



Wealthstreet
The Financial Engineers

Account Opening Form



Client Name: CHETAN BHUVIR HUF Form No.: _____

Trading Code: _____

Demat Account No.: _____

Branch Code / Name: 101 / AHMEDABAD

Authorize Person Code / Name: _____

Date of Activation: _____



ATTENTION

Declaration pursuant to National Stock Exchange of India Circular bearing reference No. NSE/INSP/2011/121 dated 22nd August, 2011 and Bombay Stock Exchange Limited Circular bearing reference No. 20110823/4 dated 23rd August, 2011 and CDSL/OPS/DP/Policy/2615 dated 23rd August, 2011 read with SEBI circular bearing reference No. Cir/ MIRSD/16/2011 dated 22nd August, 2011, Multy Commodity Exchange Limited (MCX) Circular bearing No. MCX / COMP / 469 / 2011 dated 22nd December, 2011 read with SEBI Circular bearing No. Div. III / I / 89 / 07 dated 16th December, 2011.

Declaration pursuant to PMLA by SEBI vide its circular ISD/AML/CIR-1/2010 dted 12th February, 2011.

<p>Professional Clearing Member NSE & BSE - F & O NSE - CD Edelweiss Custodial Services Ltd Edelweiss House, 5th floor, Kalina, Santacruz (E) Mumbai - 400098</p>	<p>Wealthstreet Advisors Private Limited (WSAPL) SEBI Regn. Nos. :- NSE Cash (CM) NSE Derivatives (F&O) NSE Currency Derivatives (CD) BSE Cash (CM) BSE Derivatives (F&O) BSE Currency Derivatives (CD) MCX CDSL DP - 85500 MFSS Segment - AMFI</p> <p style="text-align: right;">} INZ 000157331 Dt. 27.09.2017 } IN - DP - 361 - 2018 Dt. 05.04.2018 - ARN-118251 Dt. 09.01.2017</p>
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(This information is the sole property of Wealthstreet Advisors Private Limited and would not be disclosed to anyone unless required by law or except with express permission of client)

Director / Compliance Officer Name	Mr. Ajay Sarogi / Mrs. Bhairavi Joshi	
Tel No.	079-66775500	Email id: grievance@wealthstreet.in

For any grievance / dispute please contact **Wealthstreet Advisors Private Limited (WSAPL)** at the above address or email id - helpdesk@wealthstreet.in and Tel. No. 079-66775500. In case not satisfied with the response, please contact the concerned exchange(s). For **NSE** for - ignse@nse.co.in or 022-26598190 / For **BSE**- is@bseindia.com or 022-22728097. For **MCX**- compliance@mcxindia.com or 022-66494090.





Wealthstreet
The Financial Engineers

ACCOUNT OPENING KIT

ACKNOWLEDGEMENT

Wealthstreet Advisors Pvt Ltd

Regd. Office : A-1101, Mondeal Heights, Besides Novotel Hotel, S.G. Highway, Ahmedabad-380015.

Dear Sir,

This has reference to necessary Know Your Client Form containing basic information, additional information and other documents executed by me. I hereby acknowledge receipt of following documents from you:-

S.No.		Page Nos.
Particulars (Mandatory as prescribed by Equity Exchange)		
1.	Documents containing mandatory Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories	1-4
2.	Documents containing voluntary Rights & Obligations of stock broker, sub-broker and client forming part of documents as mentioned in clause 1 above.	5-11
3.	Internet & wireless technology based trading facility provided by stock brokers to client	12-13
4.	Risk Disclosure Documents.	14-19
5.	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	20-22
6.	Policy and Procedures document. (Voluntary as prescribed by Member Broker)	23-30
Particulars (Voluntary as prescribed by Member Broker)		
1.	Containing Clause (1-27) Voluntary documents pertaining to non-mandatory documentation and tariff sheet duly signed by me.	31-36
Mandatory Documents as Prescribed by Commodity Exchange		
1.	Uniform Risk Disclosure Document (RDD) - Document detailing risks associated with dealing in the commodities market.	1-6
2.	Rights and Obligations of Members, Authorized Persons and Clients - Document stating the rights & obligations of member, authorized person and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading)	7 - 17
3.	Internet & wireless technology based trading facility provided by members to client	18 -19
4.	Do's and Don't for the Investors - Document detailing do's and don't for trading on exchange, for the education of the investors.	20 - 23
5.	Policies & Procedure - Policies & Procedure for commodities.	24 - 28

I state that I have read and understood all above documents and these documents are binding upon me.

Thanking You,

Signature

CHETAN BHUVIRHUF

C.Bhuvir

(First/Sole Holder Signature) KARTA

[Signature Box]

(Second Holder Signature)

[Signature Box]

(Third Holder Signature)



**MANDATORY DOCUMENTS AS PRESCRIBED BY SEBI UNDER NOTIFICATION NO.
CIR/MIRSD/16/2011 (22.08.2011)**

Sr. No.	Name of the document	Brief significance of the document	P.G. Nos.
1.	Know Your Client or Account Opening Form		-
		B] Document captures the additional information of the constituent relevant to trading account (for non -Individuals)	1 - 2
2.	Trading Account Details and Brokerage Tariff Details	Details of Constituent pertaining to bank account / Depository / Past actions. Document detailing the rate/amount of brokerage and other charges levied on the constituent for trading on the Stock & Commodity Exchanges.	3 - 10
3.	BO Nomination Form	Details pertaining to Beneficiary Owner	11 - 12
4.	Schedule of Charges (BO Account)	Tariff details pertaining to BO Account	13
5.	FATCA Individual	Account Opening Form Supplement	14
6.	Power Of Attorney	POA to nominate, constitute and appoint Member for DP operations, pledging with clearing corporation etc.	15 - 16
7.	Declaration By HUF	Declaration for operating Beneficiary Account (by Karta/HUF)	17
8.	Running Account Authorization	Authorization letter to maintain constituents account on Running Account basis.	18 - 20
9.	Star MF / MFSS	Mutual Fund Registration BSE/NSE	21
10.	ECN	Declaration for Commodity Exchange	22 - 23





Wealthstreet
The Financial Engineers

Regd. Office : A-1101, Mondeal Heights,
Besides Novotel Hotel, S.G. Highway,
Ahmedabad-380015.

KNOW YOUR CLIENT (KYC) APPLICATION FORM - NON-INDIVIDUALS										
Please fill this form in English and in block letters										
IDENTITY DETAILS										
Name of the Applicant		CHETAN BHUVIR HUF KARTAR								
Date of Incorporation	09	07	20	16	Place of Incorporation	AHMEDABAD				
date of commencement of business: DDMMYYYY										
PAN	B	G	P	D	H	0	7	9	2	B
Regn. No. (e.g. CIN)										
Status (Please Tick Any One)										
<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust	<input type="checkbox"/> Charities					
<input type="checkbox"/> NGO's	<input type="checkbox"/> FI	<input type="checkbox"/> FII	<input checked="" type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> Bank					
<input type="checkbox"/> Government Body	<input type="checkbox"/> Non-Government Organization		<input type="checkbox"/> Defense Establishment		<input type="checkbox"/> BOI					
<input type="checkbox"/> Society	<input type="checkbox"/> LLP	<input type="checkbox"/> Qualified Foreign Investor	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> Others (please specify)						
ADDRESS DETAILS										
ADDRESS FOR CORRESPONDENCE: A-1101 MONDEAL HEIGHTS, S G HIGHWAY										
City	AHMEDABAD	PIN	3	8	0	0	1	5	State	GUJARAT
Country	INDIA									
Registered Address : (If different from Correspondence): LATEST BANK PASSBOOK										
SAME AS ABOVE										
City	PIN		State		Country					
CONTACT DETAILS										
Tel. Off.		Tel. Resi.			Fax					
Mobile	9998243185			Email	CG&BHUVIR@YAHOO.COM					
Specify the proof submitted for Correspondence Address					Specify the proof submitted for Registered Address					
OTHER DETAILS										
Name, PAN, residential address and photographs of promoters/partners/karta/Trustees and whole time directors: (In case of additional list of directors, separate sheet should be used)										
Name	CHETAN & BHUVIR			Name				Name		
Residence Address	L-276/3307 SLUM CLEARANCE BOARD, GOTA AHMEDABAD-60			Residence Address				Residence Address		
PAN No.	A	L	R	P	B	8	5	2	4	A
DIN/UID No.				DIN/UID No.				DIN/UID No.		
photograph	Affix recent passport size photograph			photograph	Affix recent passport size photograph			photograph	Affix recent passport size photograph	
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%; border: 1px solid black; padding: 5px;"> <p>CHETAN BHUVIR HUF KARTAR C. B. Bhuvir</p> </div> <div style="width: 30%; border: 1px solid black; padding: 5px;"></div> <div style="width: 30%; border: 1px solid black; padding: 5px;"></div> </div>										
First / Sole Holder			Second Joint Holder			Third Joint Holder				



NIKYC_F

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my our knowledge and belief and I/we 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.


