

CLIENT REGISTRATION FORM

INDIVIDUAL / NON-INDIVIDUAL

Form No. :

Name :

Account Code :

Branch Code :

Family Code :

AP / Employee :

BO ID: 12083800



Pentagon Stock Brokers Private Limited

Member of :

National Stock Exchange of India Limited (NSE) Equity, Derivative, Currency, Debt

Bombay Stock Exchange Limited (BSE) Equity Currency, Debt & Derivative

Central Depository Services Limited (CDSL)

Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051

CIN: U74110MH2014PTC254979

Email: broking@pentagonbroking.com | Website: www.pentagonbroking.com | Tel: 022 42577000

Version : 1.2

REGISTRATION DETAILS

SEBI Registration Number :- INZ000068338; Date: August 29, 2016 SEBI Reg. No. - IN-DP-302-2016
CIN Number :- U74110MH2014PTC254979 DP ID - 12083800
BSE Clearing Member ID :6646 NSE Broker Code- 90094

Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051 **CIN:** U74110MH2014PTC254979
Email: broking@pentagonbroking.com | **Website:** www.pentagonbroking.com | **Tel:** 022-4257 7000

For any grievance/dispute please contact Pentagon Stock Brokers Pvt. Ltd at the given registered address or following officer

Designation	Name	Telephone	EMAIL ID
Designated Director	Subhash Vishwakarma	42577000	subhash.vishwakarma@pentagonbroking.com
Designated Director	Jignesh Lathigra	42577000	jignesh.lathigra@pentagonbroking.com
Company Secretary / Compliance Officer	Surmeet Chandhok	42577000	compliance@pentagonbroking.com
Grievances/Dispute/		42577000	ig@pentagonbroking.com
Suggestion		42577000	compliance.broking@pentagonbroking.com
Principal Officer	Jignesh Lathigra	42577000	jignesh.lathigra@pentagonbroking.com
In case not satisfied with the response, please contact the exchange			
NSE at ignse@nse.co.in and Phone no. 022-26598190 FaxNo.:022-26598191.			
BSE at: is@bseindia.com ,Phone No.:022-22728097, Fax No.:022-22723677			

INSTRUCTIONS / CHECK LIST

1. Additional documents in case of trading in derivatives segments - illustrative list:

Copy of ITR Acknowledgement	Copy of Annual Accounts
In case of salary income Salary Slip, Copy of Form 16	Net worth certificate
Copy of demat account holding statement.	Bank account statement for last 6 months
Any other relevant documents substantiating ownership of assets.	Self - declaration with relevant supporting documents.

*In respect of other clients, documents as per risk management policy of the stock broker need to be provided by the client from time to time.

- Copy of cancelled cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
- Demat master or recent holding statement issued by DP bearing name of the client.
- For individuals:
 - Stock broker has an option of doing 'in-person' verification through web camera at the branch office of the stock broker/sub-broker's office.
 - In case of non-resident clients, employees at the stock broker's local office, overseas can do in-person' verification. Further, considering the infeasibility of carrying out 'In-person' verification of the non-resident clients by the stock broker's staff, attestation of KYC documents by Notary Public, Court, Magistrate, Judge, Local Banker, Indian Embassy / Consulate General in the country where the client resides may be permitted.
- For non-individuals:
 - Form need to be initialized by all the authorized signatories.
 - Copy of Board Resolution or declaration (on the letterhead) naming the persons authorized to deal in securities on behalf of company/firm/others and their specimen signatures.
- Kindly update your particulars like Communication / Residential Address, Email ID, Mobile No., Financial Details (ITR, Networth) (if any) to the stock broker and depository participant in a timely manner.**

Instructions to the Applicants (BOs) for account opening:

- Signatures can be in English or Hindi or any of the other languages contained in the 8th Schedule of the Constitution of India. Thumb impressions and signatures other than the above mentioned languages must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate / Special Executive Officer under his/her official seal.
- Signatures should be preferably in black ink.
- Details of the Names, Address, Telephone Number(s), etc., of the Magistrate / Notary Public / Special Executive Magistrate / Special Executive Officer are to be provided in case of attestation done by them.
- In case of additional signatures (for accounts other than individuals), separate annexures should be attached to the account opening form.
- In case of applications containing a Power of Attorney, the relevant Power of Attorney or the self-certified copy thereof, must be lodged along with the application.
- All correspondence / queries shall be addressed to the first / sole applicant.
- Strike off whichever option, in the account opening form, is not applicable.



Pentagon Stock Brokers Pvt. Ltd.

Dear Investor ,

We thank you for your keen interest in opening a trading and demat account with us. We look forward to serve you to your utmost satisfaction. This KYC Form is designed to make your account opening formalities easier.

We have attached a checklist at the beginning of the KYC Form and request you to verify, prior to handling over the KYC Form that all the document & signatures are in order. We would be able to process your account – opening request faster if the documentation is complete all respects, hence please take immense care to complete all the account opening formalities and documentation.

Further the small booklet confirms to all the Rights & Obligation of Stock Broker, Sub-Brokers and Clients / Internet & Wireless Technology Based Trading Facility / Risk Disclosure Document (RDD) / Guidance – DO's and DON'T's / Rights & Obligation of Beneficial Owner and Depository Participant / Policies and Procedures of Trading Member laid down by SEBI.

However should you requires any clarification / assistance at any stage of the account opening, please feel free to contact your Relationship Executive / Branch or our customer care or mail us at broking@pentagonbroking.com

We once again thank you for selecting us as your preferred service provide to all your Equity Market Requirement.

Thanking you

Pentagon Team



Pentagon Stock Brokers Pvt. Ltd.

Acknowledgement Slip

Application No. _____

Date : / / 202

We hereby acknowledge the receipt of Trading and Demat Account Opening Application Form :

Name of the Sole / First Holder	
Name of Second Holder	
Name of Third Holder	

Cheque No.: _____ Drawn on : _____ Amount: _____

Product : _____ Exec Name : _____

Branch Name : _____ Exec Sign & Date _____

For all queries, please call (022) 4257 7000
E-mail : broking@pentagonbroking.com

For **Pentagon Stock Brokers Pvt. Ltd.**

Note : Please issue Cheque in favour of
M/s. Pentagon Stock Brokers Pvt. Ltd.

(Authorised Signatory)

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MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI & EXCHANGES PART I

Sr. No.	Name of the Document	Brief Significance of the Document	Pages From-To	
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		INSTRUCTION/GUIDELINES for filling Individual KYC application form	7	8
		NON-INDIVIDUAL KYC	9	10
		NON-INDIVIDUAL KYC ANNEXURE	11	11
		KYC Form - Document captures the basic information about the Constituent	13	14
2	Tarriff Sheet	Document detailing the rate/amount of the brokerage and other charges levied on the client for trading on the stock exchange (s) & Pro Trading Declaration	15	16
3	Rights & Obligations	Documents stating the rights & Obligation of stock broker/trading member/ sub-broker and client for the trading on exchanges including additional rights & obligation in case of Interner/Wireless technology based trading Provided as a separate booklet to be retained by the client	Provided as a separate booklet to be retained by client	
4	Risk disclosure Document (RDD)	Document detailing risks associated with dealing in securities market		
5	Guidance Note	Document detailing DO's and DON'T's for trading on exchange, for the education of the investors.		
6	Rights & Obligations (DP)	Document stating the Rights & Obligation of Beneficial Owner (BO) and Depository Participant (DP)		
7	Policies and Procedures	Document describing significant policies and procedures of the stock broker.		
VOLUNTARY DOCUMENTS AS PROVIDED BY THE STOCK BROKER (PART II)				
8	Running Account Authorization	Authorization to maintain your trading account on running account basis	17	17
9	SMS Alerts on Mobile No	Undertaking for services by way of SMS alerts from trading member	17	17
10	Declaration & Confirmation from client	Declaration from the client stating that client is liable to pay the margins which are required by the exchanges & other obligations	18	18
11	Indemnity cum Undertaking	Indemnity cum undertaking for name discrepancy in pan card, bank proof, and address proof	19	19
12	Letter of authorized signatory	List of authorized person who will place order on behalf of the client.	20	20
13	Verbal Order Acceptance	Authorization by the client for verbal order acceptance to the trading member	21	21
14	NOC letter to be obtained from Broker/ Exchange employees	Declaration of employment / association with market	21	21
15	HUF declaration	Authorization by Co-parceners in favour KARTA	22	22
16	Power of Attorney	Revocable POA by the client in favour of Stock Broker	23	24
17	Demat Account Opening Form	Additional form for opening demat account of Individual with Nomination form/ Non-Individual form along with demat charges	25	30
18	DIS	Declaration for opting of DIS book - voluntary	31	31
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20	FATCA	FATCA/CRS Declaration form	32	34
21	Declaration	Declaration for Common Email ID and Mobile Number in family account	35	35

SEBI has mandated wide circular number SEBI/MRD/SE/CIR-33/2003/27/08 dated august 27, 2003 regarding mode of payment and delivery by which no payment is to be collected in cash by Stock Broker.

