



SARAL - CLIENT REGISTRATION FORM
(ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUALS TRADING IN CASH SEGMENT ONLY)

Name _____

PAN No.

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DP a/c no.

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Client code _____ Branch _____

Dealer Name _____ Brokerage Scheme _____

Ref No. / Sr. No. _____

Alankit Imaginations Limited

Member: Bombay Stock Exchange Limited
Member: National Stock Exchange of India Limited
Member: MCX Stock Exchange Limited ,NCDEX
Depository Participant: CDSL,NSDL

TRADING & DEMAT ACCOUNT CHECKLIST (INDIVIDUAL)

Required Validation	ID Details			Address Details		Bank Details	
Proofs	Name	Sign Photo	Photo	Correspondence Address	Permanent Address	Bank Name & A/c. No.	MICR / IFSC Code
PAN Card	✓	✓	✓				
Passport*	✓	✓	✓	✓	✓		
Driving Licence*	✓	✓	✓	✓	✓		
UID (Aadhaar)	✓		✓	✓	✓		
Ration Card	✓		✓	✓	✓		
Telephone Bill** (Mobile bill not accepted)				✓	✓		
Electricity Bill**				✓	✓		
Flat maintenance bill paid copy**				✓	✓		
Insurance premium paid receipt**				✓	✓		
Bank Statement #				✓	✓	✓	✓
Bank Passbook ##				✓	✓	✓	✓
Cancelled Cheque (With Client name & A/c. No. Printed)						✓	✓
Bank Verification Letter (Original)	✓	✓	✓	✓	✓	✓	✓

Abbreviations:

- 1) * The Proof should be valid on the DATE of agreement.
- 2) ** The Proof should not be more than 3 months old.
- 3) # Bank Statement should be original and of latest quarter. It should have Bank Manager's Stamp & Sign, if original stationery is not available.
- 4) ## Bank Passbook should have Bank Manager's Stamp & Sign if it is hand written.
- 5) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)
- 6) Photocopy of the Bank Statement having name and address of the BO
- 7) Photocopy of the Passbook having name and address of the BO, (or)
- 8) Letter from the Bank.

In case of options (6), (7) and (8) above, MICR code of the branch should be present / mentioned on the document.

PROOF FOR EXISTING DEMAT ACCOUNT HOLDERS

- ✓ DP Statement ✓ Client Master Report (CMR)
1. Clients name & DP A/c No. on the proof of DP should match with that mentioned in the account opening form.
 2. DP Statement should clearly show DP ID & Client ID.
- Note : The A/c opening form should be filled properly in BLOCK LETTERS ONLY

DETAILS OF THE TRADING MEMBER

Name of Stock Broker / Trading Member/ Clearing Member	Alankit Imaginations limited SEBI Registration no. INZ000028539	
Exchange Name	MemberShip Code	
National Stock Exchange of India limited	08812	
BSE	3071	
MCX	10705	
NCDEX	00016	
Registered office address	Address	205-208, Anarkali Complex , Jhandewalan Extension, New Delhi-110005
	Phone	011 – 42541234
	Email	info@alankit.com
	Website	www.alankit.co.in
Correspondence office address	Address	'Alankit House' 4E/2, Jhandewalan Extension, New Delhi-110005
	Phone	011 – 42541234
	Email	info@alankit.com
	website	www.alankit.co.in
Details of Compliance officer- Trading	Name	Mr. Ashok Kumar Swarnkar
	Phone No.	011-42541804
	Email	ashokks@alankit.com
Details of Compliance officer- Depository	Name	Mr. Ajay Suri
	Phone No.	011-42541814
	Email	ajays@alankit.com

In case of any grievance / complaint against Alankit Imaginations Limited :

✉ Contact Compliance Officer of Stock Broker and Depository Mr. Ashok Kumar Swarnkar. and Mr. Ajay Suri on email- info@alankit.com and Phone No. 91-011-42541234.

not satisfied with the response of the Stock Broker/ Depository Participant, you may contact the concerned Stock Exchange / Depository at the following

Regulator	Web Address	Contact No.	Web Address
BSE	www.bseindia.com	022-2272 8097	is@bseindia.com
NSE	www.nseindia.com	1800220058	ignse@nse.co.in
NCDEX	www.ncdex.com	18002662339	askus@ncdex.com
MCX-SX	www.mcx-sx.com	022-67319000 Extn. 8883	investorcomplaints@mcx-sx.com

Regulator	Web Address	Contact No.	Web Address
CDSL	www.cdslindia.com	022-2272 3333	complaints@cdslindia.com
NSDL	www.nsdl.co.in	022- 48867000	relations@nsdl.com

✉ You can also lodge your grievances with SEBI at <http://scores.gov.in>. For any queries, feedback or assistance, please contact SEBI Office on Toll Free Helpline at 1800 22 7575 / 1800 266 7575.