CHETAN BHUVIR HUF
KARTA
 Name and Signature of the Authorised Signatory (ies)

Date 1 2 11 11 2 0 1 9

IN PERSON VERIFICATION DONE BY

Sr. No.	particulars
1.	<input type="checkbox"/> Originals verified and Self-Attested Document copies received.
2.	In-Person-Verification (IPV) details :
a)	Name of the person doing IPV/Employee/SB/AP... DHAVAL BAROT
b)	Designation RM
c)	Name of Organisation WSAPL
d)	Signature Dhaval
e)	Date 1 2 11 11 2 0 1 9

I / We undertake that we have made the client aware of tariff sheet and all the voluntary / non-mandatory documents. I / We have also made the client aware of 'Rights and Obligations' documents (s), RDD, 'Do's and Don't and Guidance Note. I / We have given/sent him a copy of all the KYC documents. I / We undertake that any change in the tariff sheet and all the voluntary / non-mandatory documents would be duly intimated 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.

Name & Signature of the Authorised Signatory	Seal/Stamp of the intermediary
Date	D D M M Y

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date : 12 11 20 19

Emp. Name DHAVAL BAROT

Emp. Code 1064

Emp. Designation RM

Emp. Branch AHMEDABAD

CHETAN BHUVIR HUF
KARTA



NIKYC_B



TRADING / DEMAT ACCOUNT RELATED DETAILS

FUNDS PAYOUT THROUGH NATIONAL ELECTRONIC FUND TRANSFER (NEFT)

I/We CHETAN BHUVIR HUF wish to receive funds payout through NEFT. My bank details are as given below for your records. Request you to release my / our funds payout

Bank Name	BANK OF BARODA													
Bank Address	S.P COLONY BRANCH AHMEDABAD													
Account Number	0	8	4	0	0	0	0	2	8	0	1	3	7	4
Account Type	<input checked="" type="checkbox"/> Saving			<input type="checkbox"/> Current				Others (please specify)						
IFSC Code	B	A	R	B	0	6	1	0	1	3	5			
MICR Code	3	8	0	1	5	0	0	2						

I/We hereby declare that the above mentioned details are correct & Wealthstreet Advisors Private Limited or any of the group companies shall not be held responsible for any kind of wrong transfer due to incorrect information given by me / us.

Please provide cancelled cheque leaf for MICR & IFSC Code.

DEPOSITORY ACCOUNT(S) DETAILS

DP Name	WS APL	
DP ID	12085500	
BO Client ID		
Depository	NSDL <input type="checkbox"/>	CDSL <input checked="" type="checkbox"/>
DP Address	A' BAD	

For HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., although the account is opened in the name of the karta, partner(s), trustee(es) etc., the name & PAN of the HUF, Partnership Firm, Unregistered Trust, Association of Persons (AOP) etc., should be mentioned below:

a) Name	CHETAN BHUVIR HUF	b) PAN	B	G	P	D	H	0	7	9	2	B
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In case of filis/Others (as may be applicable)

RBI Approval Reference Number	
RBI Approval date	D D M M Y Y Y Y
SEBI Registration Number (for Filis)	

BENEFICIARY NAME(S)

1.	
2.	
3.	



INVESTMENT/TRADING EXPERIENCE

No Prior Experience _____ Years in Commodities _____ Years in other investment related fields

GST DETAILS (As applicable, State wise)

Local GST Registration No.			
Name of the State			
Other GST Registration No.			
Name of the State			

TRADING PREFERENCE

*Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.

Exchange segment for Equity	NSE	BSE
Cash	⑤ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA	⑥ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA
F & O	⑦ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA	⑧ →
Currency	⑨ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA	⑨ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA

Other preferences

Mutual Fund	⑩ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA	
-------------	--------------------------------------------	--

Exchange segment for Commodity	MCX	NCDEX
	⑪ → CHETAN BHUVIR HUF C.G. Bhuvir KARTA	⑫ →

#If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be given by the client to the stock broker.



BANK_DP_B

PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years:

DEALINGS THROUGH SUB-BROKERS AND OTHER STOCK BROKERS

If client is dealing through the sub-broker, provide the following details:

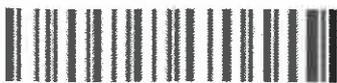
Sub-broker's Name:			
Registered office address:	NSE SEBI Regn. No.:		
	BSE SEBI Regn. No.:		
	Tel.:		
	Fax:		
	Website :		

whether dealing with any other stock broker/sub-broker (in case dealing with multiple stock brokers/sub-brokers, provide details of all)

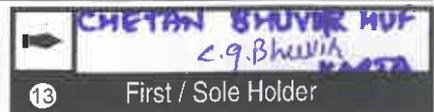
Name of stock broker:			
Name of sub-broker, if any:			
Client Code:			
Exchange:			
details of disputes/dues pending from/to such stock broker/sub- broker:			

ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify):	<input checked="" type="checkbox"/> Electronic Contract Note	<input type="checkbox"/> Physical
Specify your Email id, if applicable: The E-mail Id belongs to : If Family Member, then Relation	<u>CGBHUVIR@YAHOO.COM</u> <input checked="" type="checkbox"/> Own <input type="checkbox"/> Family Members	
Whether you wish to receive SMS alert from Stock Exchanges / Stock Broker	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Detail of Owner of Mobile Number Registered	<u>9998243185</u>	
The Mobile Number belongs to : If Family Members, then Relation	<input checked="" type="checkbox"/> Own <input type="checkbox"/> Family Members	
Family Account Adjustment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Inter Segment Adjustment	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Pledge Authorization Against Margin Requirement / Outstanding Debit with Clearing Corporation / Financial Institution	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify):	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Number of years of Investment/Trading Experience:		
Any other information:		



ADD_F



INTRODUCER DETAILS

Name of the Introducer	DHAVAL BAROT
Branch / SB / RM / Employee Code	1064
Status of the Introducer:	<input type="checkbox"/> Sub-broker <input type="checkbox"/> Remisier <input type="checkbox"/> Authorized Person <input type="checkbox"/> Existing Client <input checked="" type="checkbox"/> Employee <input type="checkbox"/> Others, please specify _____
Address and Tel No of the Introducer	A'BAD
Introducer Code	1064
Introducer's Signature	Dhaval.

OTHER DETAILS**IN CASE OF INDIVIDUAL & NON INDIVIDUAL**

Gross Annual Income details (please specify): Income Range per annum: (₹ in lacs)			
<input type="checkbox"/> Below ₹ 1 Lac	<input checked="" type="checkbox"/> ₹ 1 to ₹ 5 Lac	<input type="checkbox"/> ₹ 5 to ₹ 10 Lac	<input type="checkbox"/> ₹ 10 to ₹ 25 Lac
<input type="checkbox"/> ₹ 25 to ₹ 1 crore	<input type="checkbox"/> Above ₹ 1 crore		
OR			
Net-worth as on date	₹	(Net worth should not be older than 1 year)	
Occupation (please tick any one and give brief details):	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service
	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired
	<input checked="" type="checkbox"/> Business	<input type="checkbox"/> Student	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Others		
please tick, if applicable:	<input type="checkbox"/> Politically Exposed Person (PEP)	<input type="checkbox"/> Related to a Politically Exposed Person (PEP)	
Nature of Business :	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service	<input type="checkbox"/> Trading
	<input type="checkbox"/> Consultant	<input type="checkbox"/> Other _____	
Risk Categorization :	<input type="checkbox"/> High	<input type="checkbox"/> Medium	<input checked="" type="checkbox"/> Low
Any other information :			

DECLARATION ACCEPTANCE FOR TRADING ACCOUNT

- 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.
- I confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet, and all voluntary / non-mandatory documents.
- I further confirm having read and understood the contents of the 'Rights and Obligations' document(s), 'Risk Disclosure Document' and 'Guidance Note' with 'Policy and Procedures' Do's and Don't's 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, if any.

CHETAN BHUVIR HUF

c.g. Bhuvir
KARTA

14 First / Sole Holder



BROKERAGE TARIFF DETAILS

BROKERAGE RATES (Equity)

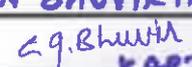
Mention on percentage or paisa very clearly	Trading / Intra-day first leg-second leg	Minimum (mention on percentage or paisa)	Delivery (Cm) / Carry forward (f&O)	Minimum (mention on percentage or paisa)	Minimum (per Options contract)
CM Segment	0.01%	0.01	0.10%	0.01	N.A.
F&O Segment	0.01%				25
Currency					25

BROKERAGE RATES (Commodity)

Mention on percentage or paisa very clearly	Trading / Intra-day first leg-second leg	Minimum (mention on percentage or paisa)
MCX	0.01%, OP: 25	
NCDEX		

Note :

- The above rates are exclusive of Stamp Duty, Exchange Transaction charges, Securities Transaction Tax, SEBI Turnover Charges and GST which will be charged extra at the rate prevailing from time to time. Further it is exclusive of any other charges /levies that may be imposed from time to time.
- The General Rates as mentioned here shall be applied unless the Special Rates as may be agreed by the Client and the same are mentioned above.
- For Internet Based Trading (IBT) clients, additional charges with regard to software access etc. will be applicable as per the terms agreed at relevant point in time.

CHETAN BHUVIR HUF

KARTA
 15 First / Sole Holder



I / We request you to open a demat account in my/our name as per the following details :

Holders Details

CDSL

Sole / First Holder's Name		CHETAN BHUVIR HUF		PAN		BGPDH0792B					
				UID							
Occupation (please tick any one and give brief details):		<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input checked="" type="checkbox"/> Business	<input type="checkbox"/> Student					
		<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Others					
Second Holder's Name				PAN							
				UID							
Occupation (please tick any one and give brief details):		<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Student					
		<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Others					
Third Holder's Name				PAN							
				UID							
Occupation (please tick any one and give brief details):		<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Student					
		<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Others					

* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

Name *				PAN								
Type of Account - Individual (please tick whichever is applicable)												
<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident	<input type="checkbox"/> Individual Director's Relative	<input type="checkbox"/> Individual Promoter	<input type="checkbox"/> Individual Margin Trading A/C (MANTRA)	<input checked="" type="checkbox"/> Individual - Director	<input checked="" type="checkbox"/> Individual HUF / AOP	<input type="checkbox"/> Minor	<input type="checkbox"/> Other (specify) _____				
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> NRI Repatriable Promoter	<input type="checkbox"/> NRI Non-Repatriable Promoter	<input type="checkbox"/> NRI - Depository Receipts	<input type="checkbox"/> Other (specify) _____						
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National - Depositor Receipts		<input type="checkbox"/> Other (specify) _____								
Type of Account - Non-Individual (please tick whichever is applicable)												
Status						Sub - Status						
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Banks	<input type="checkbox"/> Trust	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> OCB	<input type="checkbox"/> FI	To be filled by the DP						
<input type="checkbox"/> CM	<input type="checkbox"/> FI	<input type="checkbox"/> Clearing House		<input type="checkbox"/> Other (specify) _____								
SEBI Registration No. (If Applicable)				SEBI Registration Date	D	D	M	M	Y	Y	Y	Y
RBI Registration No. (If Applicable)				RBI Approval Date	D	D	M	M	Y	Y	Y	Y
Nationality	<input type="checkbox"/> Indian		<input type="checkbox"/> Others (specify) _____									

Guardian details (where sole holder is a minor):

[For account of a minor, two KYC Application Forms must be filled i.e. one for the guardian and another for the minor (to be signed by guardian)]

Guardian Name											
PAN											
Relationship of Guardian with minor											

Standing Instructions

I/We instruct the DP to receive each and every credit in my/ our account (If not marked, the default option would be 'Yes')	Automatic Credit
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Account to be operated through Power of Attorney	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No



DP_DET1_F

Account Statement Requirement	<input checked="" type="checkbox"/> As per SEBI Regulation	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID <u>CGBHUVIR @ YAHOO.COM</u>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
I / We would like to share the email ID with RTA	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
I / We would like to receive the Annual Report	<input type="checkbox"/> Physical /	<input checked="" type="checkbox"/> Electronic			
(Tick the applicable box. If not marked the default option would be in Physical)					
I / We wish to receive dividend / Interest directly into my bank account through ECS (If not marked default option would be yes) (ECS is mandatory for location notified by SEBI from time to time)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
SMS Alert Facility	First Holder - <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Second Holder - <input type="checkbox"/> Yes <input type="checkbox"/> No	Third Holder - <input type="checkbox"/> Yes <input type="checkbox"/> No		

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 checked="" type="checkbox"/> No		
I/We wish to register the following clearing member Ids under my/our below mentioned BOID registered for TRUST			
	Stock Exchange Name/ID	Clearing Member Name	Clearing Member ID (Optional)

Easi	To register for easi, please visit our website www.wealthstreet.in EASI allows a BO to view his ISIN balances, transactions and value of the portfolio online
------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Clearing Member Details (to Be Filled Up By Clearing Members Only)

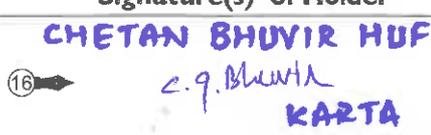
1	Name of Stock Exchange	
2	Name of Clearing Corporation/Clearing House	
3	Clearing Member ID	
4	SEBI Registration Number	
5	Trade Name	
6	CM-BP-ID (to be filled up by Participant)	

Any other information :

Please Tick, If Applicable, For Any Of Your Authorized Signatories/promoters/partners/karta/trustees/whole Time Directors:	<input type="checkbox"/> Politically Exposed Person (PEP)
	<input type="checkbox"/> Related to a Politically Exposed Person (PEP)

DECLARATION ACCEPTANCE FOR DEMAT ACCOUNT

The rules and regulations and Bye laws of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and we agree to abide by and to be bound by the rules, regulations and bye laws as are in force from time to time for such accounts, I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we 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. In case non-resident account, I/We also declare that I/We have complied and will continue to comply with FEMA regulations. I/We acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

Sole/First Holder	Name (s) of Holder(s)	Signature(s) of Holder
Sole/First Holder/ Guardian/ Authorised Signatory (in case sole holder is minor) (Mr./Mrs.)	CHETAN BHUVIR HUF	 CHETAN BHUVIR HUF KARTA
Second Holder/ Authorised Signatory (Mr./Mrs.)		
Third Holder/ Authorised Signatory (Mr./Mrs.)		



DP_DET2_B

Mode Of Operations For Sole/First Holder (in Case Of Joint Holdings, All The Holders Must Sign)

- | | |
|--------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Any one singly | <input type="checkbox"/> Jointly by |
| <input type="checkbox"/> As per resolution | <input type="checkbox"/> Others (please specify) |

Notes:

1. In case of additional signatures, separate annexures should be attached to the application form.
2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
3. For receiving Statement of Account in electronic form:
 - I. Client must ensure the confidentiality of the password of the email account.
 - II. Client must promptly inform the Participant if the email address has changed.
 - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
4. Strike off whichever is not applicable.

