



**IFCI FINANCIAL SERVICES LIMITED**  
(Subsidiary of IFCI Ltd)

**Trading Account Reactivation Form-Individual / Non-Individual**

To,  
**IFCI FINANCIAL SERVICES LTD.**  
Kamak Towers, 4th Floor,  
Plot No. 12-A (SP) Thiru-Vi-Ka Industrial Estate,  
Ekkatuthangal, Guindy, Chennai 600032  
Ph : 044-69298400

**Date:** \_\_\_\_\_

**Ref: Client Code:** \_\_\_\_\_ **Name:** \_\_\_\_\_

Dear Sir,

This is to inform you that I am / we are maintaining the above-mentioned trading account with you. However, as I /we have not been transacting for a long period, you have marked the same as dormant.

As I / we would like to start trading under the said account once again, you are requested to re-activate the following Exchange/Segments. Accordingly, I/We do hereby put my/our signature against the respective Segment & Exchange.

**TRADING PREFERENCES**

**Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.**

| Exchanges                | NSE, BSE                 |                          |          |                          |
|--------------------------|--------------------------|--------------------------|----------|--------------------------|
| All Segments             | Cash /Mutual Fund        | F&O                      | Currency | Debt                     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | N.A.     | <input type="checkbox"/> |

**If you do not wish to trade in any of segments / Mutal Fund, please mention here**

| <b>i Income Range-Individuals (Please tick in the appropriate Box)</b> | <b>ii Income Range NON Individuals (Please tick in the appropriate Box)</b> |
|------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> Below Rs. 1 lac                               | <input type="checkbox"/> Below Rs. 20 lacs                                  |
| <input type="checkbox"/> Rs. 1 lac to Rs. 5 lacs                       | <input type="checkbox"/> Rs. 20 lacs to Rs. 50 lacs                         |
| <input type="checkbox"/> Rs. 5 lac to Rs. 10 lac                       | <input type="checkbox"/> Rs. 50 lacs to Rs. 1 crore                         |
| <input type="checkbox"/> Rs. 10 lacs to Rs. 25 lacs                    | <input type="checkbox"/> More than Rs. 1 crore                              |
| <input type="checkbox"/> More than Rs. 25 lacs                         |                                                                             |

**I am / we are enclosing a copy of my/our PAN card; Latest address proof and Bank Proof dulyself-attested.**

**I/we hereby declare and confirm that there is no change in my KYC details updated with you and I /we undertake to inform you of any changes therein, immediately.**

Address \_\_\_\_\_

Mobile Number \_\_\_\_\_ Email Id: \_\_\_\_\_

**I hereby declare that the aforesaid mobile number and/ or E-mail ID belongs to:**

Mobile: ☐ Me or ☐ My family (☐ Spouse, ☐ Dependent children and ☐ Dependent parent). Email:

☐ Me or ☐ My family (☐ Spouse, ☐ Dependent children and ☐ Dependent parent).

**Client's Signature :->** \_\_\_\_\_

Occupation: ☐ Private Sector ☐ Business ☐ Retired ☐ Public Sector ☐ Professional  
☐ Housewife ☐ Govt. Service ☐ Student ☐ Agriculturist  
☐ Others (Please Specify) \_\_\_\_\_

Nomination:

- ☐ I/We wish to make a Nominate (Please use the Annexure A)  
☐ I/We do not wish to Nominate (Please use the Annexure B) Marital

status: Single / Married

**BROKERAGE SLABS FOR CASH & DERIVATIVES SEGEMENTS**

| CASH SEGMENT                                             | Slab %           |                | Minimum         |             |
|----------------------------------------------------------|------------------|----------------|-----------------|-------------|
| Brokerage Slab                                           | First Leg        | Second Leg     | First Leg       | Second Leg  |
| Delivery based                                           |                  | Not Applicable |                 |             |
| Daily Square Up                                          |                  |                |                 |             |
| EQUITY DERIVATIVES SEGMENT                               | Futures %        |                | Minimum         |             |
| Brokerage Slab                                           | First Leg        | Second Leg     | First Leg       | Second Leg  |
| Daily Square Up                                          |                  |                |                 |             |
| Settlement Square Up                                     |                  |                |                 |             |
| Index                                                    |                  |                |                 |             |
| EQUITY DERIVATIVES SEGMENT -SLAB % FOR OPTIONS (PREMIUM) | Option Maximum % |                | Minimum Per Lot | Maximum Rs. |
| Brokerage Slab                                           | First Leg        | Second Leg     | First Leg       | Second Leg  |
| Daily Square Up                                          |                  |                |                 |             |
| Settlement Square Up                                     |                  |                |                 |             |
| Index                                                    |                  |                |                 |             |
| CURRENCY DERIVATIVES SEGMENT SLAB % FOR FUTURES (STRIKE) | Futures %        |                | Minimum Rs.25/- |             |
| Brokerage Slab                                           | First Leg        | Second Leg     | First Leg       | Second Leg  |
| Daily Square Up                                          |                  |                |                 |             |
| Settlement Square Up                                     |                  |                |                 |             |
| Expiry                                                   |                  |                |                 |             |

Thanking you, yours

faithfully,

Client's Signature :-> \_\_\_\_\_

| For office Use Only |                                                               |  |
|---------------------|---------------------------------------------------------------|--|
| Sr. No.             | Particulars                                                   |  |
| 1                   | Originals verified and Self-Attested Document copies received |  |
| 2                   | In-person Verification (IPV) details:                         |  |
| a)                  | Name of the person doing IPV                                  |  |
| b)                  | Employee code                                                 |  |
| c)                  | Designation                                                   |  |
| d)                  | Name of Organization                                          |  |
| e)                  | Signature of the person doing IPV                             |  |
| f)                  | Date                                                          |  |

**Note: - In case of any changes in KYC details, please provide the Annexure J for individual / Annexure K for non-individual along with Identity and Address Proof duly self-attested by client, without which the account cannot be reactivated.**