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CKYC & KYC KRA FORM



Know Your Client

Application Form (For Individuals only)

(Please fill the form in English and in BLOCK Letters)

Fields marked with "*" are mandatory fields

Application Type* New Update

KYC Number*

KYC Type* Normal (PAN is mandatory) PAN Exempt Investors (Refer instruction K)

1. Identity Details (Please refer instruction A at the end)

PAN Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof)

Maiden Name (if any*)

Father / Spouse Name*

Mother Name*

Date of Birth*

Gender* M- Male F- Female T-Trans gender

Marital Status* Married Unmarried Others

Citizenship* IN- Indian Others – Country Country Code

Residential Status* Resident Individual Non Resident Indian Foreign National Person of Indian Origin

Occupation Type* S-Service Private Sector Public Sector Government Sector O-Others Professional Self Employed Retired Housewife Student B-Business X-Not Categorised

Photo

Signature/Thumb Impression

2. Proof of Identity (PoI)* (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

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

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type Code Identification Number

3. Proof of Address (PoA)*

3.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988

State/UT* Country* Country Code as per ISO 3166

Address Type* Resi dental / Business Resi dental Business Registered Office Unspecified

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Proof of Address*

Passport Number Passport Expiry Date

Voter ID Card

Driving Licence Driving Licence Expiry Date

Aadhaar Card

NREGA Job Card

Others (any document notified by the central government) Identification Number

3.2 Correspondence / Local Address Details* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary proof)

Line 1*

Line 2

Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988

State/UT* Country* Country Code as per ISO 3166

4. Contact Details (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

Email ID

Mobile Tel. (Off) Tel. (Res)

5. FATCA/CRS Information PART I (Tick if Applicable) Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)

Additional Details Required* (Mandatory only if above option (5) is ticked)
 Is your Country of Tax Residency other than India YES NO (If yes please specify the details of all countries where you hold the tax residency.)
 Country of Jurisdiction of Residence* Country Code of Jurisdiction of Residence as per ISO 3166
 Tax Identification Number or equivalent (If issued by jurisdiction)*
 TIN issued country
 Place / City of Birth* Country of Birth* Country Code as per ISO 3166
 US Citizen YES OR NO
 Address
 Line 1*
 Line 2
 Line 3 City / Town / Village*
 District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988
 State/UT* Country* Country Code as per ISO 3166

6. Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

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

Related Person Type* Guardian of Minor Assignee Authorized Representative
 Prefix First Name Middle Name Last Name
 Name*
 (If KYC number and name are provided, below details of section 6 are optional)

Proof of Identity [Pol] of Related Person* (Please see instruction (H) at the end)

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

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type Code Identification Number

7. Remarks (If any)

8. Applicant Declaration

CKYC Declaration

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications / directions issued by any governmental or statutory authority from time to time.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number / email address.

FATCA Declaration

- I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be liable for it. I hereby authorize Pentagon to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to Pentagon and its group companies ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries or any regulated intermediaries registered with SEBI/ RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end or by domestic or overseas regulators / tax authorities. I/We authorize Pentagon to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same

[Signature / Thumb Impression]

Date: Place:

(2)

Signature / Thumb Impression of Applicant

9. Attestation / For Office Use Only

Documents Received Certified Copies

In-Person Verification (IPV) & KYC Verification Carried Out by (Refer Instruction J&I)

Date

Emp. Name

Emp. Code

Emp. Designation

[Employee Signature]

Institution Details

Name **Pentagon Stock Brokers Pvt. Ltd.**

Code **IN1919**

[Institution Stamp]

Instructions/Guidelines for filling Individual KYC Application Form

General Instructions:

1. Self-Certification of documents is mandatory
2. KYC number of applicant is mandatory for update/change of KYC details
3. For particular section update, please tick () in the available before the section number and strike off the sections not required to be updated
4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case of the original of any document is not produced for verification, then the copies should be properly attested by the entities authorized for attesting for documents, as per the list mentioned under [I]
5. If any proof of identity or address is in a foreign language, then translation into English is required.
6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
7. If correspondence and permanent addresses are different, then proof for both have to submitted
8. Sole proprietor must take the application in his Individual name & capacity
9. For non-individual and foreign nationals (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
10. In case of Merchant navy NRI's, Mariners declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted
11. For opening an account with depository participant or Mutual Fund, for a minor, photocopy of the School Leaving certificate/Mark sheet issued by Higher Secondary Board/Passport of minor/Birth Certificate must be provided.
12. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy is mandatorably to be given.
13. Politically Exposed Persons (PEP) are defined as individual who are or have been entrusted with prominent public functions in a foreign country. e.g. Heads of the states or of Governments senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials etc.

A. Clarification / Guidelines on filling 'Identity Details' section

1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected. 2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Investors

1. Pan card with photograph. This is a mandatory requirement for all applicant except those who are specifically exempt from obtaining PAN
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card/Driving license
3. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
4. Mention identification / reference number if 'Z - Others (any document notified by the central government)' is ticked.
5. Others - Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
6. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address [PoA] section

1. PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
2. State / U.T Code and Pin / Post Code will not be mandatory for overseas addresses.
3. Passport/Voters Identity Card/Ration Card/ Registered lease or sale Agreement of residence /Driving License/Flat Maintenance bill/Insurance Copy
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts
5. Proof of address issued by any of the following: Bank Managers of scheduled Commercial Banks/Scheduled Co-Operative Bank /Multinational Foreign Banks/Gazetted Officer/Notary public /Elected representatives to the Legislative Assembly/Parliament/Document issued by the Govt. or statutory Authority
6. For FII/ sub account, Power of Attorney given by FII/sub-account to the custodians (which are duly notarized and/or apostilled or consularised) that given registered address should be taken
7. The proof of address in the name of spouse may be accepted.
8. Others includes - Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
9. In case of Simplified Measures Accounts for verifying the address of the applicant any one of the following documents can also be submitted and undernoted relevant code may be mentioned in pt 4.1

Document Code Description

01	Utility bill which is not more than two months old of any service provider (Electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Municipal Tax Receipt of the Property.
03	Bank account or post office savings bank accounts statement
04	Pension or family pension payment orders (PPOs) issued to retired employees by government Departments or Public Sector undertakings, if they contain the address
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation
06	Documents issued by government departments of foreign jurisdictions and letter issued by foreign Embassy or Mission in India

E. Clarification /Guidelines on filling 'Proof of Address [POA] – Correspondence / Local Address Details' section

1. To be filled only in case the PoA is not the local address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / Local addresses, Please fill Annexure A1
3. Others includes - Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

F. Clarification / Guidelines on filling 'Contact details' section.

1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile Number mention 91-9999999999).
2. Do not add '0' in the beginning of Mobile number.

G. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

H. Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central Government)' is ticked.

I. List of people authorized to attest the documents after verification with the originals:

1. Authorized officials of Asset Management Companies (AMC).
2. Authorized officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
3. KYD compliant mutual fund distributors.
4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks Registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents.
6. Government authorized officials who are empowered to issue Apostille Certificates.

J. List of people authorized to perform In Person Verification (IPV):

1. Authorised officials of Asset Management Companies (AMC).
2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
3. KYD compliant mutual fund distributors.
4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

K. PAN Exempt Investor Category

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
3. Investors residing in the state of Sikkim.
4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.

List of Two-Digit state / U.T Codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 Two-Digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	KZ	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		



**Know Your Client (KYC)
Application Form (For NON- Individuals Only)**

NEW CHANGE REQUEST (please tick ✓ the appropriate)
(Please tick ✓ the box on the left margin of appropriate row where CHANGE/
CORRECTION is required and provide the details in the corresponding row)
Please fill this form in English and in Block Letters



Acknowledgement No. _____

Pentagon Stock Brokers Pvt. Ltd.

