



# बैंक ऑफ बड़ौदा Bank of Baroda

Central Back Office D. P. Operations, UTI Tower, 2nd Floor, G N Block, Bandra Kurla Complex, Mumbai - 400 051.

## APPLICATION FORM FOR OPENING A DEMAT ACCOUNT

(For Entities Other than Individuals)

CDSL

(To be filled by the Depository Participant)

Application No.	DP Internal Reference No.	Date	D	D	M	M	Y	Y	Y	Y								
DP ID	1	3	0	1	8	7	0	0	Client ID									

(To be filled by the Depository Participant)

We request you to open a Demat Account in our name as per the following details :

Name																		
Search Name																		
Correspondence Address																		
City						State												
Country						PIN												
Telephone No.						Fax No.												
PAN																		
E-mail ID																		
Registered Office address (If different from Correspondence Address)																		
City																		
Country						State												
Telephone No.						PIN												
E-mail ID						Fax No.												

### Other Holders - Second Holder Details

First Name																		
Middle Name																		
Last Name																		
Father / Husband Name																		
Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other										Suffix							
Permanent Address																		
City						State												
Country						PIN												
PAN																		
Date of Birth	D	D	M	M	Y	Y	Y	Y										
E-mail ID																		
Telephone No.				Fax No.				Mobile No.										

### Other Holders - Third Holder Details

First Name														
Middle Name														
Last Name														
Father / Husband Name														
Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other										Suffix			
Permanent Address														
City							State							
Country							PIN							
PAN														
Date of Birth	D	D	M	M	Y	Y	Y	Y						
E-mail ID														
Telephone No.					Fax No.					Mobile No.				

<b>Type of Account</b> (Please tick whichever is applicable)															
<b>Status</b>										<b>Sub - Status</b>					
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)										<b>To be filled by the DP</b>					
Date of Incorporation	D	D	M	M	Y	Y	Y	Y							
SEBI Registraion No. (If Applicable)							SEBI Registration date	D	D	M	M	Y	Y	Y	Y
ROC Registration No. (If Applicable)							ROC Registration date	D	D	M	M	Y	Y	Y	Y
RBI Registration No. (If Applicable)							RBI Approval Date	D	D	M	M	Y	Y	Y	Y
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify)														
I/We authorise you to receive credits in my / our account without any instruction from me/us.								(Automatic Credit) <input type="checkbox"/> Yes <input type="checkbox"/> No							
Account Statement Requirement	<input type="checkbox"/> Daily			<input type="checkbox"/> Weely			<input type="checkbox"/> Fortnightly			<input type="checkbox"/> Monthly					
Do you wish to receive dividend / Interest directly in to your bank account given below through ECS ?								<input type="checkbox"/> Yes <input type="checkbox"/> No							

### Bank Details (Dividend Bank Details)

Bank Code (9 digit MICR (code))																			
Bank Name																			
Branch																			
Bank Address																			
City					State					Country					PIN				
Account number																			
Account Type	<input type="checkbox"/> Saving			<input type="checkbox"/> Current			<input type="checkbox"/> Cash Credit			<input type="checkbox"/> Others (Specify)									

- (i) Photocopy of the cancelled cheque having the name of the account holder where the cheque book is issued, (or)  
 (ii) Photocopy of the Bank Statement having name and address of the BO and not more than 4 months old, (or)  
 (iii) Photocopy of the Passbook having name and address of the BO, (or)  
 iv) Letter from the Bank.
- ∞ In case of option (ii), (iii) and (iv) above, MICR code of the branch should be present / mentioned on the document and it should be **self-certified by the BO.**

**For OCBs**

Foreign Address											
City		State									
Country		PIN									
Telephone No.		Fax No.									
E-mail ID											
Indian Address											
City		State									
Country		PIN									
Telephone No.		Fax No.									
E-mail ID											
Currency											
RBI Reference No.		RBI Approval Date	D	D	M	M	Y	Y	Y	Y	

**Clearing Members Details (To be filled by CMs only)**

Name of the Stock Exchange	
Name of the CC / CH	
Trading Id	
Clearing Member ID	

<b>Name *</b>	_____
* In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.	