CHETAN BHUYAN NUR

ATGAX



DP_DET3_F

12. Mobile/Telephone no. of Guardian			
13. Email ID of Guardian			
14. Relationship of Guardian with nominee			
15. Guardian Identification details -- [Please tick any one of following and provide details of same] <input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank Account No. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID			

Place AHMEDABAD Date 12/11/2019

	FIRST / SOLE HOLDER	SECOND HOLDER	THIRD HOLDER
specimen signatures	17 → <u>CHETAN BHUVIR HUF</u> <u>c.g. Rhuwira</u> <u>KARTA</u>	/	/

Note: Atleast one witness signature (s) / Thumb impression(s) required.

DETAILS OF THE WITNESS	
Name of Witness	First Witness
Address of Witness	
Signature of Witness	→

(To be filled by the depository participant)

For **Wealthstreet Advisors Private Limited**

Nomination accepted and registered vide

Registration No. _____ dated _____

(Authorised Signatory)

* Note: Residual securities: In case of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

Notes:

- The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form.
- A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- The Nominee(s) shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
- Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents, as provided in Annexure D.
- Savings bank account details shall only be considered if the account is maintained with the same participant.
- DP ID and client ID shall be provided where demat details is required to be provided.



NOM_F

Account Opening form supplement - FATCA (Individuals)

To,,

Wealthstreet Advisors Private Limited

A-1101, Mondeal Heights, Besides Novotel Hotel,
S.G. Highway, Ahmedabad-380015.

Please Furnish The Below Information Along With Supporting Documents

Name C H E T A N G O P A L R A O B H U V I R

Country of Residence I N D I A

Country of Birth I N D I A

Please check () Yes or No to each of the following questions

1. Are you a U. S. Resident ? Yes No
2. Are you a U. S. Citizen ? Yes No
3. Do you hold a U.S. Permanent Resident Card (Green Card Holder) ? Yes No
4. If answer to any of the questions from 1 to 3 is Yes then please provide you Tax Identification Number which is your Social Security Number in Form W9 Yes No

I hereby confirm that the information provided above is true, accurate and complete.

Subject to applicable laws I hereby consent for **Wealthstreet Advisors Private Limited (WSAPL)** or any of its affiliates (including branches) (collectively **Wealthstreet Advisors Private Limited (WSAPL)**) to share my information with domestic or overseas regulators or tax authorities where necessary to establish my tax liability in my jurisdiction.

Where required by the domestic or overseas regulators or tax authorities, I consent and agree that **Wealthstreet Advisors Private Limited (WSAPL)** may withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives.

I undertake to notify **Wealthstreet Advisors Private Limited (WSAPL)** within 30 calendar Days if there is any change in information which I have provided to **WSAPL**.

Date : 12/11/2019


Signature of Client

CHEETAN BHUVIR RAO
A 1101





POWER OF ATTORNEY

I/We, (an individual/a sole proprietor/a partnership firm/an HUF/A company/a trust/a society/an Association), executed through Mr./ Ms. CHETAN BHUVIR HUF (proprietor/partners in case of partnership firm/kartain case of H.U.F./Authorized person in case of Company/Trustee(s) in the case of a trust/members of an Association), residing/having office/registered office at A-1101 MONDEAL HEIGHTS S.G. HIGHWAY AHMEDABAD-15
SENDS GREETINGS.

WHEREAS

1. I/We hold Beneficiary owner account no.(s) 12085500 _____ with Central Depository Services (India) Limited, through Wealthstreet Advisors Private Limited, a Depository Participant bearing DP-ID 12085500.
2. I/We am/are an investor(s) engaged in buying and selling of securities/ commodities vide client code/trading code no. Through Wealthstreet Advisors Private Limited, a member of National Stock Exchange of India Limited (NSE), Bombay Stock Exchange Limited (BSE) and MCX Bearing SEBI Registration No. INZ000157331 havin g office at A-1101, Mondeal Heights, Besides NOVOTEL Hotel, S.G. Highway, Ahmedabad – 380015 (Here in after called "the stock broker")
3. Due to exigency and paucity of time, I/We am/are desirous of appointing an agent/attorney to operate the afore said beneficiary account(s) on my/our behalf for a limited purpose in the manner here in after appearing:

NOW KNOW WE ALL AND THESE PRESENTS WITNESS THAT

I/We the above named in, without any restriction of my operating the above said beneficiary account, do hereby Nominate, constitute and appoint Wealthstreet Advisors Private Limited a member of NSE, BSE and MCX as my/our true and lawful attorneys (here in after referred to as the Attorneys) forme/us and on my/our behalf and in my/our name to do instruct the afore said Depository Participant to operate my above mentioned beneficial account, to do and/or cause to be done the following acts, deed and things:

1. Transfer of Securities/ Commodity held in the my/our aforesaid beneficial owner account(s) towards Recognized Stock Exchanges/ Commodity Exchanges Clearing house of the Recognized Stock Exchanges/ Commodity Exchanges related margin / delivery obligations arising out of trades executed by me/ us on the said Recognized Stock Exchanges/ Commodity Exchanges through _____.
2. Pledge the Securities/Commodity held in the my / our aforesaid beneficial owner account(s) in favour of Recognized Stock Exchanges/ Commodity Exchanges Clearing house of the Recognized Stock Exchanges/ Commodity Exchanges for the limited purpose of meeting the margin requirements in connection with the trades executed by me / us on the said Recognized Stock Exchanges/ Commodity Exchanges through Wealthstreet.
3. To apply for various products like Mutual Funds, Public Issues (shares as well as debentures), rights, offer of shares, tendering shares in open offers etc. pursuant to my instructions)
4. To send consolidated summary my scrip-wise buy and sell positions taken with average rates to the client by was of SMS / email on a daily basis, not withstanding any other document to be disseminated as specified by SEBI from time to time.
5. I/ We further agree and confirm that the powers and authorities conferred by this Power of Attorney shall continue until I/ We have given to the Depository Participant instruction in writing for revocation of the aforesaid Power of Attorney.

For the purpose of execution of the above, I authorize the Attorney to debit securities for transfer/pledge, as the case may be from my a fore said beneficial account to below mentioned beneficial account owners as well as other accounts of CM's to meet with settlement/margin obligation:



For Market Pay-In

Sr. No.	Name of Account Holder	DP ID	CLIENT ID
1	Wealthstreet Advisors Private Limited - BSE POOL A/C CDSL	12085500	00000717
2	Wealthstreet Advisors Private Limited - BSE PRINCIPAL A/C CDSL	12085500	00000721
3	Wealthstreet Advisors Private Limited - BSE POOL A/C NSDL	IN301330	22406422
4	Wealthstreet Advisors Private Limited - BSE EARLY PAYIN A/C	11000010	00024033
5	Wealthstreet Advisors Private Limited - NSE POOL A/C NSDL	IN301330	22405989
6	Wealthstreet Advisors Private Limited - NSE SLB POOL A/C	12085500	00008773
7	Wealthstreet Advisors Private Limited - NSE POOL A/C CDSL	12085500	00000736
8	Wealthstreet Advisors Private Limited - NSE EARLY PAYIN A/C	11000011	00020381
9	Wealthstreet Advisors Private Limited - CLIENT UNPAID SECURITIES A/C	12085500	00023690
10	Wealthstreet Advisors Private Limited - CLIENTS MARGIN TRADING SECURITIES A/C	12085500	00023804
11	Wealthstreet Advisors Private Limited - CLIENT COLLATERAL A/C	12085500	00023707
12	Wealthstreet Advisors Private Limited - CLIENT COLLATERAL A/C	12085500	00023819
13	Wealthstreet Advisors Private Limited - COLLATERAL A/C	12085500	00023711

IN WITNESS WHEREOF, I/We hereto have executed this Power of Attorney as of the day and year first above written.