Regd. Office: 108, Madhava Premises,
Behind Family Court, Bandra Kurla Complex,
Bandra (East), Mumbai – 400051

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant _____

2. a. Date of Incorporation | d | d | | m | m | | y | y | y | y | | 2. a. PAN _____

3. Date of commencement of business: | d | d | | m | m | | y | y | y | y | |

4. a. Place of incorporation: _____

4. b. Registration No. (e.g. CIN): _____

5. Status Please tick (✓) any one Private Limited Co. Public Ltd. Co Body Corporate Partnership
 Trust Charities NGO's FI FII HUF AOP Bank Government Body
 Non-Government Organization Defense Establishment BOI Society LLP
 FPI - Category I FPI - Category II FPI - Category III Others (please specify) _____ (1)

PHOTOGRAPH
of Authorised
Person

Please affix
the recent passport
size photograph and
sign across it

B. Address Details

1. Address for Correspondence

City/Town/Village _____ Pin Code _____
State _____ Country _____

2. Registered Address (if different from correspondence address)

City/Town/Village _____ Pin Code _____
State _____ Country _____

3. Contact Details

Tel.(Off.) (ISD) (STD) _____ Tel.(Res) (ISD) (STD) _____
Mobile (ISD) (STD) _____ Fax (ISD) (STD) _____
E-Mail ID. _____

4. Specify the proof of address submitted for correspondence address: _____

5. Specify the proof of address submitted for registered address: _____

C. Other Details

1. Gross Annual Income Detail (Please tick (✓)) Below 1 Lakh 1-5 Lakhs 5-10 Lakhs 10-25 Lakhs 25-1 Crore > 1 Crore

2. Net-worth in ₹. (*Net worth should not be older than 1 year) _____ as on (date) | d | d | / | m | m | / | y | y | y | y | | Rs. _____

3. Detail of Authorised Director / Promoter / Karta / Partner etc.

Name _____
PAN _____ Registered Address _____
City/Town/Village _____ Pin Code _____
State _____ Country _____

4. DIN/UID of Promoters/Partners/Karta and whole time directors: (Please provide details in the enclosed sheets)

5. Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole time directors:
 Politically Exposed Person (PEP) Related to Politically Exposed Person (PEP)

6. Any other information: _____

DECLARATION	Name & Signature
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.	
Date : 2 0 2 Name : _____ (2)	

FOR OFFICE USE ONLY					
IPV Details	Signature	Name of Person who has done IPV	Employee ID	Designation	Date of IPV

Pentagon Stock Brokers Pvt. Ltd.

Originals Verified and self attested documents copies received

<p>For Pentagon Stock Brokers Pvt. Ltd.</p> <p>Authorised Signatory</p> <p>Date : 2 0 2 </p>	<p>Seal/Stamp of the Intermediary</p>
---	---

Attention: Please recheck your Email ID and Mobile Number provided by you.

INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

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

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

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

C. Proof of Address (POA): - List of documents admissible as Proof of Address:

1. Passport / Voters Identity Card/Ration Card/Unique Identification Number (UID)/ Aadhar

Letter/Registered lease or Sale Agreement of Residence/Driving License/ Flat Maintenance bill/Insurance Copy.

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

D. Exemptions/clarifications to PAN

(Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50, 000/- p.a.
5. In case of institutional clients, namely, Flis, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act. 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorised to attest the documents:

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

Types of entity	Documentary Requirements
Corporate	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year). <input type="checkbox"/> Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations. <input type="checkbox"/> Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly. <input type="checkbox"/> Copies of the Memorandum and Articles of Association and certificate of incorporation. <input type="checkbox"/> Copy of the Board Resolution for investment in securities market. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Partnership firm	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered partnership firms only). <input type="checkbox"/> Copy of partnership deed. <input type="checkbox"/> Authorised signatories list with specimen signatures. <input type="checkbox"/> Photograph, POI, POA, PAN of Partners.
Trust	<input type="checkbox"/> Copy of the balance sheets for the last 2 financial years (to be submitted every year). <input type="checkbox"/> Certificate of registration (for registered trust only). <input type="checkbox"/> Copy of Trust deed. <input type="checkbox"/> List of trustees certified by managing trustees/CA. <input type="checkbox"/> Photograph, POI, POA, PAN of Trustees.
HUF	<input type="checkbox"/> PAN of HUF. <input type="checkbox"/> Deed of declaration of HUF/ List of coparceners. <input type="checkbox"/> Bank pass-book/bank statement in the name of HUF. <input type="checkbox"/> Photograph, POI, POA, PAN of Karla.
Unincorporated association or a body of individuals	<input type="checkbox"/> Proof of Existence/Constitution document. <input type="checkbox"/> Resolution of the managing body & Power of Attorney granted to transact business on its behalf. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Banks/ Institutional Investors	<input type="checkbox"/> Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Foreign Institutional Investors (FII)	<input type="checkbox"/> Copy of SEBI registration certificate. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Army/ Government Bodies	<input type="checkbox"/> Self-certification on letterhead. <input type="checkbox"/> Authorised signatories list with specimen signatures.
Registered Society	<input type="checkbox"/> Copy of Registration Certificate under Societies Registration Act. <input type="checkbox"/> List of Managing Committee members. <input type="checkbox"/> Committee resolution for persons authorised to act as authorised signatories with specimen signatures.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

1. Name

2. Relationship with Applicant (i.e. promoters, whole time directors etc.)

3a. PAN 3b. DIN

3c. Aadhar (UID) Number Tel/Mobile

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it with seal

1. Name

2. Relationship with Applicant (i.e. promoters, whole time directors etc.)

3a. PAN 3b. DIN

3c. Aadhar (UID) Number Tel/Mobile

4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

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Please affix your recent passport size photograph and sign across it with seal

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Please affix your recent passport size photograph and sign across it with seal

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PHOTOGRAPH

Please affix your recent passport size photograph and sign across it with seal

1. Name

2. Relationship with Applicant (i.e. promoters, whole time directors etc.)

3a. PAN 3b. DIN

3c. Aadhar (UID) Number Tel/Mobile


4. Residential/ Registered Address

City / Town / Village Pin Code

State Country

PHOTOGRAPH

Please affix your recent passport size photograph and sign across it with seal

 (3) _____
Name & Signature of the Authorised Signatory (ies)

Date: / /

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CONSTITUENT PROFILE

(A). BANK ACCOUNT DETAILS (THOROUGH WHICH TRANSITIONS WILL GENERALLY BE ROUTED)

1. BANK NAME

ACCOUNT NO :

BRANCH :

ADDRESS:

PIN CODE:

9DIGIT MICR CODE:

IFSC CODE:

ACCOUNT TYPE: SAVINGS CURRENT NRI
 NRE NRO OTHERS: _____

2. BANK NAME

ACCOUNT NO :

BRANCH :

ADDRESS:

PIN CODE:

9DIGIT MICR CODE:

IFSC CODE:

ACCOUNT TYPE: SAVINGS CURRENT NRI
 NRE NRO OTHERS: _____

For Demat Operations only one Bank Account is acceptable hence please fill in bank details for DP Operation in 1 above only and also fill the same details on Page No. 25

(B). DEPOSITORY ACCOUNT DETAILS

	DP Name	DP ID								BENEFICIARY ID								DEFAULT ID		
1.	Pentagon Stock Brokers Pvt. Ltd	1	2	0	8	3	8	0	0											<input type="checkbox"/>
2.																				<input type="checkbox"/>
3.																				<input type="checkbox"/>

(C). NRI (Applicable for NRI/FN Clients only):

RBI Ref. No.

RBI Approval Date / /

*Please attach copy of permission for dealing in Securities from Authorised Dealer (Bank) /RBI Approval.

(D). PAST ACTIONS

- Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years:

(E). DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

- If client is dealing through the sub-broker, provide the following details:
 Sub-broker's Name:
 SEBI Registration No.:
 Registered office address:
 Ph: Fax: Website:
- Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers/sub-brokers, provide details of all)
 Name of stock broker
 Name of Sub-Broker, if any:
 Client Code:..... Exchange:
 Details of disputes/dues pending from/to such stock broker/sub- broker:

(F). Account Settlement (as per SEBI requirement) once a quarter once a month

Whether you wish to receive trade confirmation, holding and transaction statement margin call, passwords and contract note through Email / SMS Yes No If yes (E-mail ID and Mobile No. mentioned in KRA will be used)

Please Tick (✓) SMS Services : By Pentagon: YES NO By Exchange : YES NO

(G) . INCOME AND OTHER DETAILS (Mandatory)

1. Gross Annual Income Details (Please tick (✓) :

Below 1 Lac 1-5 Lac 5-10 Lac 10-25 Lac 25 Lacs - 1 Crore >1 Crore

2. Net-worth in ` . (*Net worth should not be older than 1 year) as on (date) [d|d] / [m|m] / [y|y|y|y]

3. Occupation (Please tick (✓) any one and give brief details):

Private Sector Service Public Sector Government Service Business Professional
 Agriculturist Retired Housewife Student Forex Dealer Others (Please specify) _____

4. Qualification (Please tick (✓) any one and give brief details):

Under Highschool Highschool Graduate Doctorate Professional Illiterate
 Others (Please specify) _____

5. Please tick, if applicable : Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)
 Not a Politically Exposed Person (PEP) Not Related to a Politically Exposed Person (PEP)

(H). INTERNET TRADING

Whether you wish to avail of facility of Internet Trading/Wireless Technology (please specify) Yes No

(I) INVESTMENT / TRADING EXPERIENCE

NO PRIOR INVESTMENT EXPERIENCE [] YEARS IN EQUITIES
[] YEARS IN DERIVATIVES [] YEARS IN OTHER INVESTMENT RELATED ACTIVITIES

(J) NOMINATION DETAILS (For Individuals Only)

I/We wish to nominate
 I/We do not wish to nominate

Name of the Nominee: _____ Relationship with the Nominee: _____

PAN of Nominee: _____ Date of Birth of Nominee: _____

Address and phone no. of the Nominee:

If Nominee is a minor, details of guardian:

Name of guardian: _____

Address of Guardian: _____

Phone no. of Guardian _____

Signature of guardian _____

WITNESSES (Only applicable in case the account holder has made nomination)

Name _____ Name _____

Address _____ Address _____

Signature. _____ Signature _____

ANY OTHER INFORMATION _____

(K). INTRODUCER DETAILS : (Optional)

Introduced by another Client / Employee / Director / Any Other Person Please Specify

NAME OF THE INTRODUCER: _____

ADDRESS : _____

PROOF OF IDENTITY : _____ PROOF OF ADDRESS : _____

CONTACT NO. _____ SIGNATURE OF INTRODUCER _____

TRADING PREFERENCE

Exchange / Segments	Capital Market	Derivative	Currency
BSE <input type="checkbox"/> (4)			
NSE <input type="checkbox"/> (4)			

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

TARIFF SHEET

Cash Market/ Capital Market						
TRADING				DELIVERY		
Brokerage	Min (P)	(%)	Slab No.	Min (P)	(%)	Slab No.
1st Side	3	0.03 %		3	0.30 %	
2nd Side (Same Day 2nd Side)	3	0.03 %		3	0.30 %	
Brokerage for Trade to Trade / ODD Lot / Z Group Scrips				5	0.50 %	

F & O / Derivative Market / Currency Derivative

Brokerage	EQUITY DERIVATIVES			EQUITY OPTION		CURRENCY DERIVATIVES			CURRENCY OPTION	
	Min (P)	(%)	Slab No.	Per Lot	Slab No.	Min (P)	(%)	Slab No.	Per Lot	Slab No.
1st Side	3	0.03 %		Rs.100/-		3	0.03 %		Rs.100/-	
2nd Side (Same Day 2nd Side)	3	0.03 %		Rs.100/-		3	0.03 %		Rs.100/-	

Other Charges

Stamp Duty Yes No
 Turnover Tax Yes No
 GST/Service Tax Yes No
 STT Yes No

OTHER CHARGESSTATUTORY COST Yes No**For Client Use Only**

Signature of Client (4A)	
Name Of Client	
Client Code	

For Office Use Only

Signature of Authorised Signatory	
Name of Authorised Signatory	
Designation	

DECLARATION

1. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website
4. I/ We have noted that you trade in OWN/PRO account as per SEBI/MRD/SE/CIR.- 42/2003 dated November 19, 2003 as mandated by the SEBI and on the Exchange(s).
5. I/We hereby confirm that I/We are aware about the Delay Payment Charges of the Stock Broker.
6. I/We hereby confirm that in case brokerage per exchange per day is less than Rs. 20/- then difference will be charges as minimum contract generation charges & further we will not charge brokerage more / higher than the permissible limit as per the rules, regulations & bye laws of the relevant exchanges and/or rule and regulations of SEBI.

Place -----

Date :

(5) 

Signature of Client/ Authorized Signatory (ies)

FOR OFFICE USE ONLY

UCC Code allotted to the Client _____

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation			
Date			
Signature			

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.

Date

For Pentagon Stock Brokers Pvt. Ltd.

Signature of the Authorised Signatory

RUNNING ACCOUNT AUTHORISATION (VOLUNTARY)

To,
Pentagon Stock Brokers Pvt. Ltd.
Regd. Office: 108, Madhava Premises, Behind Family Court,
Bandra Kurla Complex, Bandra (East), Mumbai – 400051

Date :

				2	0	2
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I/We are dealing through you as a client in Capital Market and/or Future & Option segment and/or Currency segment and/or Interest Rate future Segment & in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under:

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation unless I/we instruct you otherwise.
2. I/We request you to retain fund with you for my/our margin/pay-in/other-future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing Corporation, unless I/We instruct you to transfer the same to my/our account
3. I/We request you to settle my fund and securities account, once in every calendar Quarter or once in a calendar Month as given in my/our preferences in KYC form except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt. I/we further instruct that for my/our convenience I/we hereby authorize you to retain an amount of up to Rs.10, 000/- cash (net amount across segments and across stock exchanges) while settling my funds and securities.
4. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds towards such obligations and may also retain the funds expected to be required to meet margin obligations for next 5 trading days, calculated in the manner specified by the exchanges.
5. I/We confirm you that I/We will bring to your notice any dispute arising from the statement of account or settlement so made in writing within 30 days from the date of receipt of funds/securities or statement of account or statement related to it, as the case may be at your registered office.
6. I/We confirm you that I/We can revoke the above mentioned authority in writing at any time.
Note: The authorization shall be signed by the client only and not by any authorised person on his behalf or any holder of the Power of Attorney.

 (6) _____

UNDERTAKING FOR SERVICES BY WAY OF SMS ALERTS BY TRADING MEMBER ON MOBILE /CELLULAR PHONES

I/We are having a trading account with your self for the purpose of trading on National Stock Exchange of India Limited or Bombay Stock Exchange Limited or Metropolitan Stock Exchange of India Limited.

I/We have registered the mobile number for receiving SMS alerts and email _____ for receiving email in respect of various services being offered by the Trading Member.

- A. In respect of investment/trading advisory services received from the trading member. I/ We undertake to the trading member and confirm to use my/our own judgement in taking a call on the said investment(s).

I/We also undertake to the trading member and confirm that I/We execute trades in the identified security(s) according to my/our financial strength/capability.

I/We declare and agree that the trading member shall not be responsible for any loss suffered by me/us or account of executing or omitting to execute any trades in pursuance of the SMS alerts(s) and/or investment advises sent by the trading member.

I/We shall not have any claim whatsoever against the trading member in respect of the above mentioned acts or omissions.

I/We authorize to send consolidated summary of my/our scrip-wise buy and sell positions taken with average rates to me / us by way of SMS on a daily basis.

I/we hereby state that my/our number is not under Do not disturb directory and I / we am/are availing this services on my/our own will and there will be no financial obligations of Pentagon in case if legal disputes.

- B. In respect of all other intimation services offered by the trading member, I/We undertake to indemnify the trading member and absolve the trading member of any claims on account of various services rendered to me/us in respect of servicing my/ our trading account with them.

I/We agree to the Running Account Facility and SMS Alert facility as per the terms given above.

Client Code: _____

Name : Mr./ Ms./ Mrs. _____

 (7) _____

DECLARATION & CONFIRMATION BY CLIENT

Date :

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--	--	--	--	---	---	---

To,

Pentagon Stock Brokers Pvt. Ltd.

