

Date:-

To,

SSJ Commodities Private Limited

1st Floor, Merchant Chamber,
41, New Marine Lines, Opp. Patkar Hall,
Mumbai- 400 020

Sub:- Re-KYC updation for inactive account.

Ref: Client Name : _____
Client Code : _____

Dear Sir/Madam,

I/we am/are having trading account with you vide said unique client code. In this regard, you are requested to reactivate my/our trading account.

I/we hereby undertake that:

- o There are no changes in respect of my/our Address, Bank account, E-mail ID and Mobile number details, as provided to you earlier. Further, there is no material change in the other information provided to you in KYC Form.

OR

- o Relevant changes in KYC details are separately given for updation along with required supporting documents.

Gross Annual Income	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs-1 Crore <input type="checkbox"/> More than 1 Crore Networth as on date _____ Rs. _____ (networth should not be older than 1 year)
Occupation	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Govt. Service <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others _____ Nature of business/Profession: _____
PEP	Are you a Politically Exposed Person (PEP) or Related to PEP <input type="checkbox"/> No <input type="checkbox"/> Yes
FATCA Declaration	Are you a tax resident of any country other than India? <input type="checkbox"/> No <input type="checkbox"/> Yes

Declaration	Signature of Client
I/we declare that the information given above is true to my/our knowledge. Place : _____ Date : _____	

Enclosed Documents: - 1) Last 6 months Bank Statement (Mandatory) 2) _____
3) _____ 4) _____

FOR OFFICE USE ONLY

Details of Employee / Intermediary	<input type="checkbox"/> Documents verified with Originals	<input type="checkbox"/> Client Interviewed By & In-Person Verification done by	Seal / Stamp of the Intermediary
Name			
Employee/Int. Code			
Designation			
Date & Signature			