

NEW EXCHANGE/SEGMENT ACTIVATION REQUEST FORM

To,
MNM STOCK BROKING PVT LTD
101-102, J P Complex, Opp. C N Vidhyalay, Nr.
Ambawadi Circle, Ambawadi, Ahmedabad.380 015

Dear Sir / Madam,

Sub.: New Exchange / Segment activation

I / We _____ a client of Mnm Stock Broking Pvt Ltd . with
registered client code _____ hereby request you to kindly activate the new Exchange /Segment as opted /
Signed by me herein below.

Brokerage & other charges will be applicable as per your existing & below mentioned in the form.

Please sign the relevant box to activate the exchange /segment as required.

BSE/NSE (Cash Segment)	*NSE F&O Derivative Segment	*BSE Currency Derivatives Segment	MCX Commodity Derivative Segment

If you do not wish to trade in any of segments / Mutual Fund, please mention here. _____

TRADING BROKERAGE SLAB

Equity	1ST Leg		2ND Leg	
	%age	Min.	%age	Min.
Intraday Cash				
Delivery				
Derivatives ☐ Equity ☐ Currency ☐ Commo	1ST Leg		2ND Leg	
Future				
Option (Per Lot –in Rs.)				

Signature of Client





101-102 J P COMPLEX, NEAR AMBAWADI
CIRCLE, AMBAWADI AHMEDABAD 380015
PH NO. 079 26464676/26563221
MAIL ID mnmcare@mnmmshares.com

☐ DEMAT / ☐ TRADING ☐ KRA ☐ CKYC

ACCOUNT DETAILS ADDITION / MODIFICATION / DELETION REQUEST FORM

Application No.	Date :
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Please fill all details in BLOCK LETTERS in ENGLISH

DP : 12081300	CLIENT ID:	TRADING CODE:
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I/We request you to make the following additions / modifications / deletions to my/our account in your records.

ADDITION ☐	MODIFICATION ☐	DELETION ☐	BANK PRIMARY (Default) ☐
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Address: ☐ Correspondence ☐ Permanent

Addition/ Modification	Existing Details	New Details
ADDRESS		
BANK DETAILS		
MOBILE NO.		
EMAIL ID.		
SIGNATURE		
DP ID.CLIENT ID		
BROKERAGE SLAB		
INCOME SLAB		
OTHER		

CONSENT LETTER TO UPDATE MOBILE NUMBER AND EMAIL ID IN DEMAT AND TRADING ACCOUNT

MOBILE NO	MY Self ☐	Spouse ☐	Son/daughter ☐	Father /mother ☐	Director/ HUF ☐	Not available ☐
EMAIL ID	MY Self ☐	Spouse ☐	Son/daughter ☐	Father /mother ☐	Director/ HUF ☐	Not available ☐
NAME OF PERSON (MOBILE NO)						
NAME OF PERSON (EMAIL ID)						

	First/Sole Holder	SECOND HOLDER	THIRD HOLDER
NAME			
SIGNATURE			