Regd. Office: 108, Madhava Premises, Behind Family Court,
Bandra Kurla Complex, Bandra (East), Mumbai – 400051

I/ We hereby declare and confirm:

- 1) That I/We hereby agree that the ledger statement in respect of transactions entered into on the cash, F&O & CD segment of the Exchange will be combined for the purpose of convenience of the stock broker. I/We hereby authorize you to transfer, make adjustments and/or to set off a part of whole of the securities placed as margin and/or any surplus funds in any of my/our account/(s) maintained with Pentagon Stock Brokers Pvt. Ltd. against the lawful outstanding dues payable if any, by me/us in any of my/our account(s) maintained with or vice versa. Pentagon Stock Brokers Pvt. Ltd. shall have right of lien on the credit balance in any of my/our accounts for the dues of any exchange & segments.
- 2) That I/We hereby agree to pay all the amount due to the broker on its due date. The amount due to the broker shall include all types of margin and pay in obligation. In case if I/We do not make payment by due date I/We understand and agree to pay penal interest Upto 2% Per Month chargeable on the amount remaining outstanding as levied by the Stock broker and / or sell the securities lying with the stock broker.
- 3) That I / We agree to open an account with you, I/We agree to intimate / inform the detail of my relative, from time to time ('Relative' shall mean and include relative as defined under Section 2 (77) of ' the Companies Act, 2013') that may open trading account with you on the Stock Exchange, both the BSE / NSE. In case I fail to intimate / inform you, I / We authorize you to identify the same if possible at your end.
- 4) That I/We have a trading account as well as a Demat account with Pentagon Stock Brokers Pvt. Ltd. For the convenience of payment of all the charges, pertaining to my/our demat account, I/We hereby request you to debit my /our trading account with all the DP account charges, as and when the bill is raised by (Depository Participant). Further, I / We understand that in case of any non-compliance of the Bye Laws, Rules and Regulation as laid down by SEBI / Exchange, and / or the Depository and for any other matter that may be decided by Pentagon Stock Brokers Pvt. Ltd. from time to time, Pentagon may charge penalty on me/us. Such penalty amount shall be directly debit my/our account. I/We hereby request you to debit my/our trading account for the amount of penalty charges in my/our demat account with you.
- 5) That I/We hereby declare that there has been no adverse action whatsoever, such as enquiry/adjudication (penalty imposed) / suspension / cancellation / prosecution/de-barring from capital market, initiated against me/us or against my /our or any of my/our associated entities by SEBI or any other Regulatory authority during last 3 year. I/We undertake to update/inform/provide in case any enquiry or action is initiated /asked by SEBI / regulatory authorities
- 6) That I / We are fully understand and am/are aware that giving false declaration is an offence and can result in certain action including the rejection of application for opening the account and/or deactivation/freezing of my/ our account.
- 7) 'Electronic Payout : I/We hereby, irrevocable, authorise Pentagon Stock Brokers Pvt. Ltd. to credit my/our bank account electronically i.e. through Net Banking, RTGS, NEFT etc. for all the funds payout due to me/us. I/We confirm that I/We am/are the first holder and bonafide owner of the given bank account/s. I/We am/are enclosing documentary proof in this regard for your reference and record. I/We am/are aware and understand the risks associated with electronic transfer of funds and hereby indemnify Pentagon Stock Brokers Pvt. Ltd. from all liabilities losses resulting either from delay in crediting of pay out amount and/ or non execution of such electronic pay out instruction for any reasons beyond the controlled of Pentagon Stock Brokers Pvt. Ltd. I/We have provided Cancelled Cheque /Bank Statement with IFSC Code for you to do the needful.'

 (8) _____

VOLUNTARY DOCUMENT

Declaration, Indemnity cum Undertaking for name or signature discrepancy in PAN Card, Bank Proof & Address proof.

To,
Pentagon Stock Brokers Pvt. Ltd. Regd.
Office: 108, Madhava Premises, Behind
Family Court, Bandra Kurla Complex, Bandra
(East), Mumbai – 400051

Date :

				2	0	2	
--	--	--	--	---	---	---	--

Please note my name is registered differently in PAN card, Bank , Address proof, demat account etc. I confirm that all the names given in these accounts belong to me only and request you to open Trade & demat account with you as per PAN card . My PAN number is _____ do hereby affirm, declare and undertake as under

1. That my name as it appears on the Income Tax website is _____
2. That my name as it appears on my Pan Card is _____
3. That my name as it appears on the Address proof is _____
4. That my name as it appears on the Bank Proof is _____
5. That I hereby request Pentagon to maintain my name in Demat and Trading account as per the name appearing on the Income Tax website .
6. With reference to my signature mismatch as per Pan Card number given above and the account opening form and other documents I have submitted herewith, I request you to record with yourselves my specimen signature as signed below.
7. That I promise and undertake to get my PAN card altered in accordance with my name or signature as appearing on the Income Tax website within 45 days from the date of signing this undertaking. Pentagon may, at its sole discretion, terminate my trading and demat account in the event of me not getting my name altered within 45 days of signing this undertaking.
8. That I further undertake to open a bank account in accordance with the name as appearing on the Income Tax website within one week from the date of signing this undertaking.
9. I further undertake that in case my name has been changed after approval from government authorities and notified in official gazette, I shall get the name change effected in PAN, Bank account etc. and furnish immediately to Pentagon
10. That I further declare that I am responsible and I shall indemnify & keep indemnified Pentagon , its directors, officers, employees and agents from and against any and all losses, claims, liabilities, obligations, damages, deficiencies, judgements, actions, suits, proceedings arising out of or in relation to corporate benefits, IPO refund, Foreign Exchange Management Act (FEMA), share transfer, dematerialization of securities, rematerialization of securities, dividends, interest, etc., that may arise due to name or signature discrepancy or due to non compliance or any liability suffered or incurred or fastened on to Pentagon due to Pentagon accepting this Declaration-cum-undertaking and/or acting on this basis.

That the contents of this declaration, Indemnity-cum-undertaking have been explained to me in vernacular and I have understood the same before signing it. That this declaration, Indemnity-cum-undertaking given by me to Pentagon is by my absolute free will and without any coercion, undue influence, pressure, etc., and at present I am having sound health and mind.

 (9) _____




LETTER FOR AUTHORISED SIGNATORIES – ALL EXCHANGES (VOLUNTARY)

To,
Pentagon Stock Brokers Pvt. Ltd.
Regd. Office: 108, Madhava Premises, Behind Family Court,
Bandra Kurla Complex, Bandra (East), Mumbai – 400051

Dear Sir,

Kindly Find below a list of authorized signatories to represent us their authority including.

1. Placing / modifying / cancelling order on our behalf.
2. Acknowledging contract notes issued by you to us for our trades, bill, ledger statement, cheque, etc.
3. Communicating changes in our KYC details.
4. All other communication from us to your office.

Name of the Signatories	Signature	Relation, if any
1.		
2.		
3.		

Thanking you,

Place : _____

Date :

				2	0	2
--	--	--	--	---	---	---

 (10) _____

FORMAT FOR WRITTEN ORDERS

Please execute the following order in my account:

Sr.No.	Exchange	Segment (Equities/ Derivatives/ Current Derivatives)	Scrip Name/ Scrip Code Contract Description	Order Type (Regular/ Stop Loss)	Buy/ Sell	Quantity	Rate	Disclosed Quantity (If any)	Trigger Price (If SL order)	Remarks

Client Name : Mr./ Ms./ Mrs.

Order Instruction Date & Time _____

Client Code : _____

 (11) _____

VERBAL ORDER ACCEPTANCE AUTHORISATION

To
Pentagon Stock Brokers Pvt. Ltd.

Date :

				2	0	2
--	--	--	--	---	---	---

Regd. Office: 108, Madhava Premises, Behind Family Court,
Bandra Kurla Complex, Bandra(East), Mumbai –400051

I/We have been / shall be dealing through you as my/ our broker on the Capital Market, Mutual Fund and/or Futures & Options Segments/Currency Derivative Segments. As my/our broker I/we direct and authorize you to carry out trading/dealings on my/our behalf as per instructions given below.

I/We agree and acknowledge that it is advised and prefer you that I/We give instructions for order placement/ modification and cancellation in writing and to avoid disputes, I/we must give instructions in exactly the format given below in duplicate (carbon copy/ photocopy) and take signatures of your duly authorised officers at the branch along with your company stamp on the carbon/photocopy of the instructions in acknowledgment of receipt of my/our instructions.

However as I/ We shall be dealing by ordering over phone and even if we visit the branch, the fluctuations in market are so rapid that it is not practical to give written instructions for order placement/modification and cancellation, I/We hereby authorize you to accept my / our authorised representative's verbal instructions for order placement/modification and cancellation in person or over phone (fixed line or mobile phone) and execute the same.

I /We understand the risk associated with verbal orders and I/We shall be liable for all risks, losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above.