CHETAN BHUVIR HUF

C. Bhuvir
KARTA
(First/Sole Holder Signature)

(Second Holder Signature)

(Third Holder Signature)

Signature of Witness: FW

Ravi

Name: Ravi Shah

Address: A-101 Ganesh Apt.
Nankangpur A'bad-380009

Signature of Witness: SW

Ravi

Name: Pankaj Kapadia

Address: Saraswati Bungalow
Naranpura A'bad-15

I / We accept (For Wealthstreet Advisors Private Limited)

Authorised Signatory: _____

Name: _____

Date: 12/11/2019

Place: A'bad

In case of any correction(s) in the form, sign next to the correction(s) done. & sign has to match with the original signature



DECLARATION BY HUF

Name : CHETAN BHUVIR HUF
 Address : A-1101 MONDEAL HEIGHTS S.G. HIGHWAY
AHMEDABAD - 380015
 Date : 12/11/2019

To,
Wealthstreet Advisors Private Limited

A-1101, Mondeal Heights, Besides Novotel Hotel,
 S.G. Highway, Ahmedabad-380015.

Dear Sir,

We, the undersigned members of CHETAN BHUVIR

(HUF) are desirous of opening a Trading / Demat Account in the above-mentioned name with you. The said account will be operated by CHETAN GOPALRAO BHUVIR (Karta) on behalf of CHETAN BHUVIR (HUF).

We hereby undertake that all the transactions undertaken by the said HUF shall be binding not only on the present members of the said joint family (both adults and minors) but also on all future members thereof (both adults and minors) and all persons entitled to a share therein and ourselves personally.

Also that whenever any change occurs in the management or in the constitution of the said joint family of whatsoever nature, we undertake to give notice thereof to you.

Sr. No.	Name Of Member	Designation	Relationship	Date Of Birth	Signature
1.	CHETAN G. BHUVIR	Karta	Self	28/08/1983	CHETAN BHUVIR HUF Cg Bhuvir KARTA
2.	HEMAXI C BHUVIR	Co-Parcener	Spouse	10/10/1984	H. C Bhuvir
3.	NIYATI C BHUVIR	Co-Parcener	Daughter	19/01/2012	Cg Bhuvir
4.		Co-Parcener			
5.		Co-Parcener			
6.		Co-Parcener			
7.		Co-Parcener			

CHETAN BHUVIR HUF KARTA

Thanking you,

Yours faithfully,

CHETAN BHUVIR HUF

 KARTA
 (HUF Stamp & Sign)



Voluntary Authorisation Letter

From: CHETAN BHUVIR HUF
A-1101 MONDEAL HEIGHTS
S.G. HIGHWAY A'BAD-15

Date :

Wealthstreet Advisors Pvt Ltd

A-1101, Mondeal Heights,
Besides Novotel Hotel, S.G. Highway,
Ahmedabad-380015.

Client Code: _____

DP Client Code: _____

By ticking on YES you authorize WSAPL to maintain the Trading Account as Running Account thereby adjusting any obligations and receivables.

Dear Sir,

Subject : Voluntary Authorisation letter

1. Authorization relating to retain/adjust the shares/securities/ funds and Running Account Maintenance:- Yes No

- a. You can maintain my account on a running account basis and adjust any securities and/or amounts receivable from me against any credits standing into my account or from my forthcoming payouts payable by me to Wealthstreet Advisors Pvt Ltd, where I am registered with you as a Client.
- b. I request you to keep my securities, margins and/or funds with you to meet my pay in obligations in the succeeding settlements in the same segment as well as other segments of BSE and/or NSE / MCX and/or NCDEX where I am registered with you as a Client.
- c. Further it is observed that many times the date on which payment is due to me from you and the date which I am required to make payment to you are very close and therefore exchange of cheques become unnecessary paper work. Hence, I request you to maintain the running account facility with you. I agree that you shall not be required to pay any interest/ charges/ cost in respect of funds or securities so held by you on a running account basis.

d. Further, I hereby give my consent to you to maintain my account on a RUNNING ACCOUNT basis instead of on a daily settlement-to-settlement basis. The securities lying in the pool/ beneficiary's accounts of the Wealthstreet Advisors Pvt Ltd, should be considered as margin deposits from me.

e. However my preference for compulsory periodic settlement of funds/securities as follows:

Monthly Quarterly

f. I declare that this authorisation is revocable by me at any time without giving any prior notice of such revocation to **Wealthstreet Advisors Pvt Ltd**

g. I agree that in case, I desire to take any pay outs from my trading account, I specifically shall intimate about the same and Wealthstreet Advisors Pvt Ltd, shall upon due scrutiny of my account and upon adherence to its policy/procedure, shall release eligible amount to me.

h. I further agree that this authorisation shall have an equal binding effect to the successors, executors and assigns of **Wealthstreet Advisors Pvt Ltd**.

i. I hereby authorise you to transfer/adjust all the additional funds/securities lying in my ledger account after meeting my obligations/dues, to the collateral account to avail exposure or keep all funds/securities in your margin account with you to meet my margin obligations or keep the same with any exchange and/or with clearing member in the form of fixed deposit or any other form to avail exposure/meet margin requirements. I understand that there would not be any interest/commission payable to me in the event of above arrangement. This arrangement would be without any consideration or the fund/securities so moved will not bear any interest/commission payable to me/is in the event of above arrangement..

2. Authorization for receiving ECN's and any documents/communications in electronic form by E-mail from Stock Broker and Depository

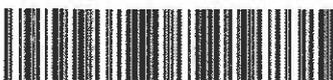
Participant display on Website:- Yes No

I am registered as a Client and having the captioned trading account with WSAPL & Depository account with WSAPL and hereby authorize WSAPL for the following:

By ticking on YES you authorize WSAPL to send all important

E-mail ID: CGBHUVIR@YAHOO.COM

CHETAN BHUVIR HUF
c.g. Bhuvir
KARTA
22 First / Sole Holder



VOL_AUT_LTR_F

To be continued on next page

continued from previous page.

- a) I/we authorize WSAPL to issue me/us electronic contract notes (ECN's), bills, trade confirmations, ledgers, daily margin statements, statement of accounts for periodical settlement of funds and securities, any notices, circulars, amendments and such other correspondence or communication related to my/our trading account (hereinafter referred to as "Documents") and wherever required duly authenticated by means of a digital signature as specified in the information technology Act, 2000 and the rules made there under to the E-mail ID as mentioned hereunder:
- b) I/We understand that the documents received on e-mail/displayed on website are for my/our convenience. I/we will take all the necessary steps to ensure confidentiality and secrecy of the login name & password of the internet/email account.
- c) I/We is/are aware that the documents as may be accessed by other entities in case the confidentiality/ secrecy of the login name and password is compromised.
- d) I/We shall verify the authenticity of the e-mails which I/we shall receive. WSAPL shall not be responsible, if I/we do not receive the documents due to incorrect email ID and/or technical reasons.
- e) I authorize WSAPL to issue me bills, ledgers, monthly/quarterly/yearly demat transaction cum holding statements, any notices, circulars, amendments and such other correspondence or communication related to my demat account (hereinafter referred to as "Documents") and wherever required duly authenticated by means of a digital signature as specified in the information technology Act, 2000 .
- f) I understand that wherever the e-mails have not been delivered to me or has been rejected (bouncing of mails) from the e-mail ID of mine, WSAPL would send physical document to me. I further hereby agree that WSAPL have fulfilled the legal obligation, if the above documents are sent electronically to the above-mentioned e-mail ID. I agree that WSAPL will not be responsible for non receipt of documents sent via electronic delivery due to change in email address or for any other reason which inter alia include my email/inbox running out of capacity, malfunction of my computer system/server/internet connection, mails received by frauds/imposters etc. I also agree that WSAPL shall not take cognizance of out-of office/ out-of station auto replies and I shall be deemed to have received such electronic mails.
- g) I shall inform WSAPL in writing if there is any change in my registered e-mail ID. CGBHUVIR@YAHOO.COM

3) Authorisation for debiting various depository charges:- Yes No

By ticking on YES you authorize WSAPL to deduct all DP charges from your account.

