

AUTHORITY LETTER IN FAVOUR OF A PARTNER(S)

(TO BE OBTAINED ON PRE-PRINTED LETTER HEAD OF THE FIRM)

To,

Relitrade Stock Broking Pvt Ltd

Relitrade House, 2nd Floor,
O Block, Mondeal Retail Park,
Near Rajpath Club, S.G. Highway,
Ahmedabad-380059

Dear Sir/Madam,

We, the partners of M/s _____ a partnership firm,
having its office at _____ hereby authorize

1. _____
2. _____
3. _____

to open a securities trading account in Capital Market Segment, F&O Segment, Currency segment and/or Retail Debt Market Segment on behalf of the Firm with **"RELITRADE STOCK BROKING PVT LTD"** for sale and purchase of shares / debentures / derivative instruments in the Capital Market Segment (CM) and/or Futures & Options Segment (F&O) and/or currency segment and/or Retail Debt market Segments (RDM) or any other segment that may be introduced by NSE/BSE/MCX in future. He/She/They is/are authorized on behalf of the firm to deal in aforesaid segments and the said Trading Members are hereby authorized to honor all instructions oral or written, given on behalf of the firm by him/her/them.

He/She/They is/are authorized to sell, purchase, transfer, endorse, negotiate documents and/or /otherwise deal through yourself on behalf of the firm. He/She/They is/are also authorized to sign, execute and submit such applications, undertakings, agreements and other requisite documents, writings and deeds as may be deemed necessary or expedient to open and operate the account and give effect to this purpose.

We also recognize that a beneficiary demat account cannot be opened with a Depository Participant in the name of the partnership firm as per depository regulations. To facilitate the operation of the above trading account with you and for the purpose of completing the securities transfer obligations, pursuant to the trading operations, we authorize you to recognize the Beneficiary Account Numberwith depository participant having DPID opened as a joint account in the name of Partners of the firm. We agree that the obligations for shares purchased and/or sold by the firm will be handled and completed through transfers to/from the above-mentioned account. We recognize and accept transfers made by you to the beneficiary account as complete discharge of obligations by you in respect of trades executed in the above trading account of the firm.

Yours Truly,

Name of firm: _____

Signature _____

Name _____

(Signature of all the Partners with the rubber stamp required)