



AdroitPro Advisory Ventures India (P) Ltd.

Registered Office:  
EC-158, Sector 1, Saltlake City, Near City Centre Kolkata-700064  
Tel: 033-64552600-05  
E-Mail : info@adroitadvisory.in website : www.adroitadvisory.in

AFFIX RECENT  
PASSPORT SIZE  
PHOTOGRAPH

## BUSINESS ASSOCIATE EMPANELMENT FORM

### KEY CONTACT DETAILS (Block Letters)

NAME (Mr./Ms. M/s)			
FATHER'S NAME			
PERMANENT ADDRESS (WITH PROOF)			
		PIN	
CORRESPONDENCE ADDRESS (WITH PROOF)			
		PIN	
Telephone (O)		-	(R)
Mobile			Fax
E-Mail 1		E-Mail 2	
Are you existing Sub Broker/Authorized Person with Adroit Group	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If Yes, mention SB Code	Branch Code	Sub Group	
Zone	Region		

### STATUS (Please tick anyone)

INDIVIDUALS	<input type="checkbox"/> Individuals	<input type="checkbox"/> Sole Proprietorship	
NON-INDIVIDUALS	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Society / Trust	<input type="checkbox"/> Private Limited Company
	<input type="checkbox"/> Public Limited Company	<input type="checkbox"/> Others _____	

(Please attach a copy of the MOA, Board Resolution, ASL & PAN Card)

### ADDITIONAL INFORMATION

<b>Individuals</b>	<b>Non-Individuals</b>
Date of Birth	Registration No.
	PAN No.
Educational Qualification	Date of Incorporation
PAN No.	Contact Person Name
(Please attach a copy of the PAN Card / Letter)	(Please attach a copy of the PAN Card / Letter)

### NOMINATION DETAILS FOR BROKERAGE / COMMISSION

<b>(For individuals and sole proprietorships)</b>	If Nominee is a minor
Name of Nominee	Date of Birth of Nominee
Address	Name of Legal Guardian
	Address of Legal Guardian
	Signature of Legal Guardian

**DETAILS OF YOUR BANK ACCOUNT (Brokerage cheques will contain the account details to avoid fraudulent encashment)**

Account No.  Type  Savings  Current  Others \_\_\_\_\_  
Bank  Branch  City   
Preferred Mode of receipt of brokerage :  
 By Cheque MICR   Direct credit NEFT/IFSC Code

**EXPERIENCE IN PRODUCTS**

Equity Shares  Fixed Deposits  Insurance  Mutual Funds  
 IPO/Bonds  PMS  Others \_\_\_\_\_

**AMFI/IRDA/NCFM CERTIFICATION DETAILS (Please attach a copy of the Certificate)**

AMFI Registration No.	<input type="text"/>	Passed on	<input type="text"/>	Valid upto	<input type="text"/>
IRDA Registration No.	<input type="text"/>	Passed on	<input type="text"/>	Valid upto	<input type="text"/>
NCFM Registration No.	<input type="text"/>	Passed on	<input type="text"/>	Valid upto	<input type="text"/>
Others	<input type="text"/>	Passed on	<input type="text"/>	Valid upto	<input type="text"/>

**DECLARATION**

I/We hereby declare that the information furnished is true and correct to the best of my/our knowledge and belief. I/We undertake to abide by the terms and conditions and the changes in Terms & Conditions from time to time relating to the appointment of Associates.

Place  **Signature of Applicant /**  
Date  **Authorised Signatory**

(In case of Non-Individuals, signature with stamp required)

**FOR OFFICE USE ONLY**

Documents Checked:  PAN No  Address proof  AMFI Certificate/ARN Card  Cancelled Cheque  
 For Corporates(MOA, Board Resolution, ASL & PAN Card)

Recommended By:

Branch Code  Code Number Allotted   
RM Full Name  RM Code   
RM Signature   
Approved by   
Full Name  Signature   
Category Allotted   
Date  Additional Codes Allotted(If any)  Zone/RO Code



## **TERMS AND CONDITION FOR APPOINTMENT AS BUSINESS ASSOCIATE**

- 1.The appointment of a Business Associate is at the sole discretion of AdroitPro Advisory Ventures India (P) Ltd. Appointment of Business Associates would be effective from the date of allotment of Associate Code.
- 2.The Associate is eligible for commission/brokerage as may be specified by AdroitPro Advisory Ventures India (P) Ltd. from time to time and shall form integral part of these terms and conditions. No payment will be made for any interest/expense incurred by the Associate in connection with empanelment and will not be entitled for any other benefit of whatsoever nature.
3. The commission/brokerage would be paid after receipt of the same from Registrars on allotment basis against forms bearing AVIPL code and Business Associates code as per the allotment statement received by us.
- 4.Business Associates should take consistent interest in his/her agency work and mobilize funds in the various financial instruments promoted/handled by AVIPL.
5. A Business Associate shall carry out such directions and instructions as he/she/it may be instructed/directed by AVIPL from time to time in this regard.
6. As a business associate of the company you are not entitled or authorized to collect any cash from any subagents for or on behalf of AVIPL under any circumstances.
7. This business association is not transferrable
8. Business Associates would solicit business only under his/her name and shall not issue any communication orally or in writing to his investors on our behalf unless expressly agreed to by us in working.
- 9.A Business Associate is not authorized to appoint any other party to work as Business Associate of AdroitPro Advisory Venture India (P) Ltd.
- 10.A Business Associate agrees that AdroitPro Advisory Ventures India (P) Ltd. shall be entitled to recover/adjust amounts which are wrongly paid to the Business Associate against any commission/brokerage etc.
- 11.A Business Associate who is involved in distribution of MF products must have cleared the AMFI test (Advisor Module) unless expressly agreed to by us in working. A copy of AMFI Registration Number and PAN card must be submitted by the Business Associate to AVIPL for its records and verification.



12.The performance of Business Associates would be closely monitored and those not meeting the performance criteria may be terminated at the discretion of AVIPL without any prior notice.

13.Any change in the details provided by Business Associate needs to be intimated to AVIPL immediately.

14.AdroitPro Advisory Ventures India (P) Ltd. reserve the right to vary, alter, amend, modify, add and/or delete any terms and conditions.

15.Business Associates shall not have any claim against AVIPL for any loss incurred by him/her as not anticipated and arising out of any revision in the rate of commission/brokerage or change of terms and conditions of the association.

16.Fees/commission shall be subject to tax deducted at source under the Income Tax Act, 1961 at rate as prescribed by the authority from time to time.

I/We have read and understood the above terms and conditions and agree to abide by them.

Date :

Place :

Signature of Business Associate

Witness



# Performance Chart/Notes

