sign Across  
Photograph

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**Proof of Identity (POI)** (Submitted for PAN exempted cases, please tick) A - Aadhaar Card : xxxx-xxxx-\_\_\_\_\_ B - Passport C - Voter ID Card D - Driving License E - NREGA Job Card F - NPR Z - Others

Identity Number: \_\_\_\_\_

**2. Address Details** (Please refer guidelines overleaf)**A. Correspondance / Local Address**

Line 1

Line 2

Line 3

City / Town

District

PIN

State

Country

Address Type

 Residential/Business Residential Business Registered Office Unspecified**NAME OF THE APPLICANT****SIGNATURE OF THE APPLICANT**

Place

Date



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**B. Permanent Residence Address of the Applicant (If different from above A / Overseas Address (Mandatory for NRI))**

Line 1				
Line 2				
Line 3				
City / Town	District	PIN		
State	Country			
Address Type	<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified			

**Proof of Address - (Attested copy of any 1 POA for correspondence and permanent address each to be submitted)**

<input type="checkbox"/> A - Aadhaar Card : XXXX - XXXX - _____	<input type="checkbox"/> B - Passport
<input type="checkbox"/> C - Voter ID Card	<input type="checkbox"/> D - Driving License
<input type="checkbox"/> E - NREGA Job Card	<input type="checkbox"/> F - NPR
<input type="checkbox"/> Z - Others	Identity Number: _____

**3. Contact Details (in CAPITAL)**

Email ID			
Mobile No.	<b>+91 -</b> _____		
Tel (Off)		Tel (Res)	


**4. Application Declaration**

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we 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/We are aware that I/We may be held liable for it.


I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our 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.

Place		Date	
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NAME OF THE APPLICANT		SIGNATURE OF THE APPLICANT	
Place			
Date			T - 03 of 12

**For Office Use Only****In-Person Verification (IPV) carried out by**

Emp. Name		Emp. Code		
Designation		IPV Date		
<b>POS Code: 1400316631 - ZANSKAR SECURITIES PRIVATE LIMITED</b>				
<input type="checkbox"/> Self certified document copies received (OVD)				
<input type="checkbox"/> True copies of documents received (Attached)				

# INDEX OF DOCUMENTS

SR. NO.	NAME OF THE DOCUMENT	BRIEF SIGNIFICANCE OF THE DOCUMENT	PAGE NO.
<b>MANDATORY &amp; VOLUNTARY DOCUMENTS AS PRESCRIBED BY SEBI &amp; EXCHANGES</b>			
1.	KRA FORM AND ACCOUNT OPENING FORM	A. KYC Form - Document captures the basic info. about the constituent & an instruction / check list. B. Document captures the additional information about the constituent relevant to Trading/ Demat account & an instruction/check list.	1 - 7
2.	INDEX OF DOCUMENTS	INDEX OF DOCUMENTS	8
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9.	MEMBERSHIP DETAILS	Membership Details	18
<b>SEPARATE COPY FOR CLIENT: BOOKLET-2</b>			
1.	RIGHTS AND OBLIGATIONS	Document stating the Rights & Obligations of stock broker/trading member, Authorised Person and client for trading on equity and commodity exchange (including additional rights & obligations in case of internet/wireless technology-based trading).	2 - 4
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**Disclosure in Terms of SEBI Circular No.: SEBI/MRD/SE/CIR-42/2003 Dated November 19, 2003** Zanskar Securities Private Limited engages in proprietary trades on BSE/NSE/MCX/MSEI exchanges, encompassing both cash / derivatives / currency and commodity segments.

**Zanskar Securities Pvt. Ltd.** besides doing client-based business also does its own investment and/or trading.

“Proprietary Trading Disclosure noted”

SIGNATURE OF FIRST HOLDER	SIGNATURE OF SECOND HOLDER	SIGNATURE OF THIRD HOLDER
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## KYC CHECKLIST (PLEASE TICK WHEREVER APPROPRIATE)

ACCEPTABLE DOCUMENTS (COPIES OF ALL DOCUMENTS TO BE SELF-ATTESTED)		PLEASE TICK
PAN Card	Account Holder & Joint Holder's (If Any)	
Photograph	One Coloured Front Face Photograph (Passport Size)	
Proof of Identity (Any One)	1. Unique identification number (UID) (Aadhaar)	
	2. Valid Passport (Name, Address & Photo page)	
	3. Voter ID (front and back)	
	4. Valid Driving License (Name, Address & Photo page)	
	5. NREGA Job Card, National Population Register Letter	
	6. Proof of Possession Aadhaar, E-KYC Authentication Verified Aadhaar.	
	7. Other 1 (Pls. Specify)	
Proof of Address (Any One)	1. Valid Passport	2. Voter ID (Front & Bank)
	3. Valid Driving License	4. UID – Aadhaar
Permanent / Correspondence	5. Ration Card	6. NREGA Job Card
	7. Electricity, Gas, Landline Tel Bill (Not more than 2 months old)	
Bank Proof With MICR / IFSC Code (1st Holder only)	1. Bank Account Statement / Passbook (Not more than 3 months old)	
	2. Banker's Certificate on letter head of the Bank (ORIGINAL)	
Demat Proof (Any One) (1st Holder only)	1. Client Master (CML Copy duly attested by DP)	
	2. DP Statement / Transaction cum Holding Statement	
<b>ADDITIONAL DOCUMENT(S) IN CASE OF TRADING IN DERIVATIVES SEGMENT(S)</b>		
Proof of Income (Any One)	1. Copy of ITR Acknowledgement	
	2. In case of salary income - Salary Slip, Copy of Form 16	
	3. Net-worth certificate (Not more than 1 year old)	
	4. Copy of Demat Account Holding Statement	
	5. Bank Account Statement for last 6 months reflecting Income	

### FATCA / CRS DECLARATION / SELF CERTIFICATION FOR INDIVIDUAL

Client Name			
	First/Sole Holder	Second Holder	Third Holder
Are you U. S. Person	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specify country of residence for tax purpose (Tax Residency)	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other
Specify country of Citizenship	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other	<input type="checkbox"/> India <input type="checkbox"/> Other

**Note:** If you are a U.S. person and / or if your tax residency / nationality / citizenship is other than India, then please provide declaration / self-certification under FATCA / CRS. This declaration form can be downloaded from <http://www.nubra.io> or call at centralized helpdesk at 08645322504 or write to [support@nubra.io](mailto:support@nubra.io)

SIGNATURE OF FIRST HOLDER	SIGNATURE OF SECOND HOLDER	SIGNATURE OF THIRD HOLDER
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## DEMAT & TRADING ACCOUNT RELATED DETAILS

### A. BANK ACCOUNT DETAILS

Penny Drop Name	NA -	Penny Drop Status	NA -
Bank Name			
Branch Add.			
Account No.		Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current
MICR Code		IFSC Code	

### B. DEPOSITORY ACCOUNT DETAILS (DP-1 DETAILS CONSIDERED FOR PAYOUT OF SECURITIES IF FILLED)

#### DEPOSITORY DETAILS

DP Type	<input type="checkbox"/> CDSL <input type="checkbox"/> NSDL		
DP Name	ZANSKAR SECURITIES PRIVATE LIMITED		
Client Name			
DP ID	12102000		
BO ID			

### C. TRADING PREFERENCES

1. Please sign in the relevant boxes where you wish to trade. | 2. Please strike off the segment not chosen by you.

Exchanges	NSE, BSE				-NSE, BSE
All Segments	Cash / Mutual Fund	F&O	Currency	Debt	Commodity
-NA	-NA	-NA	-NA	-NA	-NA

If you do not wish to trade in any of segments/ Mutual Fund, please mention here \_\_\_\_\_

### D. INFORMATION FOR PREVENTION OF MONEY LAUNDERING ACT, 2002

Trading Experience	Number of years of Investment / Trading Experience _____ Year's		
Gross Annual Income	<input type="checkbox"/> Below 1 L <input type="checkbox"/> 1-5 L <input type="checkbox"/> 5-10 L <input type="checkbox"/> 10-25 L <input type="checkbox"/> 25 L -1 Cr <input type="checkbox"/> Above 1 Cr		
Occupation Details	<input type="checkbox"/> Govt. Services		<input type="checkbox"/> Professional
	<input type="checkbox"/> Public Sector		<input type="checkbox"/> Private Sector Service
	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Retired
Nature Of Business	<input type="checkbox"/> Manufacturing		<input type="checkbox"/> Services
	<input type="checkbox"/> Consultancy	<input type="checkbox"/> Trading	
Client Category (Commercial Participant Non-Commercial Participant)	-Not Applicable for SARAL Account-		
Is the Client Politically Exposed Person (PEP) or Related to a PEP	<input type="checkbox"/> PEP <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not a PEP / RPEP		

