

Date:-

Multiplex Capital Limited
100/28, Keshav Tower,
Raja Pur Mkt, Sec-9, Rohini,
Delhi -110085

Sub:-Updation in my/our Demat / Trading account no. _____

(a) Updation of Email id :- _____

Mode of Receiving Statement of Account

(Tick any One)

() Physical () Electronic

Receive Annual Reports AGM notices & other Communications from Issuers & RTAs in

() Physical () Electronic

I hereby declare that aforesaid mobile number or E-mail ID belongs to () me or () my family (spouse, dependent children and dependent parents)

(b) Updation of Telephone/Mob. No :- _____

(C) Updation of Address :- (Proof to be enclosed)

Old Address

New Address

_____	_____
_____	_____
_____	_____

(D) Updation of Bank Account No:- (Proof to be enclosed)

Old Bank Detail

New Bank Detail

Name of Bank _____

Address _____

A/C. NO. _____

MICR No. _____

Thanking you,
Yours truly

Signature

Ist holder Name _____

Iind holder Name _____

IIIrd holder Name _____



A. Identity Details Please fill in ENGLISH and BLOCK LETTERS with black ink

	Prefix	First Name	Middle Name	Last Name
1. Name of Applicant				
Name as per Income Tax Record				
Maiden Name (if any)				
Father / Spouse Name				
Mother Name				

2. A. Gender Male Female Transgender B. Marital status Single Married Others _____

3. PAN _____ Nationality / Citizenship Indian Other (Please specify) _____

4. Residential Status Resident Individual Non Resident Indian Foreign National Person of Indian Origin

Occupation (Please tick (3) any one and give brief details):
 Private Sector Service Public Sector Government Service Business Professional Agriculturist
 Retired Housewife Student Others (Please specify) _____

5. UID/Aadhaar : X X X X X X X X _____ Date of Birth | d | d | m | m | y | y | y | y | _____

6. Proof of Identity submitted for PAN exempt cases (see guideline 'D' in check list.)

PHOTOGRAPH

Please affix the recent passport size photograph and sign across it

B. Address Details

1. Address for Correspondence _____

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

2. Contact Details

Mobile (Primary) (ISD) (STD)	Mobile (Secondary) (ISD) (STD)
Tel. (ISD) (STD)	Fax (ISD) (STD)

MOBILE (Primary) given by me belongs to Me Spouse Dependent children Dependent Parent

E-Mail ID. (In Capital Letters only) _____
 E-MAIL ID given by me belongs to Me Spouse Dependent children Dependent Parent

3. Specify the Proof of Address submitted for Residence / Correspondence Address UID Bank Statement Other _____

4. Permanent Address of Resident Applicant if different from above B1 OR Overseas Address (Mandatory) for Non-Resident Applicant

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

5. Specify the Proof of Address submitted for Residence / Permanent Address _____

C. Fatca & CRS Detail Nationality/Tax Residency/Citizen ship Other than India No Yes

1. Country of Birth _____ Place/City of Birth _____
 Country of Citizenship/Nationality _____
 Country of Tax Residency (Other Than India) _____
 Tax Payer Identification Number (Other Than India) _____

2. Gross Annual Income Details : Income Range per annum : Below Rs. 1 Lac Rs. 1 Lac to 5 Lac
 (please tick ✓) Rs. 5 Lac to 10 Lac Rs. 10 Lac to 25 Lac >25 Lac

Declaration : I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I under take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it. I 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 give my consent for receiving information including Central KYC Registry through SMS/Email on the above registered mobile number/email address.
 I / We hereby provide my / our consent for sharing / disclosed of the Aadhaar number(s) including demographic information with Multiplex Capital Limited, SEBI, Exchanges, CKYC, KRA, Depositories and any other institutions / agencies as per requirement.

