

Request Letter for activation of Dormant Trading Account

Date: _____

To:
M/S Consortium Securities Pvt. Ltd.
M/S Consortium Commodities Pvt. Ltd.,
36, Sant Nagar,
East of Kailash,
New Delhi - 110 065.

Dear Sir,

SUB: Request for reactivation of the Trading Account.

Ref: Client / Trading Account No: _____

I/We, having the above referred Trading Account allotted to me/us based on duly filled and signed Client Registration Form along with the relevant KYC supporting documents provided by me/us at the time of Opening the Trading Account. Due to some unavoidable reasons, i/we could not place/execute any trades in the said account, since last 24 months, resulting in the account been kept under "Inactive" mode at your end as "Dormant Account". However, i/we have decided to start the trading activity and hence request you to kindly "Reactivate" the Account to enable us to trade in the account.

1. I request you to activate my Trading Account for the following Trading Segments: (Please sign for the segments you want to activate)

Segment	Client Signature	Segment	Client Signature
NSE Cash	<input type="checkbox"/>	BSE Cash	<input type="checkbox"/>
NSE Derivative	<input type="checkbox"/>	BSE Derivative	<input type="checkbox"/>
NSE Currency	<input type="checkbox"/>	NSE MFSS	<input type="checkbox"/>
MCX Commodities	<input type="checkbox"/>	NCDEX Commodities	<input type="checkbox"/>

2. I am enclosing here with the proof for latest financial information. (Compulsory for activation for derivatives trading)

Last Six Months Bank Statement

Networth Certificate

Latest IT Return

Latest DP Holding Statement

Form 16/ Latest Salary Slip

3. I have gone through the current Member / Client Agreements, Disclosures and Policies and Procedures available in your web-site as applicable to current trading practices and I agree to abide by the same.

INCOME DECLARATION (Individual)

This information is sought under the Prevention of Money Laundering Act, 2002, the rules notified there under and SEBI's guidelines on Anti Money Laundering.

Date:

Consortium Securities Pvt. Ltd.
Consortium Commodities Pvt. Ltd.
36, Sant Nagar, East of Kailash,
New Delhi – 110 065

Ref: Trading account No.: _____ DP account No.: _____

Name of the Individual (In Full)	
Permanent Address (If different from as provided in KYC – Attach proof)	
Correspondence Address (If different from as provided in KYC – Attach proof)	
Email ID (If different from as provided in KYC)	
Contact Details (If different from as provided in KYC)	
Landline Number	
Mobile Number	
Gross Annual Income Declaration	
a) Below Rs. 1,00,000	
b) Rs. 1,00,000 to Rs. 5,00,000	
c) Rs. 5,00,000 to Rs. 10,00,000	
d) Rs. 10,00,000 to Rs. 25,00,000	
e) Above Rs. 25,00,000 (Pls. specify the amount)	
Value of Assets (Pls. Specify)	
If the following is additionally applicable to you	
a) Politically Exposed Person (PEP)	YES/ NO
b) Related to a Politically Exposed Person (PEP)	YES/ NO
c) Senior government/judicial/military officers/executives of state owned corporations	YES/ NO

or their family member or close relative	
d) Current or Former MP/MLA/MLC/Head of state or of Governments or their family member or close relative	YES/ NO
e) Politician or their family member or close relative	YES/ NO
f) Civil Servant/Bureaucrat or family member or close relative of Civil Servant/Bureaucrat	YES/ NO

I _____, **(Name)** provide you the following details as per your requirement. I further request you to kindly update the same in your records as per the above-mentioned details.

We hereby further confirm/undertake that the investments/trading done in securities market are from our own/borrowed sources of funds and we confirm that the funds utilized for trading activity by us is in compliance with the rules, regulations and guidelines stipulated under PMLA.

I _____, (Name) hereby enclose the self attested copy of PAN card No. _____.

Yours faithfully,

Name of the Individual

Signature:

INCOME DECLARATION (NON-Individual)

This information is sought under the Prevention of Money Laundering Act, 2002, the rules notified there under and SEBI's guidelines on Anti Money Laundering.

Date:

To

Consortium Securities Pvt. Ltd.
Consortium Commodities Pvt. Ltd.
36, Sant Nagar, East of Kailash,
New Delhi – 110 065

Ref: Trading account No.: _____ DP account No.: _____

Name of the Company/ Firm/ HUF	
Registered Office Address (If different from as provided in KYC – Attach Proof)	
Correspondence Address (If different from as provided in KYC – Attach Proof)	
Email ID (If different from as provided in KYC)	
Contact Details (If different from as provided in KYC)	
Contact Person	
Landline Number	
Mobile Number	
Gross Annual Income Declaration	
a) Below Rs. 1,00,000	
b) Rs. 1,00,000 to Rs. 5,00,000	
c) Rs. 5,00,000 to Rs. 10,00,000	
d) Rs. 10,00,000 to Rs. 25,00,000	
e) Above Rs. 25,00,000 (Pls. specify the amount)	
Value of Assets (Pls. Specify)	Rs. _____
Net worth latest (along with copy of CA certificate)	Rs. _____

Audited Balance Sheets of latest (copy attached)	
If the following is additionally applicable to you	
a) Politically Exposed Person (PEP)	YES/ NO
b) Related to a Politically Exposed Person (PEP)	YES/ NO
c) Senior government/judicial/military officers/executives of state owned corporations or their family member or close relative	YES/ NO
d) Current or Former MP/MLA/MLC/Head of state or of Governments or their family member or close relative	YES/ NO
e) Politician or their family member or close relative	YES/ NO
f) Civil Servant/Bureaucrat or family member or close relative of Civil Servant/Bureaucrat	YES/ NO

I _____, **(Name & designation)** provide you the following details as per your requirement. I further request you to kindly update the same in your records as per the above-mentioned details.

We hereby further confirm/undertake that the investments/trading done in securities market are from our own/borrowed sources of funds and we confirm that the funds utilized for trading activity by us is in compliance with the rules, regulations and guidelines stipulated under PMLA.

I/we _____, (Name of the company/ Partnership Firm/ HUF) hereby enclose the self attested copy of PAN card No. _____.

Yours faithfully,

For _____
(Name of the Company / Partnership Firm/ HUF)

Signature
(Along with Stamp):