

Julius Bär

DEPOSITORY ACCOUNT OPENING FORM INDIVIDUAL

Julius Baer Wealth Advisors (India) Private Limited

Registered & Main Office: 8th Floor, Mafatlal Centre, Nariman Point, Mumbai 400 021 India

SEBI Stock Broker Registration No.: INZ000008631, SEBI Depository Participant No.: IN-DP-117-2015, CIN: U65923MH2014PTC255743
Compliance Officer: Deepika Seth Email: deepika.seth@juliusbaer.com <http://www.juliusbaer.com/in> Tel.: +91 22 6176 0100 Fax: +91 22 6635 6110

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Notes :

1. All communication shall be sent at the address of the Sole/First holder only.
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. Instructions related to nomination, are as below:
 1. 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.
 2. 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.
 3. 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.
 4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account.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.
 5. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
 6. 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.
 7. 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).
 8. 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.
 9. 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.
 10. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents.
 11. Savings bank account details shall only be considered if the account is maintained with the same participant.
4. For receiving Statement of Account in electronic form:
 1. Client must ensure the confidentiality of the password of the email account.
 2. Client must promptly inform the Participant if the email address has changed.
 3. 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.
5. Strike off whichever is not applicable.

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Mafatlal Centre, 8th Floor, Nariman Point, Mumbai 400 021

Tel: (022) 6176 0100 Fax: (022) 6635 6110

DP ID: IN305099

Serial No.:

Form 9

APPLICATION FOR OPENING A DEPOSITORY ACCOUNT

(For Individuals Only)

Date: / /	Client – Id (To be filled by the Participant)													
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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)

Type of Account (Please tick any one)							
<input type="checkbox"/> Ordinary Resident	<input type="checkbox"/> Qualified Foreign Investor	<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> NRI-Non Repatriable	<input type="checkbox"/> Promoter	<input type="checkbox"/> Margin	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Others (Please specify) _____ _____

Part A – Details of Account holder(s):

Name of Account holder(s):						PAN Details								
Sole/ First Holder														
Second Holder														
Third Holder														

Occupation Details (please tick any one and give brief details)

Sole/ First Holder	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Others (Please specify)
Second Holder	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Others (Please specify)
Third Holder	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Others (Please specify)

Brief details:

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 Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned below:

a) Name		b) PAN												
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Part B - Gross Annual Income Details - Income Range per annum (please tick any one)

Below ₹ 1 lac ₹ 1- 5 lac ₹ 5- 10 lac ₹ 10- 25 lac More than ₹ 25 lac

Part C - In case of NRIs/ Foreign Nationals

RBI Approval Reference Number		RBI Approval date	D	D	M	M	Y	Y	Y	Y
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Part D	Please tick, if applicable: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)			
Part E – Bank Details				
Bank Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Others (Please specify)_____			
Bank Account Number				
Bank Name				
IFSC				
			MICR	
Branch Address	City / Town / Village		State	PIN Country
Part F – Service Requests and Standing Instructions				
I/We authorise you to receive credits automatically into my/our account.			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Account to be operated through Power of Attorney (PoA)			<input type="checkbox"/> Yes	<input type="checkbox"/> No
SMS Alert facility: [Mandatory if you are giving Power of Attorney (PoA). Ensure that the mobile number is provided in the KYC Application Form]				
Sole/First Holder			<input 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
I hereby confirm that I am NOT opening this account under Basic Services Demat Account (BSDA)			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mode of receiving Statement of Account [Tick any one] [Read Note 4 and ensure that email ID is provided in KYC Application Form].			<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
I wish to receive Rights and Obligations of beneficial owner and depository participant as prescribed by SEBI and depositories.			<input type="checkbox"/> Electronic	<input type="checkbox"/> Physical
Option for Issue of DIS booklet (please tick any one) Option 1 - I/We wish to receive the Delivery Instruction Slip (DIS) booklet with account opening. Option-2 - I/We do not wish to receive the DIS booklet with account opening. However, the DIS booklet should be issued to me/ us immediately on my/ our request at any later date.			<input type="checkbox"/> Option1	<input type="checkbox"/> Option2
	Mobile	Email	Family Declaration	Please update my KRA
1st Holder			<input type="checkbox"/> Myself <input type="checkbox"/> Family#	<input type="checkbox"/> Yes <input type="checkbox"/> No
2nd Holder			<input type="checkbox"/> Myself <input type="checkbox"/> Family#	<input type="checkbox"/> Yes <input type="checkbox"/> No
3rd Holder			<input type="checkbox"/> Myself <input type="checkbox"/> Family#	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Family includes spouse, dependent children and dependent parents.</i> 1st Holder # _____ 2nd Holder # _____ 3rd Holder # _____ Additionally, I/We hereby declare that the mobile numbers or E-mail addresses provided by me/us do not pertain to any participant / brokers / sub-brokers / franchisees / custodians / portfolio managers / etc. or their employees.				

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Part G : 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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Relationship of guardian with minor	PAN								
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Nomination Option

I/We do not wish to make a nomination. [Strike off the nomination details below]

I/We wish to make a nomination. [As per details given below]

Nomination Details

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all securities held in the Depository by me / us in the said beneficiary owner account in the event of my / our death.

