

# INDIVIDUAL CLIENT REGISTRATION FORM

*(This information is the sole property of the trading member / brokerage house and would not be disclosed to anyone unless required by law or except with the express permission of clients) To*

## Trading Member's

SS Corporate Securities Limited  
SS House, D-845, Saraswati Vihar  
Pitampura, Delhi 1100034  
SEBI Regd No INB230753830

## Clearing Member

SS Corporate Securities Limited  
SS House, D-845, Saraswati Vihar  
Pitampura, Delhi 1100034  
SEBI Regd No INF230753830

## Client Information

1. Name of the client:

\_\_\_\_\_  
(Surname) (Name) (Middle Name)

2. Father's/Husband Name :

\_\_\_\_\_  
3. Unique Identification Number (where obtained) \_\_\_\_\_

3. Sex: Male  Female

4. Date of Birth: dd/mm/yyyy

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5. Marital Status:

6. Residence Address:

City:

Pin Code:

State:

Country:

Nationality:

Telephone Number: (Res)

Fax No:

Residential Status: Indian / NRI / Others

Email Id :-

PAN :-

*(Enclose Photocopy of PAN Card and Copy of Income Tax Return)*

## Photograph

## 7. Bank and Depository Account Details

Bank Name *(through which transactions will generally be routed.)*

Branch Address

Account No:

Account Type: Savings / Current / NRI / Others  
*(Copy of a canceled Cheque leaf/pass book/bank statement containing name of the constituent should be submitted.)*

Depository Participant Name *(through which transactions will generally be routed.)*

Depository Name - NSDL / CDSL

DPID								
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Client Id								
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## 8. Occupation Details

*(Tick whichever is applicable)*

Occupation :

Employed  Self Employed

Business  Professional

House -wife  Others

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## 9. If Employed

Name of Employer:

Office Address:

City:

Pin Code:

State:

Country:

Telephone Number (Office) Fax No / Telex No:

## 10. If Self Employed / Business / Professional/Others

Name of the establishment:

Office Address:

City:

Pin Code:

State:

Country:

Telephone Number (Office)

Fax No / Telex No:

## 11. Financial details of the constituent:

Income Range (Per Annum): (Tick where applicable)

- Below Rs. 1,00,000  
 Rs. 1,00,000 To Rs. 5,00,000  
 Rs. 5,00,000 To Rs. 10,00,000  
 Rs. 10,00,000 To Rs. 25,00,000  
 Above Rs.25,00,000

## 12. Investment/Trading Experience

No Prior Experience

\_\_\_ Years in Stocks

\_\_\_ Years in Derivatives

\_\_\_ Years in Other investment related fields

## 13. Trading Preference

A. Stock Exchanges on which you wish to trade  
(if the member is registered for such Exchanges):

National Stock Exchange Limited

B. Market segments you wish to trade (if the member is registered for such segment):  
(Please tick in the relevant boxes)

- Capital Market /Cash Segment  
 Derivatives Market

14. Whether registered with any other broker-member: (if registered with multiple members, provide details of all)

Name of Broker \_\_\_\_\_

Name of Exchange \_\_\_\_\_

Client code no \_\_\_\_\_

15. Details of any action taken by SEBI/Stock exchange/any other authority for violation of securities laws/other economic offences. (Please Attach)

## 16. References

Introduction: Introduced by another constituent / director or employee of trading member/ any other person (please specify)

Name of the Introducer:

\_\_\_\_\_  
(Surname) (Name) (Middle name)

Signature \_\_\_\_\_

MAPIN UID No. of introducer, if any: \_\_\_\_\_

Name and designation of the employee who interviewed the client: \_\_\_\_\_

(Signature of the employee: \_\_\_\_\_)

## For Proof of Identity

Mapin ID \_\_\_ Pan No \_\_\_ Passport Voter Id \_\_\_

Driving License \_\_\_

## For Proof of Address

Passport \_\_\_ Voter ID \_\_\_ Driving Licence \_\_\_

Bank Passbook \_\_\_ Rent Agreement \_\_\_

Ration Card \_\_\_ Telephone Bill \_\_\_

Electricity Bill \_\_\_

## 17. 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 of the individual constituent)

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

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

## For Office Purposes:

Unique Constituent Code : \_\_\_\_\_

(To Be Inserted By The Brokerage Firm)

Original documents

Verified By \_\_\_\_\_ Authorised By : \_\_\_\_\_

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