

**JHP SECURITIES PVT.LTD.****201, Dev Neo Vikram, Sahakar Nagar C.H.S., New Link Road, Above Audi Car Showroom, Andheri (W) Mumbai - 400 053****Ph No.: 022-69699902 / 905 Fax No.: 022-69699900 Email Id- ig@jhpsecurities.com****For Non - Individuals**

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												
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 (Tike the applicable box. If not marked the default option would be physical)	<input type="checkbox"/> Physical <input type="checkbox"/> Electronic <input type="checkbox"/> Both Physical & Electronic												
<b>Other Details</b>													
<u>Gross Annual Income Details</u>	Income Range per annum: <input type="checkbox"/> Up to Rs.1,00,000 <input type="checkbox"/> Rs 1,00,000 to Rs 5,00,000 <input type="checkbox"/> Rs 5,00,000 to ` 10,00,000 <input type="checkbox"/> Rs 10,00, 000 to Rs 25,00,000 <input type="checkbox"/> Rs 25,00,000 to Rs. 1,00,00,000 <input type="checkbox"/> More than Rs.1,00,00,000												
	Net worth as on (Date)    D    D    M    M    Y    Y    Y    Y    Y    Rs [Net worth should not be older than 1 year]												
<b>Please tick</b> If any of the authorized signatories / Promoters / Partners / Karta / Trustees / Whole Time Directors is either Politically Exposed Person (PEP) or Related to Politically Exposed Person (RPEP) <input type="checkbox"/> . Please provide details as per Annexure 2.2 A													
<b>Any other information:</b>													
Transactions Using Secured Texting Facility (TRUST) Refer to Terms and Conditions Annexure – 2.6	I wish to avail the Trust facility using the mobile number registered for SMS Alert Facility. 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. <table border="1"> <thead> <tr> <th>Stock Exchange Name / ID</th> <th>Clearing Member Name</th> <th>Clearing Member ID (Optional)</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)									
Stock Exchange Name / ID	Clearing Member Name	Clearing Member ID (Optional)											

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 Holder	Second Holder	Third Holder
Name			
Signature *	(x)		