Nomination can be made upto three nominees in the account.		Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
1	Name of the nominee(s) (Mr./Ms.)			
2	Share of each Nominee <input type="checkbox"/> Equally <input type="checkbox"/> Not Equally	%	%	%
		If not equally, please specify percentage (%) Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
3	Relationship with the Applicant (If any)			
4	Address of Nominee			
		PIN Code		
5	Mobile/Telephone No. of nominee(s)			
6	Email ID of nominee(s)			
7	Nominee Identification details [Please tick any one of following and provide details of same]			
	<input type="checkbox"/> Photo & Sign <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Demat Account ID			

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Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:			
8	Date of Birth		
9	Name of Guardian (Mr./Ms.)		
10	Address of Guardian(s)		
	PIN Code		
11	Mobile/Telephone no. of Guardian		
12	Email ID of Guardian		
13	Relationship of Guardian with nominee		
14	Guardian Identification details – [Please tick any one of following and provide details of same]		
	<input type="checkbox"/> Photo & Sign <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Demat Account ID		

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 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.

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I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

Name(s) of holder(s)		Signature(s)
Sole/ First Holder /Guardian (in case sole holder is minor) (Mr./Ms.)		XX
Second Holder (Mr./Ms.)		XX
Third Holder (Mr./Ms.)		XX
Witness for Nomination		
Name of the Witness	Address	Signature of witness
		X
		Date
		D D M M Y Y Y Y

FOR OFFICE USE ONLY (In Person Verification Details)

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature of the Employee			
In Person verification done for			<input type="checkbox"/> First holder <input type="checkbox"/> Second holder <input type="checkbox"/> Third holder

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Julius Baer Wealth Advisors (India) Private Limited

DP ID:IN305099

Schedule of Charges

Dear Customer,

The schedule of charges are as follows:

Sr.	Account Head	Rate	Minimum Payable
1	Account Opening	NIL	
2	Account Maintenance Charges	NIL	
3	Custody Charges	NIL	
4	Dematerialisation	Rs. 3/- per Certificate, plus Rs. 25 per Request. --	--
5	Rematerialisation	a) Rs. 10/- for every hundred securities or part there of OR b) a flat fee of Rs. 10/- per certificate whichever is higher	--
6	Market Transactions (Sell)	0.05% of the value of securities	Rs.25/-
7	Market & Off - Market Transaction (Buy)	NIL	
8	Off - Market Transaction (Sell) (Intra DP)	0.02% of the value of securities	Rs.25/-
9	Off - Market Transaction (Sell) (Inter DP)	0.05% of the value of securities	Rs.25/-
10	Pledge Services	Rs. 100/- per request	
11	Pledge Invocation	Rs. 100/- per request	
12	Late Service Charges*	0.25% of the value of securities	Rs.25/-
13	Failed Transaction	Rs. 25/- per Entry	
14	Demat Rejection Charges	Rs. 25/- per Entry	

Goods and Services Tax + Other Applicable Taxes will be levied on the above charges.

Notes:

- ✓ Julius Baer Wealth Advisors (India) Private Limited (JBWA) shall provide the service on a continuous basis for a period of at least 100 days subject however, to the provisions of clause 17 of Rights and Obligations of Beneficial Owner and Depository Participant.
- ✓ JBWA shall, on completion of a calendar month, determine the number of transactions executed on your behalf and shall compute and charge the fees and issue invoice in the following month. Payment of fees shall be due only after the invoice is issued.
- ✓ There will be no charges levied on liquid Bees with ISIN INF732E01037.
- ✓ Charges / Service Standards are subject to revision at the JBWA's sole discretion and will be intimated in writing to client atleast 30 days in advance.
- ✓ Any service, which is not mentioned above, will be charged separately at the applicable rates from time to time.
- ✓ Any additional charges levied by NSDL will be charged to client.
- ✓ Value of Transaction will be in accordance with rates provided by the Depository.
- ✓ Pledge Services will include individually pledge creation request, pledge confirmation request, closure requisition, closure confirmation requisition.
- ✓ All the account holders must sign operating instructions for the joint accounts.
- ✓ In the normal course for operation of accounts the instructions for transfer should reach JBWA, prior to the deadline as mentioned below:

Type of Transaction	No. of Hours
For On Market Rolling Settlement	4 p.m. on T+1.

* Late Service Charges would be collected for all instructions received beyond the stipulated time. The same will be accepted at client's risk and will be executed on 'Best Effort basis'

I / We have read and understood the "Schedule of Charges" prescribed above and agree to abide by the same.

xx _____
Signature of First / Sole Holder

xx _____
Signature of Second Holder

xx _____
Signature of Third Holder

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ACKNOWLEDGEMENT

(For Office use only)

Serial No.: _____

Julius Baer Wealth Advisors (India) Private Limited

Mafatlal Centre 8th Floor, Nariman Point, Mumbai 400 021

DP ID: **IN305099**

Received the application from Mr. / Ms. _____
_____ as the sole / first holder alongwith _____
_____ and _____ as the second and third holders
respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you (CM-BP-ID in
case of Clearing Members) in all your future correspondence.

For Julius Baer Wealth Advisors (India) Private Limited

Date : _____

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