

Regd. Office: Block-b, 1st Floor, Siddhi Vinayak Towers, Makarba, Ahmedabad - 380 051.

Phone: +91 79 6666 9000 | Fax: +91 79 2970 2196 | Email: info@kunvarji.com Website: www.kunvarjiwealth.com

MCX Member Code: 12575 SEBI REGISTRATION NUMBER: INZ000180436

# **Client Registration Form - COMRIS**



Non-Individual	Form No.:	
Name:		
Code:		
Branch/RM/AP Name:		
AP Name:		
Group Code:		

CEO Details: Mr. Kunal Shah | Phone: +91 79 66669000 | Email: kunal.shah@kunvarji.com

Compliance Officer: Mr. Atul M. Chokshi, Ph no.: 079-66669000 Email id: atul.chokshi@kunvarji.com

For any grievance/dispute please contact member **KUNVARJI FINSTOCK PVT. LTD**. at the above address or email idinfo@kunvarji.com and Phone no. 91-79-66669000. In case not satisfied with the response, please contact the concerned exchange(s) at

Sr.No.	NAME OF EXCHANGE	EMAIL ID	PHONE NO.
1.	MULTI COMMODITY EXCHANGE OF INDIA LIMITED — MCX	grievance@mcxindia.com	022-6731 8888/022-6649 4000
2.	MULTI COMMODITY EXCHANGE CLEARING CORPORATION LIMITED – MCXCCL	grievance@mcxccl.com	022-6649 4099/022 6726 9558



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# Know your Client (KYC) Application Form (For Non - Individuals Only)

Photograph

Please affix your recent
passport size
photograph and sign
across it

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			D. BANK	ACCOUNT DETAILS			
Bank Name	Branch add	dress Bank	account no.	Account Type: Saving/Current/Oth.	MICR Numbe	er	IFSC code
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ote: Provide a co	y of cancelled cl	heque leaf/ pass bo	ok/bank statem	 nent specifying name of the	applicant, MICR	Code or/and	IFSC Code of the
ank.							
		E. DE	POSITORY A	CCOUNT(S) DETAILS,	if available		
D P Name	D	Depository Name (NSD	L/CDSL)	Beneficiary Name	DP II	D Be	eneficiary ID (BO ID)
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ote: Provide a co	y of either Dem	at Master or a rece	nt holding state	ment issued by DP bearing	name of the appl	icant.	
		F. RE	POSITORY A	CCOUNT(S) DETAILS,	if available		
Repository Partic	ant Name	Repository		Beneficiary name	D	P ID	Beneficiary ID
The position y i air the	ant name	(CCRL/NE	RL)	Deficilities y fluine			(BO ID)
ote: Provide a co	y of either Rema	at Master or a recei	nt holding state	ment issued by RP bearing	name of the appli	cant.	
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lote: Please sig truck off by the		nt boxes against	the Exchange	with which you wish to	trade. The Exc	hange not o	chosen should be
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Sr. No.	Name of the Stoci	k Exchanges #	Date of	Consent for trading on the Ex	change	Signatur	e of the Applicant
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3							
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At the time of p	nting the form,	the Member must s	pecify the name	es of the Exchanges where	the Member has r	nembership.	
				er date, which is not select	ed now, a separa	te consent le	tter is required to be
otained by the M	mber from client	t and to be kept as	enclosure with	this document]			
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Member Code: 12575 MCX SE			INZ00018043			
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Retails of any action/proceed exchange / any other author						
	K DFA	I INGS THRO	OUGH OTHER N	MEMBERS		
If a	pplicant is dealing th	hrough any oth	er Member, provid	de the following det		ed helow):
Member's / Authorized Person (AP)'s No					1	
mellibel 37 Additionized Felson (AF) 3 No						
Exchange						
Exchange's Registration num	ber					
Registered office address						
					Pin	
Tel. (Off.)			Tel. (Off.)			
Email			Website			
Client Code						
Details of disputes/o	lues pending					
,	I. Ir	NTRODUCER	R DETAILS (opt	ional)		
Name of the Introducer						
		Status of th	<u>e Introducer</u>			
Authorized Person		Existing Cl	lient		No Prior Exper	ience
Other Plz. Specify						
	Г					
Phone No.						

Signature



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Signature

**Comris Participants Seal** 



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# **INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM**

#### A. IMPORTANT POINTS:

- 1. Self-attested copy of PAN card is mandatory for all clients.
- 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 authorized 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.
- B. Proof of Identity POI): List of documents admissible as Proof of Identity:
- 1. PAN card.

