

Dormant Account Reactivation Form

From	To
Client Code -	Nirmal Bang Securities Private Limited
Client Name -	302, B-2, Marathon Innova,
Address 1 -	Opp. Peninsula Building, G. K. Marg,
Address 2-	Lower Parel (W) Mumbai - 400013.
Address 3-	

I/We hereby request you to please reactivate my /our account and treat this form as intimation for re-opening of the account. I/We hereby confirm that all the information's provided to you with initial account opening are the same, and I/We do agree to abide by the exchange rules and notifications issued till date.

ADDENDUM FOR CLIENTS OPTING FOR EQUITY/COMMODITY/CURRENCY TRADING

Mobile no.				
Email id :				
Financial Details along with supporting documents : Tick any one	<input type="checkbox"/>	Below Rs.1,00,000	<input type="checkbox"/>	Rs.1,00,000 to 5,00,000
	<input type="checkbox"/>	Rs. 5,00,000 to 10,00,000	<input type="checkbox"/>	Rs.10,00,000 to 25,00,000
	<input type="checkbox"/>	Above Rs.25,00,000	<input type="checkbox"/>	
Supporting document (Please provide any one)	<input type="checkbox"/>	Copy of Income Tax return	<input type="checkbox"/>	Copy of Annual Accounts
	<input type="checkbox"/>	Net Worth Certificate	<input type="checkbox"/>	Salary Slip
	<input type="checkbox"/>	Copy of Form 16 in case of Salary Income		
	<input type="checkbox"/>	Bank account statement for the last 6 Months		
	<input type="checkbox"/>	Copy of Demat account holding statement		
	<input type="checkbox"/>	Any other relevant documents sub staining ownership of asset		

The details furnished by me/us are true to the best of my/our knowledge and belief, and I/we undertake to inform you of any changes therein immediately in writing. In case if any of the above information is found to be false or untrue then I am /we are to be held liable for it.

I/we further undertake that i/we shall indemnify and keep indemnified Nirmal Bang Securities Private Limited or its Directors or its employees from and against any loss, claims, liabilities, obligations, damages, deficiencies, actions, suits, proceedings or liability suffered or fastened due to any incorrect, wrong, false, misleading representations provided /disclosed by me/us to Nirmal Bang Securities Private Limited.

Client's Signature, Name, Place and Date

Details of Employee / Authorized Signatory	Documents verified with Originals & IPV done By
Name & E Code	
Designation	
Date	DD/MM/YYYY
Signature	