SIGNATURE OF APPLICANT

(2)

Place: _____
 Date: _____

IPV TO BE FILLED BY - EMPLOYEE/AP/OTHERS

Intermediary name OR code _____

(Originals Verified) Self Certified Document copies received
 (Attested) True copies of documents received Main Intermediary

<input type="checkbox"/> IN-PERSON VERIFICATION (IPV)	<input type="checkbox"/> DOCUMENTS VERIFIED WITH ORIGINALS	<input type="checkbox"/> CLIENT INTERVIEWED BY
Date : d d / m m / y y y y	Institution Name & Code : Multiplex Capital Ltd	
Name : _____	Code : _____	
Designation : _____	Signature : _____	

J. NOMINATION FORM FOR TRADING AND DEMAT ACCOUNTS *(To be filled in by individual applying singly or jointly)*

Nomination Registration No. : <input type="text"/>	Date : <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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UCC <input type="text"/>	DP ID <input type="text"/>	Client ID <input type="text"/>
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I/We wish to make a nomination. [As per details given below]

NOMINATION DETAILS

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my/our account in the event of my/our death.

	Nomination can be made upto three nominees in the account.	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr. / Mrs.)			
2	Share of each Nominee Equally <input type="checkbox"/> [If not equally, please specify percentage]	%	%	%
Any odd lot after division shall be transferred to the first nominee mentioned in the form.				
3	Relationship With the Applicant (If any)			
4	Address of Nominee(s)			
		City/Place		
		State		
		Pin Code	<input type="text"/>	<input type="text"/>
		Country		
5	Mobile/Telephone No. of Nominee(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Email ID of Nominee(s)			
7	Nominee Identification details : [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature	Photograph of 1st nominee	Photograph of 2nd nominee	Photograph of 3rd nominee
		Signature of Nominee across photograph	Signature of Nominee across photograph	Signature of Nominee across photograph
	Signature			
	<input type="checkbox"/> PAN	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="checkbox"/> Aadhaar	<input type="text"/> x x x x x x x x	<input type="text"/> x x x x x x x x	<input type="text"/> x x x x x x x x
	<input type="checkbox"/> Proof of Identity			
	<input type="checkbox"/> Demat Account ID			
	<input type="checkbox"/> Saving Bank Account No.			

Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:		
8	Date of Birth {in case of minor nominee(s)}	D D M M Y Y Y Y D D M M Y Y Y Y D D M M Y Y Y Y
9	Name of Guardian (Mr. / Mrs.) {in case of minor nominee(s)}	
10	Address of Guardian(s)	
		City/Place
	State	
	Pin Code	
	Country	
11	Mobile/Telephone No. of Guardian	
12	Email ID of Guardian	
13	Relationship of Guardian with Nominee	
14	Guardian Identification details : [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature	<div style="border: 1px solid black; padding: 10px; text-align: center;"> Photograph of Guardian Signature of Guardian across photograph </div>
	<input type="checkbox"/> Signature	<div style="border: 1px solid black; padding: 10px; text-align: center;"> Photograph of Guardian Signature of Guardian across photograph </div>
<input type="checkbox"/> PAN		
<input type="checkbox"/> Aadhaar	x x x x x x x x	x x x x x x x x
<input type="checkbox"/> Proof of Identity		
<input type="checkbox"/> Demat Account ID		
<input type="checkbox"/> Saving Bank Account No.		
		Name(s) of Holder(s)
		Signature(s) of holder
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)		 11
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

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



Date: _____

To
Multiplex Capital Ltd
100/28, Keshav Tower, Raja Pur Market,
Sector-9, Rohini Delhi-110085

Dear Sir,

Sub: My/Our request for reactivation of equity trading and demat account

I/We, the under mentioned have trading account with you, which has turned dormant as per your policy. I/ We wish to trade again and request you to mark my/our account as active again.

(1) Please treat all information / details provided by me/us at the time of account opening Know Your Client formalities as applicable at the current time

(2) Some of the information / details provided by me/us at the time of account opening Know Your Client formalities have changed and same are being provided with the enclosed Profile change Request Form; please take the same on record.

STRIKE OFF THE IRRELEVANT / NON-APPLICABLE OF (1) AND (2) ABOVE.

Yours Faithfully,

(Signatures)

Name: _____

Client Code: _____

Client id: _____