## Declaration for availing of Basic Services Demat Account (BSDA) facility

То,											
Depository Participant Name Address		Da	ite:	. [						]	
Dear Sir / Madam,											
☐ I / We wish to avopening form	vail the BSDA facility for the new accoun	t for	which	we h	ave	subn	nitted	<b>my /</b>	our	accou	ınt
☐ I / We wish to avail the BSDA facility for my / our below mentioned demat account number											
DP ID   Client ID											
	Name	T				P/	AN				
Sole/First Holder											
Second Holder											
Third Holder									•	_	
								<u> </u>			
I/We have read and u	nderstood the regulatory (SEBI) guidelii	nes f	or ope	enina	а В	asic :	Servi	ces De	emat	: Acco	ount
	ply with the aforesaid guidelines from ti		-	_							
	y any such authority for BSDA facility fro										
-							_				
·	I under BSDA facility does not meet the	-	=			-	-	=			
•	uthority at any point of time, my / our I										
account without further reference to me/us and will be levied charges as applicable to regular accounts as											
informed by the DP.											
I the first / Cole hold	er also hereby declare that I do not ha	340 /	prop	nce t	o ba	וב ביי	nu ot	her d	omat	- 2000	unt
,	·	3VC /	prop	U3C 1	U Ha	ve ai	ily Ot	IICI UI	ciliat	, accc	Juiit
across depositories as a	a first / sole holder.										
	Signature	1									
Sole/First Holder		}									
Second Holder		1									
Third Holder		1									
======================================											
Received BSDA declaration fo	orm from:										
DP ID	Client ID	_ <sub>T</sub> _	T .			Т		$\overline{}$			
Nome	<del>                                     </del>										
NameAddress	<del> </del>					_					

**Depository Participant Seal and Signature** 

Date: