

(Please fill this application in English block letters using black ink)

7. REMARKS (if any)

[illegible]

8. APPLICANT DECLARATION

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[illegible]

9. BRANCH DECLARATION

Documents Received ☐ Certified Copies ☐ Original Verified and Self-attested Document Copies Received

IPV AND KYC VERIFICATION CARRIED OUT BY										INSTITUTION DETAILS																	
Date	D	D	M	M	Y	Y	Y	Y		Name																	
Emp Name										Code																	
Emp Code																											
Emp Designation																											
Emp Branch																											
[Employee Signature]										[Institution Stamp]																	

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

Important Instructions:

- A) Fields marked with ‘*’ are mandatory fields.
B) Please fill the form in English and in BLOCK letters.
C) Please fill the date in DD-MM-YYYY format.
D) Please read section wise detailed guidelines / instructions at the end.

General Instructions:

1. Fields marked with ‘*’ are mandatory fields.
2. Tick (✓) wherever applicable.
3. Self-certification of documents is mandatory.
4. Please fill the form in English and in BLOCK letters.
5. Please fill all dates in DD-MM-YYYY format.
6. Wherever state code and country code are to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively.
7. KYC number of applicant is mandatory for updation of KYC details.
8. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
9. In case of ‘Small Account Type’, only personal details at section number 1 and 2, photograph, signature and self-certification is required.

A. Clarification / Guidelines on filling 'Personal Details' section

1. Name: Please state name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name throughout the account opening form should be exactly as per PAN / ITD Database, failing which the application is liable to be rejected.
2. Either father's name or spouse's name is to be mandatorily furnished.
3. Provide Date of Birth (DoB) as per PAN / ITD Database.

B. Clarification/ Guidelines on filling details if applicant's resident for tax purposes in jurisdiction(s) is outside India

1. Tax Identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a 'functional equivalent'), the same may be reported. Example of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number.

C. Clarification / Guidelines on filling 'Proof of Identity [PoI]' section

1. If driving license number or passport is provided as proof of identity, then expiry date is to be mandatorily furnished.
2. Mention identification / reference number if 'Z-Others (doc. notified by cent. govt.)' is ticked.
3. In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S)

Document Code Description

1. Identity card with applicant's photograph issued by Central / State Government Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
2. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address [PoA] – Current / Permanent / Overseas Address Details' section

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
2. State / U.T. Code and Pin / Post Code will not be mandatory for overseas address.
3. In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1

Document Code Description

1. Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
2. Property or Municipal Tax receipt.
3. Bank account or Post Office savings bank account statement.
4. Pension or family pension payment orders (PPOs) issued to retired employees by Government departments or Public Sector Undertakings, if they contain the address.
5. Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertaking, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
6. Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E. Clarification / Guidelines on filling 'Proof of Address [PoA] – Correspondence / Local Address Details' section

1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / local address, please fill 'Annexure A1'.

F. Clarification / Guidelines on filling 'Contact Details' section

1. Please mention two-digit country code and 10-digit mobile number (e.g. for Indian mobile number mention 91 9999999999).
2. Do not add '0' in the beginning of mobile number.

G. Clarification / Guidelines on filling 'Related Person Details' section

1. Provide KYC number of related person if available

H. Clarification / Guidelines on filling 'Related Person Details – Proof of Identity [PoI]' of Related Person' section

1. Mention identification / reference number if Z-Others (doc. notified by cent. govt.) is ticked.



Application Type ☐ New ☐ Update

KYC Number

[illegible]

Annexure A1

Correspondence / Local Address

Please read the instructions before filling the form

☐ 1. CORRESPONDENCE / LOCAL ADDRESS DETAILS (Please see instruction E at the end)

☐ Same as Current / Permanent / Overseas Address Details[illegible]

☐ **2. CONTACT DETAILS** (All communications will be sent on provided mobile no./email ID) (Please refer instruction F at the end)

[illegible]

3. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Date:

D	D	M	M	Y	Y	Y	Y
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Place:

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Signature / Thumb Impression of Applicant



Application Type ☐ New ☐ Update

KYC Number

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Annexure B1

Related Person

Please read the instructions before filling the form.