- a) I hereby give my consent/authority to debit/recover all types of depository charges viz annual maintenance charges, inter settlement charges, any type of transaction charges as is levied on me for the transactions carried out in my demat account including any statutory levies, services tax or any other tax/charges/fees in/from my trading ledger having the captioned client code as maintained with WSAPL. I understand and agree that such depository charges will be debited in my trading ledger maintained with WSAPL irrespective of the ledger balance on periodically and/or as per the details provided by WSAPL.
- b) I instruct WSAPL to provide the requisite information periodically and/or on occasion basis of such charges levied on me to WSAPL with whom I have opened the trading account
- c) I understand and consent that WSAPL shall have the right to recover the depository charges like any other trade dues payable by me from my trading ledger. I hereby further authorize WSAPL to set off a part or whole of the collateral/ledger balances/securities in my demat account i.e. by way of appropriation of the relevant amount of cash or by way of sell or transfer or liquidation/close out positions of all or some of the securities placed as collateral or lying in my demat account as stated above for the purpose of clearing any outstanding amount related to the aforesaid demat account maintained with WSAPL. Any and all losses and financial charges on account of such liquidation/close-out shall be borne by me.

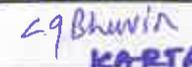
By ticking on YES you express your approval and interest in receiving information on various other financial products/services that WSAPL has to offer. You also allow WSAPL to share your preferences with other allied businesses.

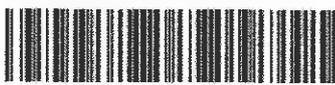
RUN KIVUNG MATANG

AT 055

E-mail ID: CGBHUVIR@YAHOO.COM

CHETAN BHUVIR HUF


23 First / Sole Holder



VOL_AUT_LTR_B

To be continued on next page

4) Sharing of Data & Information:-

- a) I have opened a trading account with WSAPL having the captioned client code and demat account with WSAPL-DP having the captioned client code and am interested in knowing about various financial products /facilities offered by your associate/group companies. I am aware that associate/group companies are required to obtain information about me and my transactions for providing various financial products/facilities.
- b) I authorize you, your group companies and associates to keep me informed with any financial product which Wealthstreet, its group companies and associates presently issue, deal in, or distribute or may, from time to time, launch, issue, deal in or distribute through e-mail, SMS, telephone, print media or otherwise as may be allowed
- c) I hereby voluntarily accept and expressly authorize WSAPL to get the information from WSAPL-DP or from any other Depository Participant of its group/associate companies with whom I have the Demat account and share/discard or use in any manner, the information/documents/data about me and our transactions, with group of associates companies which is offering the products / facilities.

- Information provided by me in the Trading and Demat Account Opening Kit.
- My holdings in stocks/securities.
- Ledger balances in my Trading/Demat Account across all Exchanges/Depositories.
- Transaction cum holding statement with WSAPL-DP
- Any other related information

d). To the extent appropriate for our relationship with you, personal information may be shared for the following purposes :-

- I. to comply with applicable laws, rules and regulations, including anti-terrorism, KYC, anti-money laundering and tax reporting rules and regulations
- II. to comply with legal process, to respond to requests from public, regulatory or government authorities (including authorities outside your country of residency), and to allow us to pursue remedies and limit damage
- III. to any of our associate / affiliate / group entities including our service providers performing delegated outsourced function to enable them to perform internal business processes (which facilitate transactions) such as risk management purposes, data analysis, audits, developing and improving new products and services, etc
- IV. to any of our associate / affiliate / group entities to enable them to provide you with appropriate products and services

e) I have no objection to WSAPL sharing the above information or any such other information, about me/us with its group/associate companies or affiliates. This is without legal obligation on you, your group companies and associates to so inform and you or they may, in their discretion, discontinue sending such information.

5 I understand that in respect of derivative market transaction, apart from margin liability as on the date of settlement, trading member may retain additional margins (maximum up to 125% of margin requirement on the day of settlement) to take care of any margin obligation arising in next days.

6 I / we do hereby authorize WSAPL to utilize / adjust my / our financial ledger credits towards my investments in Mutual Fund units, debentures, other form of securities, Initial Public Offers (IPOs), FPOs, Fixed Deposits, NCDs, bonds, New Fund Offers etc under my instruction either oral / written.

7 I/We hereby agree that WSAPL can retain the amount of Rs. 10000 across all segment subject to the condition that I have traded during the last Quarter" I / we further state that this authorization is given by me / us purely out of our choice of convenience. I / we shall not make any claim whatsoever upon WSAPL for WSAPL standing guided by this authorization in favor of maintaining my / our account on running account basis.

Name: CHETAN BHUVIR HUF

Place: RAJAHMUNDRAM AHMEDABAD

	<u>CHETAN BHUVIR HUF</u> <u>e.g. bhuvir</u> <u>KARTA</u>
24	First / Sole Holder



DATA_INFO_F

MUTUAL FUND CONFIRMATION

Date: 12/11/2019

To,
WealthStreet Advisors Private Limited
Regd. office : A-1101, Mondeal Heights, Besides Novotel Hotel,
S.G. Highway, Ahmedabad-380015.

Dear Sir,

Subject: BSE Star MF/MFSS

I/We CHETAN BHUVIR HUF am/are registered as your client with
Client Code No. and have entered into relationship with the Trading Member for the purpose
of trading in the Capital Market Segment of Bombay Stock Exchange Ltd. (Exchange) and National Stock Exchange
Ltd. (Exchange).

I/We am/are interested in availing the trading facility of the Exchange for the purpose of dealing in the units of Mutual
Funds Schemes permitted to be dealt with on the BSE STAR MF and MFSS on the Exchange.

I/We am/are provides my consent for mutual fund trading against collateral lying my account. Also, aware that in
event of non clearance of debit in my/our trading accounts; there is risk of stock collateral or MF collateral getting
liquidated to extent of my/our ledger debit for recovery of trading debit.

For the purpose of availing the BSE STAR MF & MFSS. I/We state that Know Your Client details as submitted by me/
us for the stock broking may be considered for the purpose of BSE STAR MF & MFSS and I/We further confirm that
the details contained in same remain unchanged as on date.

I/We am/are willing to abide by the terms and conditions as mention in the circular dated December 2, 2009 and such
other Notices/Circulars as may be specified by the Exchange/ICCI from time to time in this regards, for BSE STAR
MF and Terms & Conditions mentioned in circular No. NSE/MFSS/003/2001 download Ref. No. NSE (MIC/13533)
dated November 24, 2009.

I/We shall ensure also compliance with the requirements as may be specified from time to time by Securities and
Exchange Board of India and Association of Mutual Funds of India (AMFI)

I/We shall read and understand the contents of the Scheme Information Document and Key Information Memorandum,
addenda issued regarding each Mutual Fund Schemes with respect to which I/We choose to subscribe/redeem. I/We
further agree to abide by the terms and conditions, rules and regulations of the Mutual Fund Schemes.

I/We therefore request you to register me/us as your client for participating in BSE STAR MF and MFSS.

Thanking you,

Yours faithfully,

Handwritten signature and stamp area.

CHETAN BHUVIR HUF

Handwritten signature: ch bhuvir

KARTA



Client Name CHETAN BHUVIR HUF

Demat A/c No.

1st Holder

2nd Holder

3rd Holder

Date :

Place:



MUT_FUND_B

Electronic Contract Note [ECN] DECLARATION (VOLUNTARY)

Appendix A

To,
WEALTHSTREET ADVISORS PVT. LTD.

Dear Sir,
I, CHETAN BHUVIR HUF a client with Member
M/s. WEALTHSTREET ADVISORS PVT. LTD. of COMMODITY

Exchange undertake as follows:

- I am aware that the Member has to provide physical contract note in respect of all the trades placed by me unless I myself want the same in the electronic form.
- I am aware that the Member has to provide electronic contract note for my convenience on my request only.
- Though the Member is required to deliver physical contract note, I find that it is inconvenient for me to receive physical contract notes. Therefore, I am voluntarily requesting for delivery of electronic contract note pertaining to all the trades carried out / ordered by me.
- I have access to a computer and am a regular internet user, having sufficient knowledge of handling the email operations.
- My email id is CGBHUVIR@YAHOO.COM. This has been created by me and not by someone else.
- I am aware that this declaration form should be in English or in any other Indian language known to me.