**Additional Details :**

<b>SMS Alert Facility</b>	<input type="checkbox"/> Yes	MOBILE NO. +91 _____ Refer to Terms & Conditions given as <b>Annexure - A</b>	<input type="checkbox"/> No
<b>easi</b>	<input type="checkbox"/> Yes	If yes, please register yourself for "easi" facility on CDSL's website <a href="http://www.cdslindia.com">www.cdslindia.com</a> and submit your registration form to branch DP duly signed by account holder/s or contact your branch DP for details. [Facility through CDSL's website : <a href="http://www.cdslindia.com">www.cdslindia.com</a> wherein a BO can view his ISIN balances, transactions and value of the portfolio online.	<input type="checkbox"/> No

**Details For Joint - Second Holder**

Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify)
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Occupation	Service { <input type="checkbox"/> Central Govt. <input type="checkbox"/> State Govt. <input type="checkbox"/> Public / Private Sector <input type="checkbox"/> NGO <input type="checkbox"/> Statutory Body} <input type="checkbox"/> Professional <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (Specify) _____
Nature of business : (Products / services provided)	

**Details For Joint - Third Holder**

Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (specify)
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Occupation	Service { <input type="checkbox"/> Central Govt. <input type="checkbox"/> State Govt. <input type="checkbox"/> Public / Private Sector <input type="checkbox"/> NGO <input type="checkbox"/> Statutory Body} <input type="checkbox"/> Professional <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Others (Specify) _____
Nature of business : (Products / services provided)	

I/We have read the DP-BO agreement (DP-CM agreement for BSE Clearing Member Accounts) including the schedules thereto and the terms & conditions and agree to abide by and be bound by the same and by the Bye Laws 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.

	First / Sole Authorised Signatory	Second Authorised Signatory	Third Authorised Signatory
Name			
Designation			
Signature			
Passport size Photograph	(Please sign across the Photograph)	(Please sign across the Photograph)	(Please sign across the Photograph)

In - Person verification by Branches DP of Bank of Baroda

Signature/s verified. Identity of the applicant/s verified and signature/s obtained in my presence.	
Name / Designation / Signature Under Stamp of Bank of Baroda with Signature No. / EC No.  Place : _____ Date : _____	

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(Perforated card)

DP ID										Client ID							
First Authorised Signatory							Second Authorised Signatory							Third Authorised Signatory			
Name																	
Specimen Signature																	

**Instructions for the Applicants / BOs for account opening**

- Signatures can be in English or Hindi or any of the other languages contained in the 8th schedule of the Constitution of India. Thumb impressions and signatures other than the above mentioned languages must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate under his/her official seal.
- Signatures should be preferably in black ink.
- Details of the Names, Address and Tel Number(s), etc., of the Magistrate / Notary Public/Special Executive Magistrate are to be provided in case of attestation done by them.
- In case of additional signatures (for accounts other than individuals), separate annexures should be attached to the application form.
- In case of applications under a Power of Attorney, the relevant Power of Attorney or the certified and duly notarized copy thereof, must be lodged along with the application.
- All correspondence / queries shall be addressed to the first / sole applicant.
- Strike off whichever is not applicable.

# बैंक ऑफ़ बड़ौदा *Bank of Baroda*

Central Back Office D. P. Operations, UTI Tower, 2nd Floor,  
G N Block, Bandra Kurla Complex, Mumbai - 400 051.

## DOCUMENTS REQUIRED FOR OPENING A NON-INDIVIDUAL DEMAT ACCOUNT

- Account Opening Form (Non-Individual)
- Agreement (Rs. 100/- Non - Judicial Stamped paper of franking)
- PAN Card of the company (must be verified from Income Tax web site).
- PAN Card of all Signatories (must be verified from Income Tax web site).
- Address Proof of the Company or holders.
- Leaf of copy of MICR cheque.
- Paste latest passport size photograph on A/c opening form and sign across the photograph.