☐ 1. DETAILS OF RELATED PERSON (in case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

☐ Addition of Related Person ☐ Deletion of Related Person

KYC Number of Related Person (if available*)

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Related Person Type* ☐ Guardian of Minor ☐ Assignee ☐ Authorized Representative

Name

Prefix	First Name	Middle Name	Last Name																																																																																
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(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON* (Please see instruction H at the end)

☐ A – Passport Number

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Expiry Date

D	D	M	M	Y	Y	Y	Y
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☐ B – Voter ID Card

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☐ C – PAN Card (Mandatory)

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☐ D – Driving License

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Expiry Date

D	D	M	M	Y	Y	Y	Y
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☐ E – UID (Aadhar)

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☐ F – NREGA Job Card

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☐ Z – Others (doc. notified by the cen. govt)

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Identification Number

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☐ S – Simplified Measures Account – Document Type Code

Identification Number

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2. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Date:

D	D	M	M	Y	Y	Y	Y
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 Place:

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Signature / Thumb Impression of Applicant

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Original Verified and Self-attested Document Copies Received

IPV AND KYC VERIFICATION CARRIED OUT BY

Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y												
D	D	M	M	Y	Y	Y	Y														
Emp Name	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
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[Employee Signature]

INSTITUTION DETAILS

Name

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Code

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[Institution Stamp]

ACCOUNT OPENING FORM FOR INDIVIDUALS

DP ID: IN301516
THE FEDERAL BANK LTD.
Depository Services Division, Operations Department,
3rd Floor, Parackal Towers, Parur Jn, Thottakkattukara,
UC College PO, Aluva, Kerala-683102

Client ID
(to be filled by Participant)

BRANCH

BRANCH CODE:

I/We request you to open a depository account in my/our name as per the following details:
(Please fill all the details in CAPITAL LETTERS only)

Date

A) Type of Account

- ☐ Ordinary Resident ☐ NRI-Repatriable ☐ NRI-Non Repatriable ☐ Qualified Foreign Investor ☐ Foreign National
☐ Margin ☐ Promoter ☐ Others (Please specify)

B) Mode of Operation

(only in case of joint accounts) ☐ Jointly ☐ Either or Survivor / Anyone or Survivor ☐ First Holder

C) Details of Account Holder(s):

Account Holder (s)	Sole / First Holder	Second Holder	Third Holder
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
PAN	<input type="text"/>	<input type="text"/>	<input type="text"/>
Occupation (please tick any one and give brief details)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Private Sector <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Private Sector <input type="checkbox"/> Agriculturist
	<input type="checkbox"/> Public Sector <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector <input type="checkbox"/> Retired
	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Housewife	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Housewife	<input type="checkbox"/> Govt. Service <input type="checkbox"/> Housewife
	<input type="checkbox"/> Business <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Student
	<input type="checkbox"/> Professional <input type="checkbox"/> Others (specify)	<input type="checkbox"/> Professional <input type="checkbox"/> Others (specify)	<input type="checkbox"/> Professional <input type="checkbox"/> Others (specify)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brief Details	<input type="text"/>	<input type="text"/>	<input type="text"/>

D) For Association of Persons (AoP), Partnership Firm, Unregistered Trust, etc. although the account is opened in the name of the natural persons, the name & PAN of the AoP, Partnership Firm, Unregistered Trust etc. should be mentioned below:

a) Name b) PAN

E) Gross Annual Income Details

Income Range per Annum ☐ Below Rs. 1 lac ☐ Rs. 1-5 lac ☐ Rs. 5-10 lac ☐ Rs. 10-25 lac ☐ Above Rs. 25 lac
(please tick any one) Net worth as on Rs.
(net worth should not be older than one year)

F) In case of NRIs/Foreign Nationals

RBI Approval Reference Number RBI Approval Date

G) Bank Details

Bank Account Type ☐ SB ☐ CA ☐ Others Bank Account Number
Bank Name
Branch Address
MICR Code Pin Code
IFSC

H) Please tick, if applicable

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

I) Service Request

I/We request you to link my demat account with FedNet ☐ Yes ☐ No If yes, User ID: _____