KYC - Please fill this form in **BLOCK LETTERS**

6. Specify the proof of Identity submitted:

**Please affix the
recent passport
size photograph and
sign across it**

[illegible]

Date: (dd/mm/yy)

1



Application No. :

1. Name of Applicant

[illegible][illegible]

**Please affix the
recent passport
size photograph and
sign across it**

3a. Gender ☐ Male ☐ Female b. Marital Status ☐ Single ☐ Married c. Date of Birth

d	d	/	m	m	/	y	y	y	y
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4. Nationality : _____

5. a. PAN

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 b. Aadhaar No. if any: _____

6. Specify the proof of Identity submitted:

1. Residence / Correspondence Address:

[illegible][illegible]

3. Permanent Address (if different from above address):

[illegible]

4. Specify the proof of address submitted for residence/correspondence /permanent address:

I hereby declare that the details furnished above are true and correct to the best of my/our 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/ We are aware that I/We may be held liable for it.

SIGNATURE OF THE APPLICANT

Date: (dd/mm/yy)

☐ Originals Verified Self-Attested Document Copies received

Name & Signature of the Authorised Signatory
Seal/Stamp of the Intermediary



Application No. :

1. Name of Applicant

PHOTOGRAPH

**Please affix the
recent passport
size photograph and
sign across it**

4. Nationality : _____

b. Aadhaar No. if any: _____

6. Specify the proof of Identity submitted:

1. Residence / Correspondence Address:

City/Town/VillagePin CodeStateCountry

2. Contact Details

Tel. (Off.) (ISD) (STD)

Tel. (Res)	(ISD)	(STD)
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Mobile	(ISD)	(STD)
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Fax	(ISD)	(STD)
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E-mail Id

3. **Permanent Address** (if different from above address):

City/Town/VillagePin CodeState

Country	
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4. Specify the proof of address submitted for residence/correspondence /permanent address:

DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my/our 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/ We are aware that I/We may be held liable for it.

SIGNATURE OF THE APPLICANT

Date: (dd/mm/yy)

☐ Originals Verified Self-Attested Document Copies received

Name & Signature of the Authorised Signatory
Seal/Stamp of the Intermediary

OTHER DETAILS

1. Bank Account(s) Details

Bank Name	Branch Address	Bank Account No.	Account Type: Saving/Current	MICR Number	IFSC Code

2. Demat account details:(In case the client does not have DP account, this column may be crossed)

DP Name	(NSDL/CDSL)	Beneficiary Name	DP ID	BO ID

3. Whether DP account is also to be opened with the same intermediary (☐ Yes / ☐ No)

4. Trading Preferences: Please sign the relevant boxes where you wish to trade.

Exchange	Sign	Exchange	Sign	Exchange	Sign
NSE		BSE		MCX-SX	

5. Brokerage Scheme Code - Cash : _____

6. Mode of receiving Contract Note / Statement of Account: Physical / Electronic (Please indicate your preference)_____

7. Standing instructions to receive credits automatically into my BO account (☐ Yes / ☐ No)

NOMINATION DETAILS

I/We the Sole Holder / Joint Holders / Guardian (in case of minor) hereby declare that :

☐ I/We **do not wish to nominate any one for this trading & demat account.**

☐ I/We **nominate** the following person who is entitled to receive funds/security balance lying in my/our account, particulars whereof are given below, in the event of my/our death.

Full Name of the Nominee	<input type="text"/>																				
Relationship with Client (BO)	<input type="text"/>										PAN of Nominee	<input type="text"/>									
Date of Birth	<input type="text"/>								UID (Optional)	<input type="text"/>											
Address	<input type="text"/>																				
	<input type="text"/>																				
City/Town/Village	<input type="text"/>															PIN	<input type="text"/>				
State	<input type="text"/>										Country	<input type="text"/>									
E-mail ID	<input type="text"/>																				
Phone No.	<input type="text"/>										FAX No.	<input type="text"/>									

As the nominee is a minor as on date, to receive the funds / securities in this account on behalf of the nominee in the Sole holder/ all Joint holder, I/We appoint following to act as Guardian.

