To, TRIMBHAK INVESTMENT AND FINANCE SERVICES PVT.LTD. 2022 803/804,903,Unique Tower Gaiwadi Street, Off S. V Road Goregaon (West) Mumbai – 400104	Date :	/	/
Dear Sir, Sub: - Request to Re – Activate my trading Account in UCC for NSE , B	SE Cash S	Segment	
Ref: My Account Details: - Trading Code Name		, cgment	

DP ID/ Cl ID _____

You are requested to kindly <u>Reactivate</u> my Trading account with **Trimbhak Investment** and **Finance Services Pvt Ltd.** as I understand that I have not traded for a period more than 6 months and my account has become dormant. I hereby give my latest details as under:

- > PAN no. : _____
- Mobile No.: _____
- Email Add: _____
- > Address: _____
- Income range : ______

Please find Attached My Pan Card copy & Aadhar card for your ready reference.

)

Thanking You,

Your Sincerely,

Signature: (

From :-

Date:-

To, TRIMBHAK INVESTMENT AND FINANCE SERVICES PVT. LTD. 803/804,903,UNIQUE TOWER,GAIWADI STREET, OFF S.V. ROAD, NEAR KAMAT CLUB GOREGAON WEST, MUMBAI 400 104

Dear Sir,

Sub :- Activation of Client Account Code.

Ref:- Client Code:-

I/We would like to inform you that I/We have not done trade for more than 12 months, hence my client account has been marked as "Dormant". I/we would like to request you to activate my aforementioned client code with you. I /we am/are herewith confirm/declare that my/our address, Bank account, Demat account, mobile no, and email id is not changed/changed.

I/we am/are providing herewith following details with duly proof. (Applicable only if there is any change)

Incase changed provide details with proof

Old Address

<u>Old Addless</u>	<u>New Address</u>

Old Bank Acct. Details

New Bank Acct. Details

Now Address

Bank Name :-	Bank Name :-
Address :-	Address :-
Acct. No. :-	Acct. No. :-

Old Demat Acct. Details	New Demat Acct. Details
DP Name :	DP Name :
DP ID:	DP ID:
Client ID:	Client ID
Mobile Number	Email id
Pls. do the needful	
Thanking you, Yours Faithfully	
SIGN OF CLIENT CLIENT NAME: ()
For	Office use only
In Person verification done by (Name of B Designation of Employee	
Signature	Date :- / / 20

CONSENT LETTER FOR RECORDING OF EMAIL AND MOBILE DETAILS

Date: _____

To M/s. TRIMBHAK INVESTMENT AND FINANCE SERVICES PVT.LTD. Address: 803/804,903,UNIQUE TOWER,GAIWADI STREET OFF.S.V.ROAD, NEAR KAMAT CLUB GOREGAON WEST MUMBAI 400 104

Sir,

Trading Code :-

This has reference to my/our trading account with you; I/we request you to arrange facility to receive Electronic Contract Notes (ECN)/communication on the below mentioned email id upon trades executed in my account. (Modification of details) - Please note that from this day; please change my email id and/or mobile number as mentioned below in your records for all future correspondences.

Email Facility	Se	rvice R	equire	ed -	YES	5	NO	
Email ID								
Email ID Owned by - Name								
Relationship with Client		Self		Spouse		Depe	ndent Children	Dependent Parent
Signature of the Client	1							
SMS Facility	Se	rvice R	equire	ed -	YES	5	NO	
Mobile Number								
Mobile No Owned by - Name								
Relationship with Client	-	Self		Spouse		Deper	ndent Children	Dependent Parent
Signature of the Client	1							

*Please specify the Name in case email id and/or Mobile Number is other than that of the client himself/herself.

In this regard we state the following:

- This is to further confirm that it will be my/our responsibility that my/our Email ID and/or Mobile Number are active and the relevant Inbox is not full.
- I/we undertake that any change in my/our Email ID and/or Mobile Number shall be communicated to you in writing through a physical letter.
- I/we agree that this authority shall be valid, until it is revoked by me/us at anytime by giving a written notice to M/s. TRIMBHAK INVESTMENT AND FINANCE SERVICES PVT.LTD..