I/We request you to link my trading account with the demat account ☐ Yes ☐ No

If yes, UCC _____ Exchange ID & Name _____

Standing Instruction ☐ Yes, to receive credit automatically into my/our account (default is Yes)
☐ No NOTE: SI for a Non-PIS NRE Demat A/c will be by default marked as 'No SI'

SMS Alert Mandatory if giving Power of Attorney (POA)/Demat Debit and Pledge Instruction (DDPI). Ensure that mobile number is provided in the KYC Application Form

First Holder ☐ Yes ☐ No Second Holder ☐ Yes ☐ No Third Holder ☐ Yes ☐ No

Communication to be sent to ☐ First Holder ☐ All joint holders

Account to be operated through Power of Attorney (POA): ☐ Yes ☐ No

Account to be operated through Demat Debit and Pledge Instruction (DDPI): ☐ Yes ☐ No

Delivery Instruction To be filled by persons seeking to open a Depository account and has opted for online trading facility or who have given Power of Attorney to operate the Depository account to a stockbroker/Participant (Portfolio Manager and do not intend to open a Basic Services Demat Account)

Slip (DIS) booklet facility ☐ Yes, I/we wish to receive DIS Booklet at the time of demat account opening
☐ No, however, the DIS Booklet should be issued to me/us immediately on my/our request at any later date

Mode of receiving Statement of Account (tick any one) ☐ Physical Form ☐ Electronic Form (Read Note 4)
☐ Through email (ensure that email ID is provided in Part 1 of AOF i.e. KYC Application Form)

Mode of receiving Rights and Obligations (tick any one) ☐ Physical Form ☐ Electronic Form (Read Note 4)

Mode of receiving Annual Reports, AGM notices and other communications from Issuers & RTAs ☐ Physical Form ☐ Electronic Form (Read Note 4)

J) 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

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PAN

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Relationship of guardian with minor

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Nomination Option

☐ I/We wish to make a nomination.
(Details are provided in Nomination Form prescribed by SEBI)

☐ I/We wish to opt out of nomination
(Declaration form opting out of nomination as prescribed by SEBI)

NOMINATION FORM

To,
The Federal Bank Ltd
Depository Services Division, Operations Department
3rd Floor, Parackal Towers, Parur Jn, Thottakkattukara
UC College P.O., Aluva, Kerala-683102
DP ID: IN301516

ANNEXURE – A

Date	D	D	M	M	Y	Y	Y	Y	UCC/DP ID									Client ID									
I/We wish to make nomination. (As per the details given below)																											
Nomination Details																											
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my/our demat account in the event of my/our death, as trustee and on behalf of my/our legal heir(s).																											
Nomination can be made up to 3 nominees in the account	Mandatory Details																										
	Name of Nominee	Share of Nominee (%)**	Relationship with the applicant	Postal address with pin code	Mobile number & Email Address	Identity Number ***																					
	Nominee 1																										
	Nominee 2																										
	Nominee 3																										
Date of Birth and Name of Guardian to be provided in case of minor nominee(s)																											
Additional Details ****																											
Should be filled only if nominee(s) is a minor:																											
D.O.B. of Nominee	Name of Guardian [in case of minor nominee(s)]	Relationship of Guardian with Nominee	Postal Address of Guardian	Mobile Number & Email ID of Guardian																							

** If % is not specified, then the assets shall be distributed equally amongst all the nominees. Any odd lot after division shall be transferred to the first nominee mentioned in the form.

*** Provide only number: PAN or Driving License or Aadhar (last 4 digit). In case of NRIs/OCI/PIO, passport number is acceptable.

**** To be furnished only in the following conditions/circumstances:

- Date of Birth (D.O.B): Please provide, only if the nominee is minor
- Guardian: It is optional for you to provide, only if the nominee is minor

I/We want the details of my/our nominee(s) to be printed in the statement of holding or statement of account, provided to me/us by the DP as follows: (please tick as appropriate)

☐ Name of nominee(s) ☐ Nomination: Yes/No

I hereby authorise _____ (nominee number _____) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the SEBI circular SEBI/HO/OIAE/OIAE_IAD 3/P/ON/2025/01650 dated January 10, 2025. He/She is authorised to encash my assets up to _____% of assets in the account or Rs. _____.

(strike off portions that are not relevant) (optional)

Place: _____

Date: _____

Signatures	First/Sole Holder	Second Holder	Third Holder
Name			
Signature / Thumb Impression			

* Signature(s) – as per the mode of holding in the demat account(s).

Place: _____

Date: _____

Details of Witness:		
	First Witness	Second Witness
Name of Witness		
Address of Witness		
Signature of Witness		

* Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression instead of wet signature.

(To be filled by DP)

Nomination form accepted and registered with registration no. _____ dated _____.

Note:

1. This nomination shall supersede any prior nomination made by the account holder(s), if any.
2. The Trading Member / Depository Participant shall provide acknowledgement of the nomination form to the account holder(s). Signature of witness, along with name and address are required, if the account holder affixes thumb impression instead of signature.

FORM FOR OPT OUT OF NOMINATION

To,
The Federal Bank Ltd
Depository Services Division, Operations Department
3rd Floor, Parackal Towers, Parur Jn, Thottakkattukara
UC College P.O., Aluva, Kerala-683102
DP ID: IN301516

	DATE	D	D	M	M	Y	Y	Y	Y
UCC / DP ID									
Client ID (only for Demat Account)									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									

I / We hereby confirm that I / we do not wish to appoint any nominee(s) in my / our trading / demat account and understand the issues involved in non-appointment of nominee(s) and further am / are that in case of death of all account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our / trading / demat account, which may also include documents issued by court or other such competent authority, based on the value of assets held in the trading / demat account.

Name and Signature of Holder(s)*

1. _____ 2. _____ 3. _____

*Signature of witness, along with name and address are required, if the account holder affixes thumb impression instead of signature

----- (Please Tear Here) -----

Acknowledgement

DP ID										Client ID									
Name																			
Address																			
Nomination in favour of First Nominee																			
Second Nominee																			
Third Nominee																			
No Nomination	<input type="checkbox"/> Does not wish to nominate																		
Registration No.										Registration On	D	D	M	M	Y	Y	Y	Y	

Depository Participant Seal and Signature

Declaration

The rules and regulations 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 I/we agree to abide by and to be bound by the rules as are in force from time to time for such account. I/We hereby declare that the details furnished above information in found to be fake or untrue or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it. In case of 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 and Investor Charter of the Beneficial Owner and Depository Participant".

	Name(s) of Holder(s)	Signature(s) of Holder
Sole/First Holder/Guardian (in case holder is minor) (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

STANDING INSTRUCTION FOR DEBITING CHARGES

Operative Bank Account No.

RBI Approval Date

Whether SB-staff Account? [Applicable only to Federal Bank Employee accounts]: ☐ YES ☐ NO

THE MANAGER

BRANCH: _____

Dear Sir,

We hereby authorise you to debit my/our operative Branch A/c with the Federal Bank Ltd. for all the charges relating to my/our demat account. Please treat this authorisation as irrevocable till further instruction from my/our side in writing and duly acknowledged by you.

SCHEDULE OF CHARGES FOR DEPOSITORY PARTICIPANT SERVICES – NSDL

Activity	Regular Services Demat Account (RSDA)	Basic Services Demat Account (BSDA)
Account Opening	NIL	NIL
Account Closing	NIL	NIL
Demat	₹5/- per certificate for a maximum of 4 certificates. ₹20/- per certificate from 5th certificate onwards subject to a maximum of ₹5000/- plus mailing charge ₹100/- per request.	₹5/- per certificate for a maximum of 4 certificates. ₹20/- per certificate from 5th certificate onwards subject to a maximum of ₹5000/- plus mailing charge ₹100/- per request.
Reconversion / Repurchase of Mutual Fund Units	₹ 100/- per transaction	₹ 100/- per transaction
Redemption of Mutual Fund Units	NIL	NIL
Remat	a) ₹25/- per certificate per request b) ₹25/- for every hundred securities or part thereof subject to max fee of ₹5,00,000/- whichever is higher plus, mailing charge ₹100/-	a) ₹25/- per certificate per request b) ₹25/- for every hundred securities or part thereof subject to max fee of ₹5,00,000/- whichever is higher plus, mailing charge ₹100/-
Transaction Charge	Credit: Nil 1. Debit (Individual accounts) a) ₹30/- per instruction b) ₹20/- per instruction for Fed-e-Trade customer. 2. Debit (Non-individual accounts) a) 0.025 % subject to a minimum of ₹50/- and maximum of ₹600/- per transaction.	Credit: Nil a) ₹30/- per instruction b) ₹20/- per instruction for Fed-e-Trade customer. N/A
Pledge Creation/Confirmation/Closure/Closure confirmation/Invocation	₹75/- per transaction (per ISIN)	₹75/- per transaction (per ISIN)

Margin pledge initiation charge	₹5/- per transaction (per ISIN)	₹5/- per transaction (per ISIN)	
Fees for NDU (Non-Disposal Undertaking/Agreement)	0.01% of the value of securities upon creation of hold subject to a minimum of ₹ 25/-	0.01% of the value of securities upon creation of hold subject to a minimum of ₹ 25/-	
Annual maintenance charge	1. Individual Accounts		
	a) ₹600/- per annum collected quarterly	Holding Value	Charges
		Up to ₹ 4 lakhs	NIL
		More than ₹ 4 lakhs but up to ₹ 10 lakhs	₹100
		For Holding Value above ₹ 10 lakhs the tariff for Regular Service Demat Account (RSDA) will be applicable.	
	2. Non – Individual Accounts		
a) ₹2000/- per annum collected quarterly	N/A		
Account Freezing/Unfreezing	₹150/- per instruction	₹150/- per instruction	
Account Modification	₹10/- per instruction	₹10/- per instruction	
DIS Book Re-Issue Charges	₹100/- per booklet (for 5 slips)	₹100/- per booklet (for 5 slips)	
	₹150/-per booklet (for 10 slips)	₹150/-per booklet (for 10 slips)	
	₹250/-per booklet (for 100 slips)	₹250/-per booklet (for 100 slips)	
Late Entry Charges	₹100/- per transaction	₹100/- per transaction	
Ad-hoc Statement charges (electronic & printouts)	₹20/- per statement	₹20/- per statement	
IDEAS & SPEED-e charges			
IDEAS	NIL		
Speed-e	Password User	₹30/- Per Quarter	
	Smart Card/E- token	No. of instructions submitted through SPEED-e facility during the quarter	User fee per quarter
		>= 50000	1000
		>= 5000 and < 50000	750
		< 5000	500

- Depository charges (NSDL) will be collected from the customers over and above the given charge structure.
- All charges are exclusive of applicable GST and other taxes/statutory charges levied by government bodies/statutory authorities from time to time, which will be charged as applicable.
- A onetime charge of ₹ 1,000/- (minimum) towards the cost of Smart Card/E-token will be charged extra for those who opt for Speed-e operating through Smart card /E-token.
- A one-time charge of ₹150/- towards administrative/conveyance costs will be charged extra for all account categories.
- Schedule of charges is in tune with depository (NSDL) guidelines. An interest of 15% will be applied on the pending charges to be paid by the defaulting customers after a buffer of 20 days from the date of bill generation.
- The charges are subject to revision at the discretion of the Bank and are subject to change giving 30 days' notice to the client.
- An individual having more than one depository account as a sole / first holder across depositories is not eligible to opt for BSDA facility.
- As and when an account becomes RSDA, automatically RSDA charges will be applied.
- The value of holding will be calculated in accordance with rates provided by NSDL.
- Transaction charges, Custody charges, Demat and Remat charges are payable on a quarterly basis.
- Pledge charges are payable at the time of respective request.
- Mailing charges are payable at the time of request.
- Apart from AMC & Transaction Charge, tariff will be same for all the other services for Individual and Non-Individual demat accounts
- For NSDL Charges, please visit <https://nsdl.co.in/about/charges.php>

	Name(s) of Holder(s)	Signature(s) of Holder
Sole/First Holder (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

***in case of joint holders, declaration should be obtained from each account*

[illegible]

☐ Me or ☐ Family (spouse, dependent children and dependent parents)

1st Holder Signature	2nd Holder Signature	3rd Holder Signature
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I/We Want to avail Depository services for my/our demat account under (Mandatory) ☐ BSDA ☐ RSDA status

- I/We have read and understood the Securities and Exchange Board of India's guidelines for facility for a BSDA.
- I/We are aware that if I/we are eligible to open a depository account as a BSDA, the account shall be opened as a BSDA.
- I/We also understand that in case I/we at any point of time do not meet the eligibility criteria as a BSDA holder, my/our demat account is liable to be converted to regular account.
- I/We also state that if at any time I/we choose to opt out of BSDA i.e. avail the facility of regular account, the same will be communicated to the Participant from Sole / First Holder's registered email ID.