Name of Guardian	<input type="text"/>																											
Address	<input type="text"/>																											
	<input type="text"/>																											
City/Town/Village	<input type="text"/>														<input type="text"/>				PIN		<input type="text"/>							
State	<input type="text"/>														<input type="text"/>		Country		<input type="text"/>									
Age	<input type="text"/>		years		Relationship of Guardian with Nominee														<input type="text"/>									
E-mail ID	<input type="text"/>																											
Phone No.	<input type="text"/>														FAX No.		<input type="text"/>											

This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.
 Nomination accepted and registered vide Registration No.: _____ Registration Date : _____

Name & Address of Witnesses (Mandatory if client has made Nomination)	Signature
1.	
2.	

DECLARATION

I have understood the contents of policy and procedures document, tariff sheet, '(Scheme Selected " _____ ") Rights and Obligations' document and 'Risk Disclosure Document'. I do hereby agree to be bound by such provisions as outlined in these documents. I have also been informed that the standard set of documents has been displayed for information on stock broker's designated website.

	First / Sole Holder or Guardian (incase of Minor)	Second Holder	Third Holder
Name			
Signature			

Place	Date	D	D	M	M	Y	Y	Y	Y
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FOR OFFICE USE ONLY

UCC Code allotted to the Client: _____

DP Name	(NSDL/CDSL)	Beneficiary Name	DP ID	BO ID

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature			

I / We undertake that I/we have made the client aware of "Policy of Procedures' tariff sheet. I/We have also made the client aware of 'Rights and Obligations' document (s). RDD and guidance Note. I/We have given/sent him a copy of all the KYC Documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet would be duly intimate to the clients. I/We also undertake that any change in the 'Right and Obligations' and RDD would be made available on my/ our website, if any for the information of the clients.

If the client chooses to avail the demat facility from the same stock broker who is also a depository participant, the stock broker may use the same form and provide the details of the demat account opened for the said client to the client while providing a copy of the KYC documents.

Signature of the Authorised Signatory

Seal/Stamp of the Member

Date _____

NOTE : This form is applicable for individual investors trading in the cash segment. if such investors wish to trade in segments other than cash segment and / or wish to avail facilities such as internet trading, running account, margin trading, Power of Attorney etc. they may furnish additional details required as per prescribed regulation to the concerned intermediary.

DECLARATION

Date:

To,
ALankit Imaginations limited
'Alankit House' 4E/2, Jhandewalan Extension,
New Delhi-110005

Dear Sir,

I/ We hereby state and declare that I have received, read and understood the below mentioned documents to my satisfaction and understood the voluntary clauses mutually agreed between us.

1. I/ We have received and read the Documents describing Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories for the purpose of opening a Demat account.
2. I/ We have received and read the document stating the Rights & Obligations of stock broker/trading member, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading).
3. I/ We have received and read the Document detailing risks associated with dealing in the securities market in the Risk Disclosure document.
4. I/ We have received and read the Guidance note detailing do's and don'ts for trading on exchanges, for the education of the investors.
5. I/ We have received and read the Document describing significant policies and procedures of the stock broker and also the tariff structure.
6. I/ We have received and read the Document describing Information on prevention of money laundering act 2002, (PMLA)
7. I/ We have received and read the Guidance note detailing do's and don'ts for DP, for the education of the investors.
8. Details of DP Schemes and Charges Applicable

I have got a clear idea about all brokerage, commissions, fees and other charges levied by the Alankit Imaginations Limited for trading and Depository account as per the relevant provisions/ guidelines specified by the SEBI/Stock Exchanges.

I hereby acknowledge the same.

Client Code : _____

	First / Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signature			

Place	Date	D	D	M	M	Y	Y	Y	Y
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Alankit Imaginations limited

Registered and Corporate Office: 205-208, Anarkali Complex , Jhandewalan Extension, New Delhi-110005
Tel.: +91 011 42541234 • Web:www.alankit.co.in• CIN : U74899DL1994PLC059289