### E. PAST ACTIONS

Details of any action / proceedings initiated / pending / taken by SEBI / Exchanges / any other authority against the applicant / constituent or its Partners / promoters / whole time directors /authorized persons in charge of dealing in securities / commodities during the last 3 years: Yes No

If Yes, please specify \_\_\_\_\_

### F. GST REGISTRATION DETAILS

GSTIN No.		Validity Date		State	
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### G. DEALING THROUGH AUTHORISED PERSON (AP) / OTHER STOCK BROKERS

Name of Stock Broker		Name of AP	
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Name of Exchange		Client Code	
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Whether you are a Member / AP of any Exchange	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes, provide SEBI / EXCHANGES REGISTRATION NO:	Reg No. _____ Website: _____
---	------------------------------

Details of disputes/dues pending from/to such stock broker/AP:	<input type="checkbox"/> Yes <input type="checkbox"/> No , If Yes, Please Specify
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### H. INTRODUCER DETAILS

Status of Introducer	<input type="checkbox"/> AP <input type="checkbox"/> Employee <input type="checkbox"/> Existing Client <input type="checkbox"/> Others (Specify) _____
----------------------	--

Introducer Name		AP/Emp/Client Code	
-----------------	--	--------------------	--

Introducer Address			
--------------------	--	--	--

Mobile Number		Introducer Signature	
---------------	--	----------------------	--

### DECLARATION

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.

I/We confirm having read/been explained & understood the contents of the document on policy & procedures of the Stock Broker & the tariff sheet applicable for trading as well as DEMAT account.

I/We further confirm having received, read & understood the contents of the 'Rights & Obligations' of members, authorised person & clients, and 'Risk Disclosure Document, for capital market & derivatives segments (equity, commodity)' and rights & obligations related to margin trading facility provided to client. Guidance note, Do's & Don't for trading on the exchange (s) for investors / demat account Do's & Don't / Guidance note, Do's & Don't for clients / Rights & obligations of beneficial owner & depository participant & details of terms & conditions for the investor / client for using Mutual fund transaction facility. 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's designated website i.e [www.nubra.io](http://www.nubra.io)

The Rules & Regulations of the Depository & 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 also instruct Zanskar Securities Private Limited to download information available from KRA/CKYC.

Place		Date	
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First Holder Signature	Second Holder Signature	Third Holder Signature
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## ADDITIONAL DETAILS FOR OPENING A DEMAT ACCOUNT (FOR INDIVIDUALS)

Application No.		Internal Reference No.	
DP ID	<b>12102000</b>	BO ID	
UCC Code		Date	

(To be filled by the applicant in BLOCK LETTERS in English)

I/We request you to open a demat account in my/ our name as per following details: -

### HOLDER'S DETAILS

First Holder Name / Search Name		PAN	
		UID	<b>XXXX - XXXX -</b>
Exchange Name & ID	<b>NSE - 90370, BSE - 6870, MCX - 57510, MSEI - 85550</b>	UCC	
Second Holder Name		PAN	
		UID	<b>XXXX - XXXX -</b>
Third Holder Name		PAN	
		UID	
Firm 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)

<b>STATUS</b>	<b>SUB-STATUS</b>
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> INDIVIDUAL RESIDENT