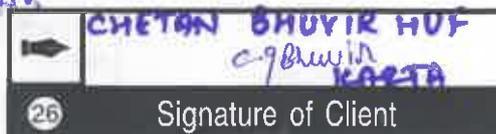
[The above declaration has been read and understood by me. I am aware of the risk involved in dispensing with the physical contract note, and do hereby take full responsibility for the same]

(The above lines must be reproduced in own handwriting of the client.)

Client Name: CHETAN BHUVIR HUF
Unique Client Code : _____
PAN: BGPDH0792B

Address : A-1101 MONDEAL HEIGHTS S.G. HIGHWAY A'BAD-15

Signature of the client



Date: 12/11/2019

Place: AHMEDABAD

Verification of the client signature done by,
Name of the designated officer of the Member
Signature

Date :



Instructions:

- This declaration form has to be sent by the Member to the client on the email id provided by client while opening the trading account.
- The client shall, on receipt of this email, print the email as well as the declaration form.
- The hard copy of the declaration shall be filled up by the client and submitted to the Member along with a signed hard copy of the email. The Member shall acknowledge the receipt of the declaration from the client.
- The size of the font of this declaration must be at least 12.

To,

WealthStreet Advisors Private Limited

Regd. office : A-1101, Mondeal Heights, Besides Novotel Hotel,
S.G. Highway, Ahmedabad-380015.

Dear Sir,

Sub : My / Our request for trading in commodity forward contracts / commodity derivatives on one or more exchanges as your client

I/We, the undersigned, have taken cognizance of circulars issued by different commodity exchanges in pursuance of directions received from SEBI from time to time regarding calculation of net open positions permitted in any commodity and I/we hereby undertake to comply with the same.

I/We hereby declare and undertake that we will not exceed the position limits prescribed from time to time by different exchanges or SEBI or Forward Markets Commission and such position limits will be calculated in accordance with the circulars of respecting exchanges as modified from time to time.

I/We undertake to inform you and keep you informed if I/any of our partners/ directors/ karta/ trustee or any of the partnership firms/ companies/ HUFs/ Trusts in which I or any of above such person is a partner/ director/ karta/trustee, takes or holds any position in any commodity forward contract/ commodity derivative on different exchanges through you or through any other member(s) of different exchanges, to enable you to restrict our position limit as prescribed by the above referred circular of different exchanges as modified from time to time.

I/We confirm that you have agreed to enter orders in commodity forward contracts/ commodity derivatives for me/us as your clients on different exchanges only on the basis of our above assurances and undertaking.

Yours faithfully,

Signature of the client

(Sole Proprietor / Partner / Director / Karta / Trustee)

CHETAN BHUVIR HUF
Cg Bhuvir
KARTA
27
Signature of Client

Date : 12/11/2019

Place: AHMEDABAD



COM_CON_F

CLIENT MASTER - FOR USE BY WSAPL

STRICTLY BRANCH REFERENCE

Place AHMEDABAD Date 12/11/2019

Authorised Person / Business Associate sharing arrangement details and Sub-brokers (name & code)	
Signature	

BROKERAGE DETAILS - REFER PAGE NO. 8

STRICTLY HO REFERENCE

Initial entries

CALL VERIFICATION	INWARD PARTICULARS	DOCUMENT VERIFICATION
Date _____	Date _____	Date _____
Time _____	Time _____	Time _____
Sign _____	Sign _____	Sign _____

DATA ENTRY PARTICULARS	ACCOUNT ACTIVATION	BACK OFFICE MASTERS
Date _____	Code Allotted (all segments) _____	Date _____
Time _____	Date _____	Updated by _____
Sign _____	Sign _____	Sign _____

Remarks _____

PROCEDURE CHECK LIST

<input type="checkbox"/> Call verification of Client	<input type="checkbox"/> Mail sent to Client	<input type="checkbox"/> SMS sent to Client	<input type="checkbox"/> Welcome kit dispatch
------------------------------------------------------	----------------------------------------------	---------------------------------------------	-----------------------------------------------

Signature of Back-office Incharge / Compliance Official _____

Intimation from Branch by		Receipt mode
Document received		
Signature of Back-office Incharge		Date _____
Audited by	Original	Rejected pursuant
Audit date		



CHK_LIST_B



Wealthstreet

The Financial Engineers

Wealthstreet Advisors Private Limited

Regd. Office

A-1101, Mondeal Heights, Besides Novotel Hotel,
S.G. Highway, Ahmedabad-380015.



Wealthstreet Advisors Pvt Ltd (CIN No : U74999GJ2016PTC094432)
 Corp. Office : A-1101, Mondeal Heights, Besides Novotel Hotel, S.G. Highway,
 Ahmedabad-380015.
 Contact No.: Phone : 079-66775500 E-mail : helpdesk@wealthstreet.in

FATCA-CRS Declaration & Supplementary KYC Information
Self Declaration Form for Entities / Non-Individuals [for DP & Trading]

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

TRADING CODE

DPID

1 2 0 8 5 5 0 0

NAME

CHETAN BHUVIR HUF

PAN*

B G P D H 0 7 9 2 B

Address Type
(For KYC Address)

Residential Residential / Business
 Business Registered Office

Place of
Incorporation

AHMEDABAD

Country of
Incorporation

INDIA

Gross Annual
Income Details
in INR

Below 1 Lakh 1-5 Lacs
 5-10 Lacs 10-25 Lacs
 25 Lacs - 1 Cr > 1 Crore

Net Worth in
INR. In Lacs

Net Worth As of

/ /20

Is the entity
involved in /
providing any of
the following
services:

Foreign Exchange / Money
Changer Services
 Gaming / Gambling / Lottery
Services [e.g. casinos, betting
syndicates] Money Laundering
/ Pawning

Any other
information
(if applicable)

Is your [Entity] Country of Tax Residency other than India - Yes No

If "Yes", please specify the details of all countries where you [Entity] hold tax residency and its Tax Identification Number & type hereunder:

SR No	Country of Tax Residency#	Tax Payer Identification Number /Functional Equivalent / Company Identification Number or Global Entity Identification Number	Identification Type (TIN or other, please specify)
1			
2			

In case the Entity's Country of Incorporation / Tax Residence is US but Entity is not a Specified US person, mention Entity's exemption code here _____ (Refer Instructions P)

Declaration:

Entity Constitution Type (Pvt.Co./Public Co./LLP/Partnership/ HUF/AOP/BOI/Proprietorship/Trust/ Others	HUF
Entity Identification Type (tick as applicable)	<input type="checkbox"/> Company Identification Number <input type="checkbox"/> Trust Registration Number <input type="checkbox"/> TIN/ Tax deduction Account Number <input type="checkbox"/> US GIIN <input type="checkbox"/> Global Entity Identification Number (GEIN) <input checked="" type="checkbox"/> Other
Entity Identification No.	BGPDH0792B
Entity Identification issuing country	INDIA
Country of Residence for tax purpose	INDIA

Controlling Person Declaration:

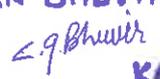
Name of Controlling person	Correspondence Address	Country of residence for tax purpose	TIN (if any)	TIN issuing Country	Controlling person type

Details	For Controlling person 1	For Controlling person 2	For Controlling person 3	For Controlling person 4	For Controlling person 5
Document submitted for Identification : Passport/Election Card/PAN card/Govt. ID Card / Others					
Identification Number					

Declaration:

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may liable for it. I/We hereby authorize you to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me/us, including all changes, updates to such information as and when provided by me/us to any of the Exchanges/Depositories/Mutual Fund, its sponsor, Asset Mgmt. Co., trustees, their employees / RTAs.(‘the Authorized Parties’) or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries /or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your / Fund’s end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same. I /We understand that you do not offer any tax advice on CRS/FATCA or its impact on me/us. I/We shall seek advice from Professional Tax Advisor for any tax questions.