Further, please note that we shall maintained the recording at our premises for reasonable time.

 (12) _____

FORMAT OF NOC LETTER TO BE SUBMITTED BY BROKER'S/EXCHANGE'S EMPLOYEE

This is to state that I _____ S/oD/o. _____

R/o _____ is employee with the

following Stock Broker / Sub-Broker / Authorised Person / Remiser/Stock Exchange _____
(please strike out which is not applicable).

Further, I / We hereby declare that I am / We are a Stock Broker / Sub-Broker / Authorised Person / Remiser of the _____ (name of the Stock Exchange where client is a Stock Broker / Sub-Broker / Authorised Person / Remiser) and in this regard pursuant to SEBI circular SEBI/MIRSD/CIR-06/2004 dated January 13, 2004.

Further, I / We states that I/We have intimated the said Exchange of my/our intention to open a trading account with **Pentagon Stock Brokers Pvt. Ltd.** only for the purpose of my / our proprietary trades (acknowledged the copy of Intimation Letter / Approval Letter / NOC Letter is attached herewith).

Client Name : Mr./ Ms./ Mrs. _____

Client Code : _____

 (13) _____

POWER OF ATTORNEY

To all to whom these presents shall come I/ we Name & Address mentioned on execution page, send greetings.

Whereas I/we hold Beneficial Owner Demat Account number mentioned on execution page with Central Depository Services (India) Limited (CDSL), through Pentagon Stock Brokers Private limited (herein after Called 'The Depository Participant) bearing **DP ID 12083800** registered with Securities and Exchange Board of India (SEBI).

And Whereas I/we am / are desirous to buy and sell securities through Pentagon Stock Brokers Private Limited who is a "Stock Broker" registered with SEBI and member of recognized stock exchange/s

And Whereas I/we am/ are desirous of appointing Pentagon Stock Brokers Private Limited as my/our constituted attorney to operate my/our beneficial owner account on my/our behalf for a limited purpose in the manner hereinafter appearing and subject to conditions as provided herein.

Now know you all and these presents witness that I / we do hereby nominate, constitute and appoint Pentagon Stock Brokers Private Limited (hereinafter referred to as "the stock broker") as my true and lawful attorney and authorize it to perform the following functions on my behalf:

- i. to transfer securities held in my/our under mentioned beneficial owner account(s) or any other account informed by me in writing, to the demat accounts of the stock broker as specified on execution page consisting demat accounts of the stock broker maintained for the purpose of settlement of trades and/or margin obligations arising out of trades executed by me/us on any recognized stock exchange through the stock broker. The List of Broker's Demat accounts and Client Demat Accounts may be updated / amended in future.
- ii. to pledge the securities in favor of the Pentagon Stock Brokers Private limited and to further Repledge securities for the limited purpose of meeting my/our margin requirements in connection with the trades executed by me/us on any recognized stock exchange through Pentagon Stock Brokers Private Limited
- iii. to return to me/us, the securities that may have been received by the stock broker erroneously or those securities that the stock broker was not entitled to receive from me/us;
- iv. to send consolidated summary of my/our scrip-wise buy and sell positions taken with average rates to me/us by way of SMS / Email on a daily basis, notwithstanding any other document to be disseminated as specified by SEBI from time to time.
- v. to apply for various products like Mutual Funds, Public Issues (shares as well as debentures), rights, offer of shares, tendering shares in open offers, redemptions etc pursuant to oral / written/ electronic instructions given by me/us to the stock broker.

I/We ratify the instructions given by the aforesaid stock broker to the depository participant named herein above in the manner specified herein.

I/We further agree and confirm that the powers and authorities conferred by this Power of Attorney shall continue until it is revoked in writing by me at any time and that the said revocation shall be effective from the date on which the revocation notice is received by the stock broker in his office. However, such revocation shall not be applicable for any outstanding settlement obligation arising out of the trades carried out prior to receiving request for revocation of POA. Further the POA revocation request should be dated & time stamped by the stock broker for ensuring proper audit trail.

 (14) _____

IN WITNESS WHEREOF I/WE the under named, have hereinto set my / our hands this _____ day of _____ 20 _____ Mumbai.


Demat Accounts of the Stock Broker


Name of DP	Demat Account Number	Type of Accounts
Pentagon Stock Brokers Pvt Ltd	12083800 00000525	CLEARING MEMBER ACCOUNT
Pentagon Stock Brokers Pvt Ltd	12083800 00000506	CLEARING MEMBER ACCOUNT
Pentagon Stock Brokers Pvt Ltd	12083800 00000510	CLEARING MEMBER ACCOUNT
Pentagon Stock Brokers Pvt Ltd	12083800 00008106	CUSA ACCOUNT
NSCCL	11000011 00019868	CLEARING MEMBER ACCOUNT
ICCL	11000010 00023823	CLEARING MEMBER ACCOUNT
ICICI BANK LTD	IN301348 20066922	CLEARING MEMBER ACCOUNT
ICICI BANK LTD	IN301348 20068717	CLEARING MEMBER ACCOUNT
ICCL	1100001000024341	CCPLEDGE ACCOUNT
Orbis Financial Corporation Ltd	1205900000046356	CMPLEDGE ACCOUNT
Pentagon Stock Brokers Pvt Ltd	1208380000009547	TMCM PLEDGE ACCOUNT


Signed for and on behalf of the Client

BO ID

1 | 2 | 0 | 8 | 3 | 8 | 0 | 0 | 0 | 0 | | | | | | | | | | | | | |

 (15) _____
1st holder / Signature of KARTA
(In case of HUF/CORPORATE account,
signature with rubber stamp)

 _____
2nd holder / 1st Co-parcener

 _____
3rd holder / 2nd Co-parcener

Name Mr./ Ms./ Mrs. _____

Mr./ Ms./ Mrs. _____

Mr./ Ms./ Mrs. _____


FOR Pentagon Stock Brokers Pvt. Ltd.

Signature of the Authorised Signatory


Address : _____

Signed for and on behalf of the Broker

Name: **Pentagon Stock Brokers Pvt. Ltd.**
Regd. Office: 108, Madhava Premises, Behind
Family Court, Bandra Kurla Complex, Bandra
(East), Mumbai – 400051

Witness - I 

Name & Address : _____

Witness - II 

Name & Address : _____



Pentagon Stock Brokers Pvt. Ltd.

DP ID:12083800, SEBI Regn No.: IN-DP-302-2016, CIN No.: U74110MH2014PTC254979

Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051

Tel: 022-42577000 | Email: broking@pentagonbroking.com | Website: www.pentagonbroking.com



Additional KYC Form for Individual Opening a Demat Account

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

Application No.											Date									
DP Internal Reference No.																				
DP ID	1	2	0	8	3	8	0	0	Client ID	0	0									

I/We request you to open a Demat Account in my/our name as per the following details:-

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

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

Type of Account (Please tick whichever is applicable)

Status	Sub – Status
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Individual Margin Trading A/C (MANTRA) <input type="checkbox"/> Minor <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI – Depository Receipts <input type="checkbox"/> NRI Non-Repatriable Promoter <input type="checkbox"/> Others (specify) _____
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts <input type="checkbox"/> Others (specify) _____

Details of Guardian (in case the account holder is minor)

Guardian's Name											PAN								
Relationship with the applicant																			

I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')	[Automatic Credit] <input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')	<input type="checkbox"/> Yes <input type="checkbox"/> No
Account Statement Requirement	<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 request you to send electronic transaction -cum- holding statement at the Email ID _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
I/ We would like to share the email ID with the RTA	<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to receive the Annual Report <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)	
I/We, wish to receive dividend / interest directly in to my 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

Bank Details [Dividend Bank Details]

Bank Code (9 digit MICR Code)																	
IFS Code (11Character)							Branch Name										
Account Number																	
Account Type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others (Specify) _____																
Bank Name																	
Bank Branch Address																	
City				State				Country				PIN					
(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 (iii) Photocopy of the Passbook having name and address of the BO, (or) (iv) Letter from the Bank. • In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.																	

For Gross Annual Income Details / Occupations / For PEP - RPEP / For any other information please refer to Page No.14 of the KYC Form

Transactions Using Secured Texting Facility (TRUST).	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST		
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)

SMS Alert Facility / CDSL SMART Facility	Mobile No. +91 _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	[Mandatory, If you are giving Power of Attorney, (POA) (If POA is not granted & you do not wish to avail of this facility, cancel this option) For terms and conditions for CDSL SMART facility please refer to our website : www.pentagonbroking.com	
Account Type : BSDA (If yes please provide declaration) <input type="checkbox"/> Yes <input type="checkbox"/> No		RGESS <input type="checkbox"/> Yes <input type="checkbox"/> No
Easi	To register for easi, please visit our website www.cdslindia.com . <i>Easi</i> allows a BO to view his ISIN balances, transactions and value of the portfolio online.	