### STANDING INSTRUCTIONS / AUTHORIZATION FROM THE CLIENT (FOR TRADING & DEMAT ACCOUNT OPENING)

Whether you wish to receive (a) Physical OR Electronic Contract Note	<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
Whether you wish to avail the facility of internet trading / wireless technology / mobile trading	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Whether you wish to receive standard documents in electronic OR physically	<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
Whether you wish to receive the confirmation, account statements and any other correspondence electronically or physically	<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
Please specify your choice of receiving a copy of KYC form	<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
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.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I would like to receive Statement of Account / Transaction-cum-Holding Statement / Daily Margin Statement and All Other Statement at my registered 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 instruct the DP to receive each and every credit in my/ our account	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I / We would like to receive the Annual Report	<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
I / We wish to receive dividend / interest directly in to my/or 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]	<input type="checkbox"/> Yes	<input type="checkbox"/> No
SMS Alert Facility - On registered Mobile Number (Mandatory if you are giving Power Of Attorney (POA). Ensure that the mobile number is provided in the KYC application form	Mobile No.- +91 _____	
BSDA Facility - I / We wish to avail the BSDA facility	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I / We wish to opt for DDPI (Demat Debit and Pledge Instruction) facility	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Account Statement Requirement	<input type="checkbox"/> As per SEBI Regulation <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly			
I/We would like to receive client copy of containing following. <ul style="list-style-type: none"> <li>Rights and Obligations of Stock Rights and Obligations of Stock Brokers, Sub-Broker /AP /APs and Clients as prescribed by SEBI and Exchanges</li> <li>Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories</li> <li>Risk disclosure Document for Capital, Currency, Stock and Commodity Derivatives Segment</li> <li>Guidance Note-Do's and Don'ts for Trading on the Exchange (s) for Investors</li> <li>Policies and Procedures applicable to clients.</li> </ul>		<input type="checkbox"/> Electronic <input type="checkbox"/> Physical		
<b>Transactions Using Secured Texting Facility (TRUST).</b>				
I/We wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. I/We 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 Conditions Annexure - 2.6 mentioned BO ID registered for TRUST				
Stock Exchange Name & ID	Clearing Member Name	Clearing Member ID (Optional)		
NSE - 90370	ZANSKAR SECURITIES PRIVATE LIMITED			
BSE - 6870	ZANSKAR SECURITIES PRIVATE LIMITED			
MCX - 57510	ZANSKAR SECURITIES PRIVATE LIMITED			
MSEI - 85550	ZANSKAR SECURITIES PRIVATE LIMITED			
	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.			
<b>MODE OF OPERATION FOR EXECUTION OF TRANSACTIONS (TRANSFER, PLEDGE, FREEZE)</b>				
<input type="checkbox"/> Singly		<input type="checkbox"/> Jointly		<input type="checkbox"/> Anyone of the Holder
<b>CONCENT FOR COMMUNICATION TO BE RECEIVED BY FIRST ACCOUNT HOLDER/ALL ACCOUNT HOLDERS (TICK THE APPLICABLE BOX, IF NOT MARKED DEFAULT OPTION WOULD BE FIRST HOLDER)</b>				
<input type="checkbox"/> All Holders		Email ID		
<input type="checkbox"/> First / Sole Holder				
<input type="checkbox"/> Second Holder				
<input type="checkbox"/> Third Holder				
<b>First Holder Signature</b>		<b>Second Holder Signature</b>		<b>Third Holder Signature</b>
 F - 08 of 13		 S - 07 of 12		 T - 07 of 12
<b>FOR OFFICE USE ONLY</b>				
<b>Documents verified with Originals / Client Interviewed By / In-Person Verification done by</b>				
UCC / Client Code		Employee Sign		
Organization Name	Zanskar Securities Private Limited			
Employee Name				
Designation				
Date				
I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.				

## NOMINATION FORM (FOR DEMAT & TRADING ACCOUNT)

Client Name	DP ID	12102000
DP BO ID	UCC Code	Date

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 trading and/or demat account in the event of my / our death.

Nominee Details	Nominee-1	Nominee-2	Nominee-3
Nominee Name			
Nominee Address			
OR			
Same as Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
City			
State			
PIN Code			
Country			
Mobile No. of Nominee(s)			
Email ID of Nominee(s)			
PAN/UID of Nominee(s)			
DOB of Nominee(s)			
Relationship with BO			
Percentage (%) of allocation of securities Equally [If not equally, please specify percentage] Or Share of each Nominee	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form			
Nominee ID (Please Tick)	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar

### GUARDIAN DETAILS IF NOMINEE IS A MINOR

Guardian Name			
Full Address of the Guardian			
Same as Nominee	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mobile No. of Guardian(s)			
Email ID of Guardian(s)			
PAN/UID of Guardian(s)			
DOB of Guardian(s)			
Relationship with Nominee(s)			
Guardian(s) ID (Please Tick)	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar

F - 09 of 13

S - 08 of 12

T - 08 of 12

**Note:**

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

Details of the Witness	Witness Details
Name of witness	
Address of witness	
Signature of witness	



## DECLARATION FORM FOR OPTING OUT OF NOMINATION

To,  
**Zanskar Securities Private Limited**  
 4<sup>th</sup> Floor, Raheja Point, 17/2, Magrath Road, Ashok Nagar,  
 Opp. Garuda Mall, Bangalore - 560025, Karnataka, India

Date :

UCC Code		DP ID	<b>12102000</b>	DP BO ID	
First / Sole 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.

First Holder Signature	Second Holder Signature	Third Holder Signature
 F - 10 of 13	 S - 09 of 12	 T - 09 of 12

## ACKNOWLEDGEMENT RECEIPT




To,  
**Zanskar Securities Private Limited**  
 4<sup>th</sup> Floor, Raheja Point, 17/2, Magrath Road, Ashok Nagar,  
 Opp. Garuda Mall, Bangalore - 560025, Karnataka, India

Date :

I/We hereby acknowledge receipt of the following documents:

1. AOF - Account Opening Form (Trading & Demat)
2. Rights & Obligations of Stock Broker
3. Rights & Obligations of Beneficiary Owner & Depository Participant as prescribed by SEBI & Stock Exchanges
4. Rights & Obligations - MTF
5. Risk Disclosure Document (RDD)
6. Guidance Note - Do's & Don'ts for trading on the Exchange(s) for Investors.
7. Policies And Procedures
8. Investor Charter
9. Tariff Sheet

I/We understand that the Voluntary documents executed by me/us are out of my/our own free will. I state that I have read and understood all above documents and these documents are binding upon me.

First Holder Signature	Second Holder Signature	Third Holder Signature
 F - 11 of 13	 S - 10 of 12	 T - 10 of 12

# TARIFF SHEET

**Brokerage, Charges, Fees applicable for your Investment, Trading and Demat account with Zanskar**

Charges related to Exchange Transactions & Other Applicable Charges and Fees

Type of Trade / Transaction	Amount / Fees / Brokerage / Charges (GST extra)
Delivery (Equity / ETF)	Zero Brokerage
Intraday (Equity / ETF)	0.03% of Turnover
Futures: - Equity / Currency / Commodity	₹10/- per Lot
Options: - Equity / Currency / Commodity	₹5/- per Lot or 0.2% of premium whichever is lower
Square Off by System / Zanskar	₹20/- per Executed Order (in addition to brokerage for all segments)
Call & Trade Service	₹20/- per Executed Order (in addition to brokerage for all segments)
IPO Bid or Allotment	Nil
Buyback / OFS / Takeover	₹20/- per Executed Order
Mutual Fund Transactions Charges	Nil
DP Charges (Sell/Off Market/On Market Debit)	₹12.50 for every transaction (instruction) in the Scrip / ISIN
Auction Penalty	The penalty is calculated based on the difference between the auction settlement price and the original selling price, plus an additional 0.05% penalty per day for each day the shares remain undelivered
Interest on late payment	Negative Balance: 0.05% or 18% p.a. (No GST) Margin Shortfall and over-utilisation of non-cash equivalent margin: 0.035% per day or 12.775% p.a.

**Note:** Above charges do not include taxes. GST at applicable rates shall be applied separately.

Clients who opt to receive physical contract notes will be charged ₹100 per instance plus courier charges. A brokerage of 0.1% of the contract value will be charged for contracts where the client provides/takes physical delivery to/from exchanges. All physical settled contracts (Futures & Options) will also carry an applicable Exchange charge. Brokerage of ₹20 per executed order is also charged on expired, exercised, and assigned Options contracts.

Brokerage will not exceed the rates specified by SEBI and the Exchanges. All Statutory and Regulatory charges, taxes will be levied at actuals. In addition to the brokerage, the following charges will also be levied. These charges do not include taxes.

