

Client Signature

Tariff sheet for Trading Account Modification Request

Br. / Sb. Name: _ Br. / Sb. Code: _	de:						Date://		
To, The KYC Depart Kunvarji Finstoci Block B, First Flo Off S.G. Highwa	c Pvt. I oor, Sic	l d hivina	*		015.				
Client Name:									
Client Id: Trading	g Acco	unt Num	nber						
I / We here by rea	quest y	ou to up	date the foll	lowing in	your records.				
Tariff sheet for	rading	g accour	nt – Old.						
Facility	1st Leg		2nd Leg		Currency	1st Leg		2nd Leg	
Equity %	age	Min.	%age	Min.	Currency	%age		6age	Min.
Trading					Futures				
Delivery					Options				
Derivatives									
Option									
Tariff sheet for	trading	accour	nt – New.						
Equity	1st L	eg	2nd		Commodity	1st	21	nd Leg	
Equity			Leg	Min.	Commodity	Leg			Min
	1st L		Leg	Min.				nd Leg %age	Min.
Equity Trading Delivery			Leg	Min.	Futures	Leg			Min.
Trading			Leg	Min.		Leg			Min.
Trading Delivery			Leg	Min.	Futures Options	Leg %age	Min. 9	%age	
Trading Delivery Equity Futures	%age		Leg	Min.	Futures Options SLBM	Leg %age	Min. 9		
Trading Delivery Equity Futures Equity Option	%age		Leg	Min.	Futures Options	Leg %age	Min. 9	%age 2nd Leg	

- 1 The tariff sheet modification form is required to be completed with respect to currently applicable brokerage in all segments in which client is trading as well as the proposed changes. In case brokerage rate in some segment is not to be modified, kindly mention the currently applicable rate.
- 2 The tariff sheet modification form should be submitted along with a copy of the PAN card of the client which must be self attested by the client.
- 3 The change requested by the client is subject to approval and will become effective from the date of such approval.
- 4 The client may retain a copy of the same for his records

FOR OFFICE USE ONLY
Date of receipt
Received by
Approved by
Modification updated in system on