**APPLICATION FOR OPENING AN ACCOUNT**

**(For entities other than Individuals)**

**ONLY FOR NERL CLIENTS**

**(Please fill in CAPITAL LETTERS only)**

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| **Comtrack / Repository Participant’s Name** |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  **Address** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Application No.** |  |  |  |  |  |  |  |  |  |  |  |  | **Ref. No.** |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Date** |  |  |  |  |  |  |  |  | **Client ID** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Account Category: (Please tick correct category as below)**

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| **PARTNERSHIP FIRM** |  | **TRUST** |  | **BODY CORPORATE** |  | **HUF** |  |
| **PRIVATE LIMITED CO.** |  | **LLP** |  | **PUBLIC LTD. CO** |  | **Sole Proprietor** |  |

**We request you to open an Account in my/our name as per the details.**

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|  **Name of Company / Firm** |    |    |     |   |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Registered Office Address**  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **City** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **State** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Correspondence Address**  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **State** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Tel No.**   |  |  |  |  |  |  |  |  |  |  | **Fax No.** |  |  |  |  |  |  |  |  |  |  |
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| **Email** |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Date of Incorporation** |  |  |  |  |  |  |  |  |
| **Place of Incorporation** |  |  |  |  |  |  |  |  |

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| **SEBI Regn No** |  |  |  |  |  |  |  |  |  |  |  |  | **Date** |  |  |  |  |  |  |  |  |
| **RBI Regn No** |  |  |  |  |  |  |  |  |  |  |  |  | **Date** |  |  |  |  |  |  |  |  |
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| **Bank Name** | **Branch Address** | **Bank****Account No.** | **Account Type:****Saving/Current/Others** | **MICR Number** | **IFSC code** |
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**Authorized Signatory I / KARTA Details / Partner Details / Sole Proprietor**

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| **First Name** |    |    |     |   |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Middle Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Last Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **City** |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Tel No.**   |  |  |  |  |  |  |  |  |  |  | **Fax No.** |  |  |  |  |  |  |  |  |  |  |
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**Authorized Signatory II / Partner Details**

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| **First Name** |    |    |     |   |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Middle Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Last Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Permanent Address** |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Authorized Signatory III / Partner Details**

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| **First Name** |    |    |     |   |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Middle Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Permanent Address** |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **City** |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **PAN** |  |  |  |  |  |  |  |  |  |  | **D.O.B.** |  |  |  |  |  |  |  |  |
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| **Email** |    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Account Statement Requirement** |  | **Fortnightly** |  |  **Monthly** |  |  **Quarterly** |  |

**I/We have read the Rights and obligations of client and CP / RP document including the schedules hereto and the terms & conditions and agree to abide by and be bound by the same and by the Business Rules & Bye Laws NERL as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.**

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| **Name** | **Authorized Signatory I** | **Authorized Signatory II** | **Authorized Signatory III** |
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| **Designation** |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
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| **Signature** |   |   |   |
| **Passport Photograph****(Signature across** **photograph is required)** |   |   |   |

 =================== (Please Tear Here) =================

**Acknowledgement Receipt**

We hereby acknowledge the receipt of the Account Opening Application Form from: -

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name of the Company / Firm** |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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(For Office Use Only)

|  |  |
| --- | --- |
| **Employee Name** |  |
| **Employee Code** |  |
| **Designation** |  |
| **Signature & Stamp** |  |

**ANNEXURE 1 (Format for Additional Authorized signatory details)**

|  |  |  |  |  |  |  |  |
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| **Sr. No** | **Name** | **Address** | **Contact No** | **Email Id** | **PAN No** | **Signature** | **Photo** |
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