## Additional Charges Applicable on Exchange Transactions


Other Charges	Description of Charges
Exchange Turnover Charges	Charges levied by exchanges on each transaction
Securities Transaction Charges (STT)	Direct Tax levied under the Securities Transaction Tax (STT) Act
Commodity Transaction Charge (CTT)	Direct Tax levied by the Government for certain commodities
Stamp Duty	Charges levied by State Governments where investor resides
SEBI Turnover Fees	Charges levied by SEBI on each transaction
Clearing Charges	Charges levied by the Clearing Member
IPF Charges	Charges levied by the Exchange
GST	Goods and Service Tax (GST) applicable

I agree with the terms and conditions mentioned above. I agree to pay the charges as per ones mentioned above with respect to my account (investment / trading / demat / user) at Zanskar. I understand that the tariff is subject to change and I shall keep myself updated with the same from the pricing section on Zanskar's website.

<b>NAME OF THE APPLICANT</b>	<b>SIGNATURE OF THE APPLICANT</b>
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## ADDITIONAL TARIFF SHEET & STRUCTURE

Type of Trade / Transaction	Amount / Fees / Brokerage / Charges (GST extra)
KYC & Account Opening Charges	Zero
Annual Maintenance Charge's (AMC)	₹300 + 18% GST (Not applicable for 1 <sup>st</sup> year)
KYC & Account Opening Charges For <b>(Non-Individual)</b>	₹500 + 18% GST (Only for body corporate and Limited Liability Partnership)
Annual Maintenance Charge's (AMC) For <b>(Non-Individual)</b>	₹1000 + 18% GST (Not applicable for 1st year)
BSDA Clients	Up to ₹ 4,00,000 - No AMC, ₹ 4,00,001 to ₹10,00,001 - ₹ 100 + 18% GST Above ₹ 10,00,001 - ₹ 300 + 18% GST
Dematerialisation / Rematerialisation (Including MF)	₹100 per certificate + ₹100 Courier charges
Bounced Contract Note (Physical Contract Note dispatch)	Up to ₹ 100/- per instance up to 5 pages & in multiple thereof
Margin Pledge & Cuspa Pledge (Creation / Confirmation)	₹10 + ₹5 for every transaction (instruction) in the Scrip / ISIN
Margin Pledge & Cuspa Pledge (Closure / Invocation/Release)	₹10 + ₹5 for every transaction (instruction) in the Scrip / ISIN
MTF (Pledge/Unpledge/Invocation)	₹20 + ₹12 for every transaction (instruction) in the Scrip / ISIN
Margin Repledge	Zero
Beneficiary add in Demat (For Off market trf)	₹ 25 per Demat account for physical request
Inter Settlement Pay-in Charges (From Zanskar's POOL A/c)	₹12.50 for every transaction (instruction) in the Scrip / ISIN
Account Freezing / De-Freezing Charges / Modification / DDPI / Payment Related Charges	
Account Freeze	Nil (frozen / dormant as per regulations / guidelines)
Account De-Freeze / Reactivate	₹25/- per request
Online Modification's / Addition	₹25/- per request
DDPI Activation	₹100/- (exclusive of GST)
Top-Up via UPI & Withdrawal: - Nil	Top-Up via Net Banking - ₹ 9 + GST
Periodic Statements / Ad Hoc Statements / Non-Payment of Dues / Obligations & Other Charges	
By Email (Periodic)	Nil
Physical (Periodic / Ad Hoc Request)	₹100/- per request for + ₹100 Courier charges
By Email (Ad Hoc Request)	₹20/- per request
Bounced Cheque Charges	₹500/- per bounced cheque
KRA modification (post account opening)	₹55/- per request only
Rate of Interest applicable on non-payment of dues or obligations related to depository	0.035% per day or 12.775% p.a.
<ul style="list-style-type: none"> <li>▪ Above charges do not include taxes. GST at applicable rates shall be applied separately.</li> <li>▪ CDSL charges, if any, are included in the amounts listed above</li> <li>▪ For BSDA accounts electronic statements shall be provided free of cost and Physical statements will be charged Rs. 25 per statement.</li> </ul> <p>For all purposes, the bill date shall be construed as the demand date and the bills will be considered as the bill cum notice for payment and Zanskar reserves the right to freeze trading / depository / user account for debit transactions in case of non-payment of charges after two days from the bill date.</p> <p>I agree to pay the charges as per ones mentioned above with respect to my account (Investment / trading / demat / user) on Zanskar along with the transaction charges as included in this Account Opening Form. I understand that the tariff is subject to change and I shall keep myself updated with the same from the pricing section the same from the pricing section on Zanskar website. All charges are non-refundable. Taxes, Statutory and Regulatory charges are as applicable Express Courier Charges as applicable.</p> <p><b>Note:</b> The charges quoted above are for the services listed. Apart from these, Zanskar may also offer additional paid services. Zanskar will be informing the customers with regards to such services and charges associated with the same will be billed separately by intimating on an upfront basis.</p>	
NAME OF THE APPLICANT	SIGNATURE OF THE APPLICANT
 F - 13 of 13	 S - 12 of 12
 T - 12 of 12	