<u>ر_____</u>

Signature of Client

Name of the Client



Trimbhak Investment & Finance Services Put. Ltd.

Share & Stock Broker (Member : National Stock Exchange (I) Ltd.) (Member : Bombay Stock Exchange Ltd.) CIN No. : U67120TG1995PTC019232 803/804/903, Unique Tower, Gaiwadi Street, Off S. V. Road, Goregaon (West), Mumbai - 400 104. Tel. : 022-4056 6800 / 2876 3962 / 2876 4353 Fax : 022-4056 6801

Nomination Form

[Annexure A to SEBI circular No. SEBI/HO/MIRSD/MIRSD_RTAMB/P/CIR/2022/23 dated February 24, 2022 on Nomination for Eligible Trading and Demat Accounts – Extension of timelines and relaxations for existing account holders]

	TM / DP N Addr			(To be		RM F('N singly or j	ointly	?)						
Di	ate D D	M M Y Y	Y Y UCC.	DP ID	Ι	N					Client ID								
												-	-	-	_		-	-	
I/V	We wish to make	a nomination. [As per	details given below	·]															
No	mination Details																		
	/e wish to make a / our death.	nomination and do he	ereby nominate the	following	perso	on(s) w	ho sha	ll rece	eive all	the as	sets held in	n my	/ our	acc	ount	in t	he e	ven	t of
	nination can be ninees in the acco	e made upto three ount.	Detail	s of 1 st No	mine	ee		Detai	ls of 2'	nd Nom	inee		Deta	ils o	f 3 ^{re}	¹ No	min	ee	
1	Name of the nor	ninee(s) (Mr./Ms.)																	
2	Share of each Nominee	Equally [If not equally, please specify			_	%					%							%	•
3		percentage]	Any odd lot aft	er division	i shai	ll be tro	insferr I	ed to	the firs	t nomi	nee mentic	oned i I	in the	e for.	m.				
	Relationship W If Any)	ith the Applicant (
4	Address of Nom	inee(s)																	
	City / Place: State & Country:			-						_						-			
		PIN Code																	
5	Mobile / T nominee(s) #	elephone No. of																	
6	Email ID of nor	ninee(s) #																	
7	Nominee Identi [Please tick any and provide deta	fication details # one of following ils of same]																	
Sr. No	os. 8-14 should be	e filled only if nomine	ee(s) is a minor:																
8	Date of Birth {in nominee(s)}	n case of minor																	

Page **3** of **4**

Regd. Off.: 47, Jawahar Nagar Colony, 1-8-64, Prenderghast Road, Secunderbad-500 003. Tel.: (040) 2784 1168 Telefax: (040) 6648 3814



Trimbhak Investment & Finance Services Put. Ltd.

Share & Stock Broker (Member : National Stock Exchange (I) Ltd.) (Member : Bombay Stock Exchange Ltd.) CIN No. : U67120TG1995PTC019232 803/804/903, Unique Tower, Gaiwadi Street, Off S. V. Road, Goregaon (West), Mumbai - 400 104. Tel. : 022-4056 6800 / 2876 3962 / 2876 4353 Fax : 022-4056 6801

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	TM / DP N Addr			(To be		RM F('N singly or j	ointly	?)						
Di	ate D D	M M Y Y	Y Y UCC.	DP ID	Ι	N					Client ID								
												-	-	-	_		-	-	
I/V	We wish to make	a nomination. [As per	details given below	·]															
No	mination Details																		
	/e wish to make a / our death.	nomination and do he	ereby nominate the	following	perso	on(s) w	ho sha	ll rece	eive all	the as	sets held in	n my	/ our	acc	ount	in t	he e	ven	t of
	nination can be ninees in the acco	e made upto three ount.	Detail	s of 1 st No	mine	ee		Detai	ls of 2'	nd Nom	inee		Deta	ils o	f 3 ^{re}	¹ No	min	ee	
1	Name of the nor	ninee(s) (Mr./Ms.)																	
2	Share of each Nominee	Equally [If not equally, please specify			_	%					%							%	•
3		percentage]	Any odd lot aft	er division	i shai	ll be tro	insferr I	ed to	the firs	t nomi	nee mentic	oned i I	in the	e for.	m.				
	Relationship W If Any)	ith the Applicant (
4	Address of Nom	inee(s)																	
	City / Place: State & Country:			-						_						-			
		PIN Code																	
5	Mobile / T nominee(s) #	elephone No. of																	
6	Email ID of nor	ninee(s) #																	
7	Nominee Identi [Please tick any and provide deta	fication details # one of following ils of same]																	
		Signature PAN aving Bank account dentity ID																	
Sr. No	os. 8-14 should be	e filled only if nomine	ee(s) is a minor:																
8	Date of Birth {in nominee(s)}	n case of minor																	

Page **3** of **4**

Regd. Off.: 47, Jawahar Nagar Colony, 1-8-64, Prenderghast Road, Secunderbad-500 003. Tel.: (040) 2784 1168 Telefax: (040) 6648 3814

TRIMBHAK INVESTMENT AND FINANCE SERVICES PVT.LTD.

FATCA-CRS Annexure for Individual Accounts (including Sole Proprietor)

Details under FATCA and CRS (see instructions)

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

Particulars	Details
Name of the Applicant	
Customer ID	
Father's Name (mandatory if PAN not provided)	
Spouse's Name (optional)	
Gender	🗖 Male 🛛 Female 🗖 Others
Permanent Account Number (PAN)	
Aadhar ID (optional)	
Identification Type (Name of Document(s) submitted as	
proof of identity)	
Identification Number (of proof of identity)	
Occupation Type (Service, Business, Others-please	
specify)	
Date of Birth (in DD/MM/YYYY format)	
Nationality	
City of Birth	
Country of Birth	
Residence address for tax purposes (include City,	
State, Country & Pin code)	
Address Type	Residential & Business Residential
	Registered Office Business

Tax residence declaration (tick any one, as applicable)

I am a tax resident of India and not resident of any other country **OR**

I am a tax resident of the country/ies mentioned in the table below

Please indicate ALL the countries 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

 $^{
m \%}$ In case Tax Identification Number is not available, kindly provide functional equivalent $^{
m S}$

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	

Coporate Office : 803/804,903[,] Unique Tower,Off S.V Road,Gaiwadi Street,Goregaon West,Mumbai 400062 Tel No.: 022-4056 6800 / 817 Fax : 022-40566801 Email : tifsl@hotmail.com



RIMBHAK INVESTMENT AND FINANCE SERVICES PVT.LTD.

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 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 relationships with Edelweiss 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.

FATCA-CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

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

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia					
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United					
	States of America nor a resident for tax purposes;					
	2. Non-US passport or any non-US government issued document					
	evidencing nationality or citizenship (refer list below); AND					
	3. Any one of the following documents:					
	Certified Copy of "Certificate of Loss of Nationality or					
	Reasonable explanation of why the customer does not have such a					
	certificate despite renouncing US citizenship; or Reason the customer did					
	not obtain U.S. citizenship at birth					
Residence/mailing address in a	Self-certification that the account holder is neither a citizen of United					
country other than India	States of America nor a tax resident of any country other than India; and					
	Documentary evidence (refer list below)					
Telephone number in a country	If no Indian telephone number is provided					
other than India	Self-certification that the account holder is neither a citizen of United					
	States of America nor a tax resident of any country other than India; and					
	Documentary evidence (refer list below)					
	If Indian telephone number is provided along with a foreign country telephone number					
	1. Self-certification that the account holder is neither a citizen of United					
	States of America nor a tax resident for tax purposes of any country other					
	than India; OR					
	2. Documentary evidence (refer list below)					
Standing instructions to	Self-certification that the account holder is neither a citizen of United					
transfer funds to an account	States of America nor a tax resident of any country other than India; and					
maintained in a country other	Documentary evidence (refer list below)					
than India (other than						
depository accounts)						

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*

2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

Coporate Office : 803/804,903[,] Unique Tower,Off S.V Road,Gaiwadi Street,Goregaon West,Mumbai 400062 Tel No.: 022-4056 6800 / 817 Fax : 022-40566801 Email : tifsl@hotmail.com