- C. Proof of Address (POA): List of documents admissible as Proof of Address: {\* Documents having an expiry date should be valid on the date of submission.)
  - 1. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill Not more than 3 months old.
  - 2. GST Registration No.
- 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.
- 4. 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 elc. ,to their Members.
- For FII/sub account. Power of Attorney given by FII/subaccount to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
- 6. The proof of address in the name of the spouse may be accepted.



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#### **COMRIS ACCOUNT TARIFF SHEET**

# FOR TRANSACTIONS IN BASE METALS ONLY Effective from 01.04.2021

I/We agree to pay charges for transaction and holding of base metal electronic receipt in my Comris account as under.

Serial No.	Nature of Transaction	Tariff (Rs.)
1	Pledge creation for Margin purpose	Rs. 50/- per Transaction
2	Pledge creation for purpose other than margin	Rs. 75/- per transaction
3	Un-pledge or De-pledge (For all purposes)	Rs. 75/- per transaction
4	Pledge invocation	Rs. 25/- per transaction
5	Pay-in (Early Pay-in /Delivery Pay-in	Rs. 35/- per transaction
6	Off Market Credit and Off Market Debit	Rs. 50/- per transaction
7	Custody charges	Rs. 25/- per MT per each calendar
		month (whether full or partial)

#### **Terms & Conditions**

- 1. Taxes as applicable.
- 2. Tax invoices will be prepared based on data provided by MCX/MCXCCL.
- 3. The Comris account holder authorises Kunvarji Finstock Pvt. Ltd (KFPL) to debit the invoice amount to his/her/its ledger account with KFPL.
- 4. Tariff rates are subject to change as per discretion of MCX/MCXCCL.
- 5. Any requirements or directives specified by MCX/MCXCCL will be binding on the Comris account holder.

I/We have read and understood the tariff sheet and terms and conditions stated hereinabove and I undertake to abide by the same.

Name of the Client _	
Client Trading Code:	
Comris Account No.	

Signature of the Client/ Comris account holder

bate. / /	
To,	
M/S KUNVARJI FINSTOCK PVT. LTD.	
"B' Wing, Siddhi Vinayak Tower	
Nr. D.A.V. School, Next to Kataria Hοι	ıse
Off S.G. Road,	
Makraba,	
Amedabad-51	

#### Dear Sir/Madam,

Date: /

WHEREAS, the Hindu Undivided Family (hereinafter known as H.U.F.) of Mr	
(Karta) is carrying on business in the name and style of	and intent
to open and operate a Comris account in the name herein, with MCXCCL through M/S.	Kunvarji Finstock Private Limited
(KFPL), Ahmedabad, a Comris Participant, a Stock Broker and Member of MCX.	

- 1. We the undersigned hereby confirm and declare that we are the present adult Co-parceners of the said joint family.
- 2. We hereby confirm that the affairs of the H.U.F. are carried on mainly by the Karta on behalf of and for the benefit of all the co-parceners of the H.U.F. We hereby authorize Mr. \_\_\_\_\_ on behalf of the H.U.F. to sign, execute and submit all applications, forms, document etc. as also to issue instructions for transactions including but not limited to for early pay-in, pay-in, off-market transfer, pledge and unpledged etc. in respect of electronic warehouse receipts holding in firm's Comris account.
- 3. The Karta is also authorized to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writing and deeds as may be deemed necessary or expedient to open such Comris account and give effect to his purpose. We are, however, jointly and severally responsible for all liabilities of the H.U.F. to MCXCCL and the Comris Participant and agree and confirm that any claim due to MCXCCL or to Comris Participant from the H.U.F. shall be recoverable from the assets of anyone or all of us and also from the estate of the H.U.F. including the interest thereon of every co-parcener of the H.U.F., including the share of the minor co-parceners, if any.
- 4. We hereby agree and undertake that all the transactions carried by you as per the instructions whether oral (telephonic or personal) and/or written, given by our above named Karta shall be binding upon our firm as well as to all the partners individually and personally and our respective estates.
- 5. We undertake to inform the Comris Participant in writing of any change that may occur in the Karta or in the constitution of the H.U.F. and until receipt of such notice by the Comris Participant, which shall be binding on the H.U.F. and due obligations of the H.U.F. in the Comris Participant s book on the date of the receipt of such notice by the member and until all such dues and obligations shall have been liquidated and discharged.