## MEMBERSHIP DETAILS

NAME OF TRADING MEMBER	<b>ZANSKAR SECURITIES PRIVATE LIMITED</b>	
REGISTERED OFFICE ADDRESS	4th floor, Raheja Point 17/2, Magrath Road, Ashok Nagar, Opp Garuda Mall, Bengaluru, Karnataka- 560025	
SEBI REGISTRATION NUMBER	Stock Broker	INZ000316631 effective 11.03.2024
	Depository	IN-DP-803-2025 effective 11.04.2025
EXCHANGES AND SEGMENTS	NSE	TM Code: 90370
	BSE	TM Code: 6870
	MCX	TM Code: 57510
	MSEI	TM Code: 85550
	CDSL	DP ID: 102000      Membership ID: IN-DP-803-2025

## CLEARING MEMBER DETAILS

EXCHANGE	BSE / NSE / MSEI					MCX
SEGMENT	CASH	F&O	COMMODITY	CURRENCY	DEBT	COMMODITY
CLEARING MEMBER NAME & CODE	ZANSKAR SECURITIES PRIVATE LIMITED			ORBIS FINANCIAL CORPORATION LTD.		JAINAM BROKING LIMITED
	M70103	M70103	M70103	C51564	C51564	8040
MEMBERSHIP TYPE	CM	CM	CM	CM	CM	CM
DESIGNATED CLEARING CORPORATION	NCL					-

CEO & DIRECTOR(s)	Mayank Sachan & Vandana Jain Email ID: <a href="mailto:contact@zanskarsec.com">contact@zanskarsec.com</a> Contact No. - +91 86605 00796
COMPLIANCE OFFICER	Shilendra Singh Rajput Email ID: <a href="mailto:compliance@zanskarsec.com">compliance@zanskarsec.com</a> Contact No. - 08645322504
CUSTOMER SUPPORT	Email ID: <a href="mailto:support@nubra.io">support@nubra.io</a> Contact No. - 08645322504
CIN	U64199KA2023PTC175635
OFFICIAL WEBSITE	<a href="http://www.nubra.io">www.nubra.io</a>
MOBILE / TEL. NUMBER	08645322504

For any grievance, please email Zanskar on [grievance@zanskarsec.com](mailto:grievance@zanskarsec.com) or call us on +91 86605 00796

**If you are not satisfied with the response, please contact the concerned exchange at:**

Regulator	Web Address	Contact Number	Email Address
NSE	<a href="http://www.nseindia.com">www.nseindia.com</a>	1800-266-0058	<a href="mailto:ignse@nse.co.in">ignse@nse.co.in</a>
BSE	<a href="http://www.bseindia.com">www.bseindia.com</a>	+91-22-2272-1234/33	<a href="mailto:is@bseindia.com">is@bseindia.com</a>
MCX	<a href="http://www.mcxindia.com">www.mcxindia.com</a>	+91-022-6731 8888	<a href="mailto:grievance@mcxindia.com">grievance@mcxindia.com</a>
MSEI	<a href="http://www.msei.in">www.msei.in</a>	+91-022-61129000 Ext. No. 9028	<a href="mailto:investorcomplaints@msei.in">investorcomplaints@msei.in</a>
CDSL	<a href="http://www.cdslindia.com">www.cdslindia.com</a>	+91-022-22723333	<a href="mailto:complaints@cdslindia.com">complaints@cdslindia.com</a>

You can also lodge your grievances with SEBI at <https://scores.sebi.gov.in> For any queries, feedback or assistance, please contact SEBI office or toll-free Helpline at 1800-22-7575 / 1800-266-7575