I/We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Holder	Second Holder	Third Holder
Name	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.
Signature	(16)		

(Signatures should be preferably in black ink)

NOMINATION

Registration No. _____ Dated _____.

I/We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that:

- I/We **do not wish to nominate any one for this Demat / Trading account.** OR
- I/We **nominate** the following person(s) who is / are entitled to receive security balances lying in my/our account, particulars where of are given below, in the event my/our death.

BO Account Details

DP ID	1 2 0 8 3 8 0 0	CLIENT ID						
Name of the First Holder								
Name of the Second Holder								
Name of the Third Holder								

NOMINATION DETAIL'S

*Marked is Mandatory field

Nominee 1				Nominee 2				Nominee 3			
*Name											
*Address											
*City		*State		*City		*State		*City		*State	
*Pin		*Country		*Pin		*Country		*Pin		*Country	
Tel. No.		FAX No.		Tel. No.		FAX No.		Tel. No.		FAX No.	
PAN No.		UID No.		PAN No.		UID No.		PAN No.		UID No.	
Email ID											
*Relationship with the BO:											
Date of birth <small>(Mandatory if Nominee is a minor) dd-mm-yyyy</small>											
Name of the Guardian of Nominee (if nominee is a minor)											
*Address											
*City		*State		*City		*State		*City		*State	
*Pin		*Country		*Pin		*Country		*Pin		*Country	
Tel. No.		FAX No.		Tel. No.		FAX No.		Tel. No.		FAX No.	
PAN No.		UID No.		PAN No.		UID No.		PAN No.		UID No.	
Email ID											
*Relationship of the Guardian with the Nominee				*Relationship of the Guardian with the Nominee				*Relationship of the Guardian with the Nominee			
Age				Age				Age			
*Percentage of allocation of securities											
*Residual Securities <small>[please tick any one nominee, if tick not marked the default will be first nominee]</small>											
<input style="width: 100%; height: 20px;" type="checkbox"/>				<input style="width: 100%; height: 20px;" type="checkbox"/>				<input style="width: 100%; height: 20px;" type="checkbox"/>			

Note : Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any. This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.

Note : One witness shall attest signature (s) / thumb impression (s)

Name of Witness	Address	Signature of Witness

I/ We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I/ We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First / Sole Holder	Second Holder	Third Holder
Name			
Specimen Signature	17		

(Signatures should be preferably in blue ink)
(To be filled by DP)

For Pentagon Stock Brokers Private Limited



Pentagon Stock Brokers Pvt. Ltd.

DP ID:12083800, SEBI Regn No.: IN-DP-302-2016, CIN No.: U74110MH2014PTC254979
 Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051
 Tel: 022-42577000 | Email: broking@pentagonbroking.com | Website: www.pentagonbroking.com



Additional KYC Form For Non Individual Clients for Opening a Demat Account

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

Application No.											Date									
DP Internal Reference No.																				
DP ID	1	2	0	8	3	8	0	0	Client ID	0	0									

I/We request you to open a Demat Account in my/our name as per the following details:-

Holder Details

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

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

Type of Account (Please tick whichever is applicable)

Status										Sub-Status											
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> Trust <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)										To be filled by the DP											
Date of Incorporation	D	D	M	M	Y	Y	Y	Y													
SEBI Registration No. (If applicable)											SEBI Registration Date	D	D	M	M	Y	Y	Y	Y		
RBI Registration No. (If Applicable)											RBI Approval Date	D	D	M	M	Y	Y	Y	Y		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (Specify)																				
I / We instruct the DP to receive each and every credit in my / our account (If not marked, the default option would be 'Yes')															[Automatic Credit]						
															<input type="checkbox"/> Yes <input type="checkbox"/> No						
I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No')															<input type="checkbox"/> Yes <input type="checkbox"/> No						
Account Statement Requirement	<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 request you to send electronic transaction -cum- holding statement at the Email ID															<input type="checkbox"/> Yes <input type="checkbox"/> No						
I/ We would like to share the email ID with the RTA															<input type="checkbox"/> Yes <input type="checkbox"/> No						
I / We would like to receive the Annual Report <input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical and Electronic (Tick the applicable box. If not marked the default option would be in Physical)																					

Clearing Member Details (To be filled by CMS Only)

Name of Stock Exchange			
Name of CC/CH			
Clearing Member ID		Trading Member ID	
I/ We wish to receive dividend / interest directly in to my bank account as given below through <input type="checkbox"/> Yes <input type="checkbox"/> No ECS? (If not marked, the default option would be 'Yes') [ECS is mandatory for locations notified by SEBI from time to time]			

Bank Details [Dividend Bank Details]

Bank Code (9 digit MICR Code)									
IFS Code (11Character)	Branch Name								
Account Number									
Account Type	<input type="checkbox"/> Saving <input checked="" type="checkbox"/> Current <input type="checkbox"/> Others (Specify) _____								
Bank Name									
Bank Branch Address									
City		State		PIN					

- (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
(iii) Photocopy of the Passbook having name and address of the BO, (or)
(iv) Letter from the Bank.
• In case of options (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document.




Details of Politically Exposed Persons (PEP)/Related to Politically Exposed Person (RPEP).**For the above point please refer to the Non Individual KYC Annexure**

Transactions Using Secured Texting Facility (TRUST).	I wish to avail the TRUST facility using the Mobile number registered for SMS Alert Facility. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I have read and understood the Terms and Conditions prescribed by CDSL for the same. <input type="checkbox"/> Yes <input type="checkbox"/> No		
	I/We wish to register the following clearing member IDs under my/our below mentioned BO ID registered for TRUST		
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)

SMS Alert Facility / CDSL SMART Facility	Mobile No. +91 _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	[Mandatory, If you are giving Power of Attorney, (POA) (If POA is not granted & you do not wish to avail of this facility, cancel this option) For terms and conditions for CDSL SMART facility please refer to our website : www.pentagonbroking.com	<input type="checkbox"/> Yes <input type="checkbox"/> No

Account Type : BSDA (If yes please provide declaration) <input type="checkbox"/> Yes <input type="checkbox"/> No	RGESS <input type="checkbox"/> Yes <input type="checkbox"/> No
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.

I/We have received and read the document of 'Rights and Obligation of BO-DP (DP-CM agreement for BSE Clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I/We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.	Mr./ Ms./ Mrs.
Designation			
Signatures	(18 AP) 		

(Signature should be preferably in black ink)**(In case of more authorised signatories, please add annexure)**



Pentagon Stock Brokers Pvt. Ltd.

DP ID:12083800, SEBI Regn No.: IN-DP-302-2016, CIN No.: U74110MH2014PTC254979

Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051
Tel: 022-42577000 | Email: broking@pentagonbroking.com | Website: www.pentagonbroking.com



DEPOSITORY PARTICIPANT WITH CDS(I)L SCHEDULE OF CHARGES FOR CDSL - BENEFICIARY ACCOUNT

DP Scheme	Basic Plan <input type="checkbox"/>		Life Time Plan <input type="checkbox"/>		Zero AMC Plan <input type="checkbox"/>	
	INDIVIDUAL	CORPORATE	INDIVIDUAL	CORPORATE	INDIVIDUAL	CORPORATE
Account Category						
Annual Maintenance Charge	₹ 200/-	₹ 1000/-	₹ 1500/-	₹ 5000/-	NIL with Deposit of ₹ 3000/-	NIL with Deposit of ₹ 10000/-
Transaction Charges						
Debit Instruction from the account	0.02% subject to minimum of ₹ 10/- per instruction.		0.02% subject to minimum of ₹ 10/- per instruction.		0.02% subject to minimum of ₹ 10/- per instruction.	
Failed Instruction	₹ 10/- per instruction.		₹ 10/- per instruction.		₹ 10/- per instruction.	
Demat Requests	₹ 25/- per certificate or 100 Securities whichever is higher		₹ 25/- per certificate or 100 Securities whichever is higher		₹ 25/- per certificate or 100 Securities whichever is higher	
Remat Requests	₹ 25/- per 100 securities or 0.04% which ever is higher		₹ 25/- per 100 securities or 0.04% which ever is higher		₹ 25/- per 100 securities or 0.04% which ever is higher	
Pledge						
Creation/ Unpledge	₹ 50/- or 0.02% whichever is higher		₹ 50/- or 0.02% whichever is higher		₹ 50/- or 0.02% whichever is higher	
Invocation	₹ 100/- or 0.02% whichever is higher		₹ 100/- or 0.02% whichever is higher		₹ 100/- or 0.02% whichever is higher	

- ❖ All Charges mentioned above are inclusive of CDSL charges of Rs. 500/= AMC payable to CDSL for Corporate Accounts
- ❖ Service Tax as prescribed would be levied on all charges & Easy Service Facility available free of charge.
- ❖ The above rates are subject to change with 30 days prior intimation OR any other changes in CDSL Tariff.
- ❖ All the percentage are on the value of shares and the value calculated from BSE closing price.
- ❖ Separate Cheque required for any of the special plan in favour of **Pentagon Stock Brokers Pvt. Ltd.** and Special Plan charges are not refundable.