Note : Branch DP must verify the copy of documents with the original under stamp & signature of DP official.

## LIST OF ADDITIONAL DOCUMENTS REQUIRED TO OPEN A DEMAT ACCOUNT

### 1) CORPORATE : All mandatory documents as above

- Memorandum and Articles of Association.
- Certified True Copy of the **Board Resolution**, duly certified by Managing Director / Company Secretary, authorising opening of a Demat Account and specifying name of persons authorized to open and operate the Demat account. It should specify the manner of operation of the account by the authorized persons.

**Name of authorized signatories, their designation, photographs and their specimen signatures duly verified by the Managing Director or the Company Secretary and duly authenticated by Branch Manager**

### 2) REGISTERED SOCIETY : All mandatory documents as above

- Copy of Certificate of Registration under the Societies Registration Act, 1860.
- List of Managing Committee members.
- Certified true copy of Resolution of the Managing Committee for persons authorised to open and operate the account and specifying the manner of operation of the account.
- Names of the Authorised signatories, designation, photograph (with signatures across the face of the photograph) and their specimen signatures duly authenticated by the Chairman/Secretary & Branch Manager.
- Copy of Society's Rules and Bye Laws duly certified by the Chairman / Secretary.

### 3) UNREGISTERED SOCIETY : All mandatory documents as above

- The account should be opened in the names of the members under "Individual" category (maximum three persons.)
- All the documents as applicable for account opening under individual category should be obtained.
- The proof of address / identity documents of the individual members should be obtained for A/c opening.

### 4) REGISTERED TRUST : All mandatory documents as above

- Account to be opened in the name of the Trust.
- Trust Deed and Rules.
- List of Members on the Board of Trustees.
- Certificate of Registration of Trust under the Public Trust Act or Societies Registration Act.
- Certified true copy of Board Resolution to open the Demat account and specifying the persons authorised by the Board to act as Authorised Signatory(ies) to operate the demat account.
- Names of the Authorised Signatories, Designation, photograph (with their signatures across the face of the photograph) and their specimen signatures duly verified by the Managing Trustee and Branch Manager.

### 5) UNREGISTERED TRUST : All mandatory documents as above

- A/c. should be opened in the names of individual trustees (maximum three) under "Individual" category.
- The board of trustees shall specify the names of the trustees who shall hold / operate the demat account.
- The proof of address and proof of identity documents of the trustees should be obtained for A/c opening.

(FORMAT - BOARD RESOLUTION ON COMPANY'S LETTERHEAD)

CERTIFIED TRUE COPY OF THE BOARD RESOLUTION PASSED IN THE MEETING OF THE BOARD OF DIRECTORS  
OF \_\_\_\_\_ M/S

HELD ON \_\_\_\_\_ DAY OF \_\_\_\_\_ AT THE \_\_\_\_\_ OFFICE OF THE COMPANY.

"RESOLVED that a Depository Account in the name of

M/s \_\_\_\_\_ be opened with Bank of Baroda, Depository Participants, Central Back Office DP Operations, UTI Tower, 2nd Floor, GN Block, Bandra Kurla Complex, Mumbai - 400 051 and the said bank be and is hereby authorized to honour instruction for Demat Sale, Purchase, Pledge, hypothecation of Shares / Securities / Debt instruments made on behalf of the Company by \_\_\_\_\_ OF THE DIRECTORS namely \_\_\_\_\_ and to act on any instruction so given relating to the account/transaction of the Company."

"**FURTHER RESOLVED** that the above resolution be communicated to the said Bankers and remain in force until the same is cancelled or modified by the Board of Directors by another resolution and extract whereof forwarded to the bankers of the Company, in writing."

**THAT** the bank be furnished with a list of the names of the Directors of the Company and a copy of the Memorandum and Articles of Association and be from time to time informed by notice in writing of any change, which may take therein and which will entitle the Bank to act upon any such notice until the receipt of further notice.

For M/s \_\_\_\_\_

(SIGNATURE OF THE CHAIRMAN OF THE COMPANY)