

INDEX**MANDATORY DOCUMENTS AS PRESCRIBED BY FMC & EXCHANGES**

S.NO.	NAME OF THE DOCUMENT	BRIEF SIGNIFICANCE OF THE DOCUMENT	PG. NO.
1	KNOW YOUR CLIENT (KYC) APPLICATION FORM	KYC form - Document captures the basic information about the constituent	A-3
		Document captures the additional information about the constituent relevant to trading account	A-6
2	INSTRUCTION / CHECKLIST	Document captures the instruction/checklist for filling KYC Form	A-11
3	UNIFORM RISK DISCLOSURE DOCUMENT (RDD)	Document detailing risks associated with dealing in the commodities market.	A-13
4	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).	A-16
5	DO'S AND DON'TS FOR THE INVESTORS	Document detailing do's and don'ts for trading on exchange, for the education of the investors.	A-21
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To,
ACHIEVERS COMMERCIAL PRIVATE LTD
32/A, Diamond Harbour Road, Sakherbazar, Kolkata - 700008

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D D M M Y Y Y Y

Dear Sir / Madam,

I/We would request you to register me/us as your Client.


I/We would request you to update my KYC informations.

In this regard I/we furnished herewith the required details & documents.


SIGNATURE OF THE CLIENT

PLEASE FILL THIS FORM IN ENGLISH IN BLOCK LETTER AND IN BLACK INK ONLY

A. IDENTITY DETAILS

Name of the Applicant		AMIT SARKAR				
Father's / Spouse Name		AVIJIT SARKAR				
Gender	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married		Date of Birth	06/07/1980
Nationality	INDIAN	Status	<input checked="" type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National		Amit Sarkar	

(If Non Resident/Foreign National, self-certified copy of statutory approval obtained must be attached)

PAN	ADCPS4142C	UID / Aadhaar, if any	
Any other additional proof of Identity			

B. ADDRESS DETAILS

(Proof of address must be different from the proof of identity submitted).

Address for Correspondence				32/A DIAMOND HARBOUR ROAD, SAKHER BAZAR KOLKATA-700008			
City / District / Village		PIN		State		Country	
SAKHER BAZAR		700008		WEST BENGAL		INDIA	
Tel. (Office)		Tel. (Resi.)		Mobile			
				9830000009			
Fax		E-mail					
		amitsarkar@gmail.com					
Specify the proof of address submitted for correspondence address							
Permanent Address (if different from above)							
SAME AS ABOVE							
City / District / Village		PIN		State		Country	
Tel. (Office)		Tel. (Resi.)		Mobile			
Fax		E-mail					
Specify the proof of address submitted for permanent address, if any							

C. OTHER DETAILS

Gross Annual Income Details (please specify) : Income Range per annum:

0-1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs

or NET-WORTH as on (date) ___/___/___ (Rs.) _____ (Net worth should not be older than 1 year)

Occupation (please tick any one and give brief details): Private Sector Public Sector Govt. Service Business

Professional Farmer Others (specify).....

Please tick, if applicable

Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

Not a Politically Exposed Person (PEP) Not Related to a Politically Exposed Person (PEP)

Amit Sarkar
SIGNATURE OF CLIENT

DISCLOSURE INFORMATION OF PROPRIETARY TRADING

To increase transparency in the dealings between us as a Trading Member and you as a Client we do hereby disclose that we are not engaged in Proprietary Based Trading (self account) in ANY SEGMENTS of ANY EXCHANGES in which we are members. You are requested to please take a note of the same.

PART II - TRADING ACCOUNT RELATED DETAILS

FOR INDIVIDUALS & NON-INDIVIDUALS

BANK ACCOUNT(S) DETAILS

	First Account (Default)	Second Account	Third Account
Bank Name	AXIS BANK LTD		
Branch Name	B.B.D BAG		
Branch Address	64A, HEMANTA BASU SARANI, KOLKATA - 01		
Bank Account No.	911020059416426		
Account Type <i>Saving/Current / Others - In case of NRI/NRE/NRO</i>	SAVING		
MICR Number	560220001		
IFSC Code	UTIB0001138		

Note: Provide a copy of cancelled cheque leaf/ pass book/ bank statement specifying name of the client, MICR Code or/and IFSC Code of the bank

DEPOSITORY ACCOUNT(S) DETAILS, IF AVAILABLE

DP Name			
Depository Name NSDL / CDSL			
DP ID			
Beneficiary ID (BO ID)			
Beneficiary Name 1			
Beneficiary Name 2			
Beneficiary Name 3			

Note: Provide a copy of either Demat Master or a recent holding statement issued by DP bearing name of the client.