For ZERO AMC Scheme:-

- ❖ Credit balance will be purely Interest free deposit and waiver of AMC would be available to clients choosing to open account under this scheme
 - ❖ Deposit amount would be refunded on Closure of DPA/c after adjusting DP Dues, if any.
 - ❖ I/We hereby authorize you to debit and/or withdraw the money from my/our trading account opened with you to pay my/our dues in above Depository Account along with Power of Attorney Stamp Duty Charges of Rs. 500/-.
- I/We have given this authorization to you voluntarily for the purpose of smooth operations of my/our accounts.

(19) _____
Signature of First Holder

Signature of Second Holder

Signature of Third Holder

Date : | | | | 2 | 0 | 2 | |

DECLARATION FOR DIS BOOK

Date :

				2	0		
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To,
Pentagon Stock Brokers Pvt. Ltd.
Regd. Office: 108, Madhava Premises, Behind Family Court,
Bandra Kurla Complex, Bandra (East), Mumbai – 400051

Dear Sir / Madam,

A. I / We require the Delivery Instruction Slip (DIS)


OR

B. I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA executed in favour of **Pentagon Stock Brokers Pvt. Ltd (PSBPL)** for executing delivery instructions for setting stock exchange trades [settlement related transactions] and margin purpose effected through CEBPL. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

I / We do not require the Delivery Instruction Slip (DIS) for the time being, since I / We have issued a POA executed in favour of **Pentagon Stock Brokers Pvt. Ltd (PSBPL)** for executing delivery instructions for setting stock exchange trades [settlement related transactions] and margin purpose effected through PSBPL. However, the Delivery Instruction Slip (DIS) booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully,

DP ID	1	2	0	8	3	8	0	0	CLIENT ID	0	0						
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Particulars	First/ Sole Holder/ KARTA	Second Joint Holder	Third Joint Holder
Name			
Signatures  (20)			

ACKNOWLEDGEMENT

I / We acknowledge with thanks the receipt of a duly executed copy of the KYC kit with supporting documents, as per SEBI guidelines conveyed through BSE Notice No.20080624 dt: 24/06/2008 / NSE Circular No. NSE/INSP/2008/67 dt:23/06/2008.

I / We further acknowledge the receipt of a separate booklet containing all the mandatory documents containing Rights & Obligation of Stock Broker, Sub-Brokers and Clients / Internet & Wireless Technology Based Trading Facility / Risk Disclosure Document (RDD) / Guidance – DO's and DON'T's / Rights & Obligation of Beneficial Owner and Depository Participant / Policies and Procedures of Trading Member.

The above mentioned documents are also available in the vernacular languages and are on NSE website at https://www.nseindia.com/membership/content/complinc_trading_mem.htm and can be downloaded

 (21)

Name of Client: _____

Client Code: _____

Client's Signature / For Non Individual
please affix the seal also



FATCA-CRS Declaration for Entities

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

Part – A

PAN									
Name									
Place of Incorporation				Country of Incorporation					
Is the entity involved in / providing any of the following services:	<input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery Services [e.g. casinos, betting syndicates] <input type="checkbox"/> Money Laundering / Pawning			Any other information [if applicable]		<i>[Please specify]</i>			

Is your [Entity] Country of Tax Residency other than India – Yes No

If “Yes”, please specify the details of all countries where you [Entity] hold tax residency and its Tax Identification Number & type

S No	Country of Tax Residency	Tax Payer Identification Number/ <i>Functional Equivalent / Company Identification Number or Global Entity Identification Number</i>	Identification Type <i>[TIN or other, please specify]</i>
1			
2			
3			

In case the Entity’s Country of Incorporation / Tax Residence is US but Entity is not a Specified US person, mention Entity’s exemption code here _____

Part B [to be filled by Financial Institutions or Direct Reporting NFFEs]

We are a <input type="radio"/> Financial Institution / FFI <input type="radio"/> Direct Reporting NFFE	<p>GIIN(Global Intermediary Identification Number):</p> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table> <p><i>Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below</i></p> <p>Name of the sponsoring entity</p> <table border="1" style="width: 100%; height: 25px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table> <p>GIIN not available [tick any one]:</p> <p><input type="checkbox"/> Applied For <input type="checkbox"/> Not required to apply for – specify sub - category code <input style="width: 20px; height: 15px;" type="text"/></p> <p><input type="checkbox"/> Not obtained - Non-participating FFI</p>																			

Part C [Fill any one as applicable to be filled by NFEs other than Direct Reporting NFFEs]

1	Is the entity is a listed company [whose shares are regularly traded on a recognized stock exchange]	Yes <input type="checkbox"/> (Please specify the name of the Stock Exchange (s) where it is traded regularly) 1. _____ 2. _____
2	Is the entity a Related Entity of a listed company [whose shares are regularly traded on a recognized stock exchange]	Yes <input type="checkbox"/> (Please specify the name of the listed company, name of the Stock Exchange(s) where it is traded regularly) Name of the listed company: _____ Name of the Stock Exchange: _____
3	Is the entity an Active NFE?	Yes - Nature of business _____ Please specify sub -category of Active NFE <input type="checkbox"/> <input type="checkbox"/>
4	If the entity a Passive NFE	Yes - Nature of business _____ Also submit UBO Form [provided separately]

Declaration:

I/We acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We aware that I may liable for it. I/We hereby authorize Pentagon to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by us, including all changes, updates to such information as and when provided by us to Pentagon and its group companies ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries/or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your end or by domestic or overseas regulators/ tax authorities. I/We authorize Pentagon to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same

Signature with relevant seal :

 (22 AP)

Authorized Signatory

Authorized Signatory

Authorized Signatory

Date:

Place:

FATCA & CRS Terms & Conditions

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which require Indian financial institutions such as the Banks/other financial entities to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with (Insert FI's name) or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green-card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below)
Telephone number in a country other than India	<p>If no Indian telephone number is provided</p> <ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) <p>If Indian telephone number is provided along with a foreign country telephone number</p> <ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India.

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)
- * Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

PLEASE NOTE THAT THIS MANDATORY REQUIREMENT TO BE FILLED WITH NAME & CODE OF THE CONCERN PERSON
CLIENT INWARD SHEET

CLIENT CODE:		CLIENT NAME:	
Level	PARTICULARS	NAME OF EMPLOYEE	EMPLOYEE CODE
1	RO Pentagon\$STOCK BROKERS PVT.LTD		
2	BR PREFIX BRANCH		
3	VP / AVP VICE PRESIDENT / ASSISTANT VICE PRESIDENT		
4	ASM AREA SALES MANAGER		
5	TL / SM TEAM LEADER / SALES MANAGER		
6	SRM SENIOR REALTIONSHIP MANAGER		
7	RM REALTIONSHIP MANAGER		
8	SE SALES EXECUTIVE		
9	REMISIER / DSA DIRECT SALES AGENT		

***Cancel which is not applicable.

Particular	Done By	Date & Signature
Inward		
Telecalling		
Preliminary Audit		
Data Entry		
Data Verified by		
A/c. Opened by		
Remark if any		

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PENTAGON

Pentagon Stock Brokers Private Limited

Regd. Office: 108, Madhava Premises, Behind Family Court, Bandra Kurla Complex, Bandra (East), Mumbai – 400051

CIN: U74110MH2014PTC254979

Email: broking@pentagonbroking.com | **Website:** www.pentagonbroking.com | **Tel:** 022 42577000