SIGNATURE	1st Holder	2nd Holder	3rd Holder
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1. All communication shall be sent at the address of the Sole/First Holder only.
2. Instructions related to nomination are as below:
 - i. 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.
 - ii. 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.
 - iii. Thumb impressions must be attested by witness or a Magistrate or a Notary Public or a Special Executive Magistrate
 - iv. 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.
 - v. The nomination and Declaration form may be signed using e-Sign facility or wet signature and in these cases, witness will not be required.
 - vi. 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.
 - vii. 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.
 - viii. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
 - ix. 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.

- x. 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).
 - xi. Nomination can be made up to 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 up to 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.
 - xii. 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 Nomination form at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
 - xiii. Copy of any proof of identity must be accompanied by original for verification.
 - xiv. Savings bank account details shall only be considered if the account is maintained with the same participant.
 - xv. DP ID and client ID shall be provided where demat details is required to be provided.
 - xvi. If you are opening a new demat account, you must provide nomination. Otherwise, you must follow procedure as per 3.10 of SEBI circular SEBI/HO/OIAE/OIAE_IAD- 3/P/ON/2025/01650.
 - xvii. You can make nomination or change nominee any number of times without any restriction.
 - xviii. You are entitled to receive acknowledgement from the DP for each instance of providing or changing nomination.
 - xix. Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account.
 - xx. In case all your nominees do not claim the assets from the DP, then the residual unclaimed asset shall continue to be with the concerned Depository in case of Demat account.
 - xxi. You have the option to designate any one of your nominees to operate your account, in case of your physical incapacitation, at any point of time and not just during opening of account. This mandate can be changed any time you choose.
 - xxii. The signatories for this nomination form in joint account, shall be the same as per mode of holding in the demat account i.e.
 - a. 'Either or Survivor' Accounts – any one of the holders can sign
 - b. 'First holder' Accounts – only first holder can sign
 - c. 'Jointly' Accounts – all holders shall sign
 - xxiii. The mode of operation mentioned above may be used only for the following transactions in addition to nomination:
 - a. Transfer of securities including Inter-Depository Transfer.
 - b. Pledge / Hypothecation / margin pledge / margin re-pledge (Creation, Closure and Invocation and confirmation thereof, as applicable).
 - c. Freeze/unfreeze account and/ or the ISIN and / or specific number of securities.
 - xxiv. However, for all transactions other than the abovementioned, the mode of operation shall be jointly.
3. In case of a joint account, upon the death of any of the joint account holders, if the surviving account holder(s) choose to continue with the same account by deleting the name of the deceased account holder(s), they must follow the procedures prescribed by SEBI.
 4. In case of a joint account, for transmission to the surviving joint holder(s) by name deletion, the surviving joint holder(s) shall have the option to update residential address(es), mobile number(s), email address(es), bank account detail(s). annual income and nominee(s), either along with transmission or at a later date. The regulated entity cannot seek KYC documents at the time of transmission, unless it was sought earlier but not provided by the holder.
 5. In case if 'First Holder' is selected, the communication will be sent as per the preference mentioned. In case "All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned and communication to other holders will be in electronic mode. The default option will be communication to 'First Holder', if no option selected.
 6. The linked bank account shall not be closed before closing the Demat Account.
 7. For receiving statement of account and copy of Rights and Obligations of the Beneficiary Owner and Depository Participant 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 had changes.
 - 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
 8. Strike off whichever is not applicable.

