



REQUEST FORM FOR REACTIVATION OF CLIENT CODE

Date : _____

To
PARKER DERIVATIVES (INDIA) PRIVATE LIMITED. - [Member - NSE, BSE.MCX.NCDEX]
 B-71, Pariseema Complex
 Near Swagat
 CG Road
 Ellisbridge
 Ahmedabad - 380006.
 Contact No. 079-48920188
 Fax No.079-26405833

Dear Sir,

I am /We are your client having trading account with you under Unique Client Code _____ allotted to me/us since _____ (date of activation of the account) for NSE and/or BSE and/or MCX and/or NCDEX*

I/we am/are not trading in securities market through you since _____ (last trade date). However, I/we am/are desirous to start trading again through you. In this regard, you are requested to activate / reactivate my/our trading account and allow trading with immediate effect upon receipt of this form at your end as per your RMS policy.

I / We wish to trade on the following Exchange/Segments. Accordingly, I/We do hereby put my/our signature against the respective Segment & Exchange.

| Exchange | [PLEASE SIGN ONLY AGAINST THE RESPECTIVE EXCHANGE AND SEGMENT YOU WISH TO ACTIVATE / REACTIVATE YOUR CODE] | | |
|----------|---|-----------------------|----------------------|
| | CM Segment | F&O/Commodity Segment | Currency Derivatives |
| NSE | × _____ | × _____ | × _____ |
| BSE | × _____ | × _____ | × _____ |
| MCX | Not Applicable | × _____ | Not Applicable |
| NCDEX | Not Applicable | × _____ | Not Applicable |

Also, please update my/our latest e-mail id _____ and mobile no. _____ in your records.

I/we hereby undertake that I/We have completed all the KYC formalities and submitted all the required documents thereof (Proof of Identity, Address Proof, Bank Proof, PAN, etc.), at the time of opening the trading account originally and enrolling as a client with you. There are no changes in respect of my/our Address, Bank account, PAN details, as provided to you earlier. Further, there is no material change in the other information provided to you in KYC Form.

I/we declare that the information given above is true to my/our knowledge. I/we, therefore, request you that the requirement of fresh KYC may not be insisted upon.

Yours Faithfully,

Client's Code: _____ Client's Signature: x _____

Client's Name : _____ [Name of the Authorized Signatory – Designated Director/Managing Partner/Karta/Proprietor]

* strike off which ever is not applicable