Signature with relevant seal:

CHE TAN BHUVIR HUF

 X _____ KARTA

X _____

X _____

DATE : 12/11/2019

PLACE : AHMEDABAD

Instructions for FATCA & CRS Declaration

- A. Financial Institution / Foreign Financial Institution (FFI)** – Means any non-US financial institutions that is a – (1) Depository institution – accepts deposits in the ordinary course of banking or similar business; (2) Custodian institution - as a substantial portion of its business, hold financial assets for the accounts of others; (3) Investment entity – conducts a business or operates for or on behalf of a customer for any of the activities like trading in money market instruments, foreign exchange, foreign currency, etc. or individual or collective portfolio management or investing, administering or managing funds, money or financial assets on behalf of other persons; or an entity managed by this type of entity; or (4) Insurance company – entity issuing insurance products i.e. life insurance; (5) Holding or Treasury company – entity that is part of an expanded affiliate group that includes a depository, custodian, specified insurance company or investment entity

B. "Non-Reporting Financial Institution"

Sr. No.	Category
1	Governmental Entity, International Organization or Central Bank, other than with respect to a payment that is on an obligation held in connection with a commercial financial activity of a type in by reporting financial institution
2	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental entity; International Organization or Central Bank
3	A non-public fund of the armed forces, Employees' State Insurance Fund, a gratuity fund or a provident fund
4	An Indian investment entity held only by (1) to (3) above
5	A qualified Credit Card Issuer
6	Specified Investment advisor or investment manager or executing broker
7	Specified Exempt collective investment vehicle
8	A financial institution with a local client base
9	A local bank*
10	A financial institution with only low value accounts
11	Sponsored investment entity and controlled foreign corporation
12	Trustee documented trust
13	Sponsored closely held investment vehicle, incase of any U.S. Reportable Account

*Regional Rural Banks constituted under the Regional Rural Bank Act 1976 (21 of 1976), Urban Cooperative Banks constituted under respective State Cooperative Societies Act or Multi State Cooperative Societies Act, State Cooperative Banks or District Central Cooperative Banks constituted under respective State Cooperative Societies Act and Local Area Banks licensed under the Banking Regulations Act, 1949 (10 of 1949) and regulated and registered as public limited companies under the Companies Act, 1956 (1 of 1956) or Companies Act, 2013 (18 of 2013), that satisfy the requirement under sub-clause (iv) shall be treated as local bank for the purpose of this clause.

C. Active NFFE – Any one of the following –

Code	Sub-Category
1	Less than 50% of the NFE's gross income for the preceding calendar year or other appropriate reporting period is passive income and < 50% of the assets held by NFE are assets that produce or are held for the production of passive income
2	The NFE is a Governmental Entity, an International Organization, a Central Bank , or an entity wholly owned by one or more of the foregoing;
3	Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for NFE status if the entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes;
4	The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;

5	The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution
6	The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;
7	<p>Any NFE is a 'non for profit' organization which meets all of the following requirements:</p> <ul style="list-style-type: none"> <input type="checkbox"/> It is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organization, business league, chamber of commerce, labour organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare; <input type="checkbox"/> It is exempt from income tax in India; <input type="checkbox"/> It has no shareholders or members who have a proprietary or beneficial interest in its income or assets; <input type="checkbox"/> The applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and <input type="checkbox"/> The applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision thereof.

D. Passive NFE - means any NFE that is not (i) an Active NFFE or listed / publicly traded entity or entity related to the listed / publicly traded entity, or (ii) a withholding foreign partnership or withholding foreign trust pursuant to relevant U.S. Treasury Regulations or (iii) the gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity - (Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)

E. Direct Reporting NFFE – a NFFE that elects to report information about its direct or indirect substantial U.S. owners to the IRS

F. GIIN not required category

Code	Sub-Category
01	Governmental Entity, International Organization or Central Bank
02	Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or CtlBk
03	Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund
04	Entity is an Indian FI solely because it is an investment entity
05	Qualified credit card issuer
06	Investment Advisors and Investment Managers
07	Exempt collective investment vehicle
08	Trustee of an Indian Trust
09	FI with a local client base
10	Non-registering local banks
11	FFI with only Low-Value Accounts
12	Sponsored investment entity and controlled foreign corporation
13	Sponsored, Closely Held Investment Vehicle
14	Owner Documented FFI

- G. Listed Company** - A company is publicly traded if its stock are regularly traded on one or more established securities markets (Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)
- H. Related Entity** - an entity is a "Related Entity" of another entity if one controls the other, or the two entities are under common control (where control means direct or indirect ownership of more than 50% of the vote or value in an entity)
- I. Non-financial foreign entity [NFFE]** - Non-US entity that is not a financial institution [including a territory NFFE]. Following NFFEs are excluded from FATCA reporting – (a) Publicly traded corporation / listed companies; (b) Related Entity of a listed company; and (c) Active NFFE
- J. Passive Income** - portion of gross income that consists of dividends, interest, rents and royalties (other than rents and royalties derived in the active conduct of a trade or business conducted, at least in part, by employees of the NFFE), income equivalent to interest / amount received from pool of insurance contracts, annuities, excess of gains over losses from the sale or exchange of property / from transactions (including futures, forwards or similar transactions) in any commodities but not including (i) any commodity hedging transaction, determined by treating the entity as a controlled foreign corporation or (ii) active business gains or losses from the sale of commodities but only if substantially all the foreign entity's commodities are property, excess of foreign currency gains over losses, net income from notional principal contracts, amounts received under cash value insurance contracts, amounts earned by insurance company in connection with its reserves for insurance and annuity contracts
- K. Controlling Persons** - means the natural persons who exercise control over an entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust, and in the case of a legal arrangement other than a trust, such term means persons in equivalent or similar positions. The term "Controlling Persons" shall be interpreted in a manner consistent with the Financial Action Task Force Recommendations.
- L. Non-Participating FFIs [NPFIs]** - an FFI other than participating FFI, a deemed-compliant FFI, or an exempt beneficial owner
- M. Specified US Persons** - Any US Person other than i). A publicly traded corporation; ii). A corporation that is a member of the same expanded affiliate group; iii). A tax exempt organization; iv). an individual retirement plan; v). the United States or an agency or instrumentality of the United States; vi). Any state [including District of Columbia and United States possession] or State Authorities; vii). A bank, viii). A real estate investment trust; ix). A regulated investment company; x). an entity registered with the SEC under the Investment Company Act of 1940; xi). A common trust fund; xii). A tax exempt trust; xiii). A registered dealer; xiv). A registered broker
- N. Expanded affiliated group** - One or more chains of members connected through ownership (50% or more, by vote or value) by a common parent entity if the common parent entity owns stock or other equity interests meeting the requirements in atleast one of the other members
- O. Owner documented FFI** - AN FFI meeting the following requirements – (a) FFI is an FFI solely because it is an investment entity; (b) FFI is not owned by or related to any FFI that is a depository institution, custodial institution, or specified insurance company; (c) FFI does not maintain a financial account for any non-participating FFI; (d) FFI provides the designated withholding agent with all of the documentation and agrees to notify the withholding agent if there is a change in the circumstances, and (e) The designated withholding agent agrees to report to the IRS (or, in case of a reporting Model 1 IGA, to the relevant foreign government or agency thereof) all of the information described in or (as appropriate) with respect to any US specified persons and (2) Notwithstanding the previous sentence, the designated withholding agent is not required to report information with respect to an indirect owner of the FFI that holds its interest through a participating FFI, a deemed-compliant FFI (other than an owner-documented FFI), an entity that is a US person, an exempt beneficial owner, or an exempted NFE

P. Exemption Code for US persons

Code	Sub-category
A	An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
B	The United States or any of its agencies or instrumentalities
C	A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities
D	A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)
E	A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i)
F	A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
G	A real estate investment trust
H	A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
I	A common trust fund as defined in section 584(a)
J	A bank as defined in section 581
K	A broker
L	A trust exempt from tax under section 664 or described in section 4947(a)(1)
M	A tax exempt trust under a section 403(b) plan or section 457(g) plan
N	Not Applicable