

Annexure 1

Membership Form

For Office Use Only	A recent photograph
Registration Number :	in light background of the signatory
Registered Office :	of the signatory
Fax :	Please affix and sign on the photograph
Email :	
CATEGORY	
Broker Member Other	
Zebacus Private Limited,	
Dear Sir,	
I/We request you to register	(Name of the company)
as a Member of Zebacus. Our details required for reg	gistration are as follows:
DETAILS OF FEE DEPOSITED	
Amount	Bank:
Draft No /Deposit Voucher No.	Date
	D D M M Y Y Y
TO BE FILLED BY INDIVIDUALS	
Name Mr. Mrs.	
Profession	Date of Birth
	D D M M Y Y Y



Passport No. / National Id No.
State:
House No. (Optional):
erent from the home address)
State:
House No. (Optional):
NLY
Fax No:
Website
State:
House No. (Optional):
erent from the above)
State:



Name of the chairman/Managing F	Partner/Proprietor and Directors/Partners
TO BE FILLED BY APPLICA	ANTS IN ALL CATEGORIES
N ()	
Name of other Exchange(s) in which	th the applicant is/was a Member
Name of other Exchange(s) in which	ch any of the director/partner/proprietor is/was a Member
PAN/TIN	
PAN/TIN No	
Net Worth of the Applicant	as on
DETAILS OF BANK ACCOU	JNT
Name at Bank:	
Name of Bank:	Branch:
Account No.	
DECLARATIONS	
a) Whether any court case is	pending against the applicant or directors/promoters of the applicant?
	Yes No
b) Whether the applicant or	the directors/promoters of the applicant is involved in any financial
irregularities and subject t	o any disciplinary proceedings?
	Yes No



c) Whether the applicant or directors/promoters of the applicant were subject to any disciplinary
proceedings in any other exchange?
Yes No
(If answer is yes in clause (a) and (b) above, please furnish the details of such financial irregularities and/or
disciplinary action in a separate sheet)
We hereby declare that the information furnished in this application is true and correct and the documents
annexed with this application are true copies of its original. We undertake to inform the Exchange, in writing,
immediately of any changes in the information furnished by us in this application. The Exchange will not be liable
for any direct/indirect consequences arising on account of non-intimation changes in the above information.
I/We agree to abide by the Rules of the Exchange.
Signature of Applicant /Authorized Representation
Place:
D D M M Y Y Y
(Institutional Seal)
(Institutional Seal)
FOR OFFICE PURPOSE:
Member Code:
Verified by: Authorized by: (Name)



DOCUMENTS TO BE SUBMITTED ALONG WITH APPLICATION

1.		Bio-data of the applicant or directors/partners/authorized representative along with photo	
2.		Letter of Undertaking	
3.		Financial Credibility Certificate [FCC] provided by bank.	
4.		Proof of identity - copy of National ID/passport/driving license.	
5.		Proof of address - utility bill/rental agreement	
6.		Copy of latest filed tax return	
7.		PAN/TIN Certificate	
8.		Net Worth Certificate issued by a Registered Auditor/CA	
Additional Documents Required for Institutional Member			
9.		Company Registration Certificate	
10.		Letter Authorizing the authorized person	
11.		Resolution Authorizing the Institution to apply for Membership, execution of Zebacus-MM agreement and authorized signatory	
12.		Copy of MOA & AOA	
13.		List of directors certified by Co Sec./Notary Public/Registered Auditor	

Annexure 1 5