

### Account Re-Activation Form

From: \_\_\_\_\_ (Name of client)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (Address of client)

To,  
Trading Department,  
Shah Investor's Home Ltd.  
SIHL House, Opp. Ambawadi Jain Temple,  
Nehrunagar Cross Road, Ahmedabad – 380015

Dear Sir / Madam

#### Sub: Re-Activation of Trading Account

Ref: Trading Code:

This is with reference to the captioned. I / We \_\_\_\_\_ (name of the client – Individual / non-individual), having trading account with unique client code \_\_\_\_\_ allotted to me / us by your broking house situated at \_\_\_\_\_ (branch name) since \_\_\_\_\_ (date of activation of the account).

I am / we are not trading since \_\_\_\_\_ (last trade date). However, I / We am / are desirous to start trading in my / our account. In this regard, you are requested to reactivate my / our trading account in the following segment / exchange and allow trading with immediate effect.

\_\_\_ NSE Cash \_\_\_ BSE Cash \_\_\_ NSE FO \_\_\_ BSE FO \_\_\_ BSE MF \_\_\_ NSE CD. Signature: \_\_\_\_\_

Further, I / We hereby give my consent to maintain my / our account as RUNNING ACCOUNT for funds and securities. The securities lying in my withhold account should be considered as margin deposit. Further, I declare that

- I understand that I can revoke the authorization at any time by submitting the application.
- I have given my consent for \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly Settlement of my funds and securities. I give my consent to retain my funds up to Rs.10000/- (Rupees Ten Thousand Only) from such settlement. I am aware that on the settlement of account, I will receive a statement and I shall bring any dispute arising from the statement of account to the notice of the broker within 7 working days from the receipt of my statement of my account.
- If I have outstanding obligations on the settlement date, you may retain the requisite securities / funds towards such obligation and may also retain the funds expected to be required to meet margin obligation for next 5 trading days, calculated in the manner specified by the respective exchanges.

Thanking you,

\_\_\_\_\_  
Signature of Client

Date : \_\_\_\_\_ Place : \_\_\_\_\_

#### FOR OFFICE USE ONLY

	Name	Agent Code / Employee Code	Date	Signature
Received By				
Processed By				
Verified By				

**Important Instructions:**

- A) Fields marked with '\*' are mandatory fields.  
 B) Please fill the form in English and in BLOCK letters.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please read section wise detailed guidelines / instructions at the end.

- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.  
 F) List of two character ISO 3166 country codes is available at the end.  
 G) KYC number of applicant is mandatory for update application.  
 H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

**For office use only**

Application Type\*

☐ New☐ Update

(To be filled by financial institution)

KYC Number

(Mandatory for KYC update request)

Account Type\*

☐ Normal☐ Simplified (for low risk customers)☐ Small☐ **1. PERSONAL DETAILS** (Please refer instruction **A** at the end)

Prefix

First Name

Middle Name

Last Name

☐ Name\* (Same as ID proof)

Maiden Name (If any\*)

Father / Spouse Name\*

Mother Name\*

Date of Birth\*

   -    -      

Gender\*

☐ M- Male☐ F- Female☐ T-Transgender

Marital Status\*

☐ Married☐ Unmarried☐ Others

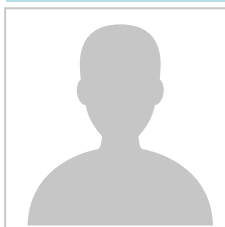
Citizenship\*

☐ IN- Indian☐ Others (ISO 3166 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. 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 section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence\*

Tax Identification Number or equivalent (If issued by jurisdiction)\*

Place / City of Birth\*

ISO 3166 Country Code of Birth\*

 
☐ **3. PROOF OF IDENTITY (PoI)\*** (Please refer instruction **C** 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- UID (Aadhaar)
                    
☐ F- NREGA Job Card
                    
☐ Z- Others (any document notified by the central government)
                    

Identification Number

                    
☐ S- Simplified Measures Account - Document Type code
 

Identification Number

                    
**4. PROOF OF ADDRESS (PoA)\***☐ **4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS** (Please see instruction **D** at the end)(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type\*

☐ Residential / Business☐ Residential☐ Business☐ Registered Office☐ Unspecified

Proof of Address\*

☐ Passport☐ Driving Licence☐ UID (Aadhaar)☐ Voter Identity Card☐ NREGA Job Card☐ Others
                    
☐ Simplified Measures Account - Document Type code
 
**Address**

Line 1\*

Line 2

Line 3

District\*

Pin / Post Code\*

State / U.T Code\*

ISO 3166 Country Code\*



## Annexure B1

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

## Important Instructions:

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



## For office use only

Application Type\*

☐ New ☐ Update

(To be filled by financial institution)

KYC Number

(Mandatory for KYC update request)

☐ 1. DETAILS OF RELATED PERSON (Please refer instruction G at the end)

☐ Addition of 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 1 are optional)

## PROOF OF IDENTITY (PoI) OF RELATED PERSON\* (Please see instruction (H) at the end)

☐ A- Passport Number

Passport Expiry Date

☐ B- Voter ID Card

☐ C- PAN Card

☐ D- Driving Licence

Driving Licence Expiry Date

☐ E- UID (Aadhaar)

☐ F- NREGA Job Card

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

Identification Number

☐ S- Simplified Measures Account - Document Type code

Identification Number

## 2. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

[Signature / Thumb Impression]

Date : Place : 

Signature / Thumb Impression of Applicant

## 3. ATTESTATION / FOR OFFICE USE ONLY

## Documents Received

☐ Certified Copies

## KYC VERIFICATION CARRIED OUT BY

Date

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

## INSTITUTION DETAILS

Name

Code

[Institution Stamp]