AT THE BRANCH	AT DP OFFICE
Confirmed that all the relevant documents are completely verified and filled. Manager (Signature with SP No.) Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Verified by: Authorised Signatory: Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

DOCUMENTS CHECKLIST			
	Sole/First Holder	Second Holder	Third Holder
Pan & Aadhar Copy – Self-attested and Branch verified/attested	✓	✓	✓
Address Proof* - Self-attested and Branch verified/attested	✓	✓	✓
Bank Account Statement – Self-attested and Branch verified/attested	✓	✓	✓
One recent passport size photograph for KYC	✓	✓	✓
*Address proof mentioned in KYC form should be exactly matching in the proof given. *In case of joint account, separate KYC form and declaration for same mobile number/email ID should be obtained from each joint holder(s). *For NRIs, FATCA declaration needs to be obtained.			

SIGNATURE CHECKLIST				
Document	Page No.	Client Signature	Witness	Branch Official's Signature
Signature below photograph	1	✓		
Signature in KYC Application Form	3	✓		✓
Signature in Nomination Form	11	✓	✓	
Signature in opt out of Nomination Form (Only required if opting out of nomination)	12	✓		
Signature under declaration	13	✓		
Schedule of Charges	14	✓		
Declaration – Same mobile/email ID	15	✓		
Signature for confirming BSDA/RSDA status	15	✓		
Confirmation – at the branch	16			✓
Signature in proof of ID and proof of address submitted		✓		✓

Acknowledgement

The Manager

Branch: _____

Received the application from Mr./Ms. _____ as the sole/first holder along with _____ and _____ as the second and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you in all your future correspondence.

Date:

D	D	M	M	Y	Y	Y	Y
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Branch Seal & Signature

Annexure 1

FATCA – CRS Self Certification Form Individuals – New Accounts

1. Name of the Account Holder _____
2. Aadhar Number _____ (optional)
3. Nationality _____
4. City of Birth _____
5. Country of Birth _____
6. Occupation Type _____ (Service, Business, Others-please specify)
7. Residence address for tax purposes (include city, state, country & pin code)

☐ Same as overseas address
 ☐ Same as permanent address
 (please tick anyone)
8. Address Type ☐ Residential ☐ Business ☐ Registered Office (please tick anyone)
9. Tax residence declaration-please tick anyone, as applicable to you

☐ I am a tax resident of India and not resident of any other country
☐ I am a tax resident of the country/ies mentioned in the table below

Please include ALL the countered in which you are a resident for tax purposes and the associated Tax ID Number below:

Country [#]	Tax Identification Number [%]	Identification Type (TIN or other [%] , please specify)

[#] To also include USA, where the individual is a citizen/green card holder of USA

[%] In case Tax Identification Number is not available kindly provide functional equivalent \$

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are a tax resident issues such identifies. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Declaration

I, _____ holder of passport number _____ residing at _____
 hereby declare that: I am neither a citizen of USA nor a resident of USA for tax purposes despite being my place of birth is in USA (by persons having US birthplace, but not a US citizen/tax resident)

OR

I am neither a citizen of USA nor a tax resident of any country other than India even though

- a) My residence/mailling address/telephone number is of a country other than India
- b) I have a standing instruction to an account maintained outside India

(By persons having foreign country indicia, but are tax residents of India)

Certification

I/We have understood the information requirements of this form (read along with the FATCA/CRS Instructions) and hereby confirm that the information provided by me/us on this form is true, correct and complete. I/We also confirm that I/we have read and understood the FATCA CRS Terms and Conditions below and hereby accept the same.

Name:

Signature:

Date: ____/____/____

Place: _____

FATCA-CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income Tax Rules, 1962, which rules require Indian financial institutions such as the bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to the tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relations with Federal Bank or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. If you have any questions about your tax residency, please contact your tax advisor. **If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.**

FEMA Declaration
(Only Applicable for NRI Customers)

From

Name: _____

Client ID: _____

To

The Compliance Officer

The Federal Bank Ltd

Depository Services Division, Operations Department

Parackal Towers, Parur Jn, Thottakkattukara

UC College, Aluva – 683102

Dear Sir,

Reg: Compliance of FEMA Guidelines

I hereby declare that I have complied and will continue to comply with FEMA regulations in respect of my client account number _____ with DP The Federal Bank Ltd and DP ID: IN301516.

Yours faithfully,

(Signature)

(Name)