<ul><li>6.</li><li>7.</li></ul>	Participant M/S Kunvarji Fir account with you and for authorize you to recognize of Finstock Pvt. Ltd opened in Comris account of the HUF. The names and date of birth inform Member in writing a	the purpose of completing the obligate the Comrist account number the name of Mr.  h of the present minor co-parceners of stand when each of the said members at	me of Karta with MCXCCL through Comris acilitate the operations of the said Comris tions pursuant to Comris operations. We with MCXCCL participant Kunvarji who is the Karta of the H.U.F, as that of H.U.F. are given below. I/We undertake to ttains the age of majority and is authorised
	to act on behalf of, and bind	a the Sala H.O.F.	
	Name of Minor	Father's Name	Date of Birth
		regulations pertaining to operation of cules now in force or any charges that m	Comris account and we agree to comply nay be made therein from time to time.
Th	ank you,		
Yo	urs Truly		
	•		

8.

CO-PARCENER'S NAME	CO-PARCENER'S SIGNATURE

Signature of Karta

(Along with rubber stamp)

### **DECLARATION BY KARTA & COPARCENERS OF HUF**

HUF NAME				
Name of Karta				
		(Name of the Karta) hereby declare	that I am the Kar	ta of the HUF
	(Name of HUF) and following persons are the Co Parceners of the HUF.			
	(Name of the Karta) is the Karta of the above mentioned HUF of which we are the Co Parecener		ned HUF of which	
Sr. No.	Name		Date of Birth	Relationship of Karta
Sr. No.	Name		Date of Birth	-
Sr. No.	Name		Date of Birth	-
Sr. No.	Name		Date of Birth	-
Sr. No.	Name		Date of Birth	-
Sr. No.	Name		Date of Birth	-

#### TO BE GIVEN BY PARTNERSIP FIRM ON ITS LETTERHEAD

Date:	/ /	
"B' Wing	а,	
Dear Sir	/Madam,	
<b>Sub:</b> Op	erations of our Comris account with MCXCCL thi	ough you as Comris Participant
	partners of M/S, a partners of M/S	partnership firm incorporated under the provision of Indianse as under:
1)	receipts of goods deposited in MCXCCL accred	ou for recording and transacting in electronic warehouse dited warehouses and accordingly have submitted to you a of our firm for the purpose of opening a Comris account.
2)	We the undersigned partners, be and are here the partner of our firm to sign, execute and su instructions for transactions including but no	eby authorise Mr./Ms one of other and of the property o
3)	We hereby agree and undertake that all the t	ransactions carried by you as per the instructions whether iven by our above named partner shall be binding upon our
4)	We hereby undertake to inform you in witting	g in case of any change in the constitution of or change of signed by all the partners of the firm for the time being
Naı	me of the partner	Signature with stamp
Naı	me of the partner	Signature with stamp
— Nai	me of the partner	 Signature with stamp

#### TO BE GIVEN BY COMPANY ON ITS LETTERHEAD

CI	ERTIFIED TI	RUE COPY OF THE RESOLUTION P	ASSED AT THE M	IEETING OF TI	HE BOARD OF DIRECTORS OF			
			_ HELD ON	AT	THE REGISTERED OFFICE OF THE			
C	OMPANY A	Γ						
"F	RESOLVED T	HAT						
1.	Rules, Re	mpany be and is hereby authorised to open and operate Comris account as defined as per provisions of Regulations and Bye-laws of MCX Clearing Corporation Limited (MCXCCL) in accordance with enabling ons contained in the Memorandum and Articles of Association and to do all such acts and deeds as may aired pursuant thereto.						
2.	with MC	mpany be and is hereby authorised to open and operate a Comris account in the name of the Company CXCCL through M/S. Kunvarji Finstock Private Limited (KFPL), Ahmedabad, a Comris Participant, a Stock and Member of MCX.						
3.	The Company be and is hereby authorises M/S. Kunvarji Finstock Private Limited (KFPL), Ahmedabad, a Comris Participant to honour all instructions issued including but not limited to for early pay-in, pay-in, off-market transfer, pledge and unpledged etc. in respect of electronic warehouse receipts holding in company's Comris account, by any of the following authorized signatories of the Company and to act upon any such instruction so issued relating to said Comris account.							
	SR.NO.	NAME & DESIGNATION OF TH	E AUTHORISED SIG	INATORY	SIGNATURE WITH STAMP			
	1.							
	2							
	3.							
	4.							
4. 5.	Company formalitie Associatie Mr./Ms. authorise	The Company be and is hereby authorise any one of the aforesaid directors/authorised signatories of the Company, jointly or severally to make an application for opening the said Comris account and to do all other ormalities that are necessary for opening the Comris account including certifying Memorandum and Articles of Association of the Company.  Mr./Ms (Name of the director), director of the Company be and is hereby authorised to send certified copy of this resolution to the aforesaid Comris participant for their information,						
records and necessary action.								
	CERTIFEID	TRUE COPY						
	For		Pvt. Ltd./	Ltd.				
	(Name and Signature with Company's stamp)							
	Date: / /							
	Place:							