

AUTHORISATION FOR OPERATING THE TRADING ACCOUNT

(The Client should read the details stated below and cancel / strike out this option if if does not seek to avail)

Date:

To,

CENTRUM FINVERSE LIMITED (CFL)

Unit No 1-A, First Floor, Central Plaza,
166 C.S.T Road, Kalina,
Santacruz (East) Mumbai – 400098

Dear Sir,

Sub: Authorisation for operating the trading account

I/we applied for opening a trading account in the name of _____
I/we would hereby appoint _____ who is my/our _____ as my/our
authorized representative to undertake the following activities in my/our trading account

1. Place orders in my/our trading account
2. Receive and acknowledge contract notes
3. Handover cheques from my/our bank account as stated in the Client Registration forms against my/our dues if any.

I/we accept that all obligations arising out of the trading account being operated by my/our above mentioned authorized representative would be binding on me/us.

I/we also undertake to indemnify CFL for all dues, loses penalties and incidental expenses relating to and arising out of the transactions executed by _____ in my/our above mentioned trading account.

In case if I/we wish to withdraw this mandate I/we shall inform CFL in writing and acknowledge the request from CFL at least 7 working days from the date of withdrawal.

Yours faithfully,

Client's Signature

Authorised Representative Signature

Name of Client's: _____

Name of Authorised Representative _____

PAN No.: _____

Address: _____

Mobile No.: _____

Email Id: _____

Encl : 1. PAN Card Copy of Authorised Representative
2. Address Proof of the Authorised Representative