

From _____

To,

TRADEDEAL COMMODITIES SERVICES PRIVATE LIMITED

Registered Office :- A1210, Floor No.12, Titanium City Centre, Nr. Sachin Tower, 100ft Anand Nagar Road,
Satellite, Ahmedabad - 380015, Gujarat

Correspondence Office :- Office No. 104, Plot No. 1891, Shukan Complex, Rupani Circle to Atabhai Chowk,
Bhavnagar – 364 001, Gujarat (India).

Sub:-Approval for change the Brokerage Slab.

Dear Sir,

I would like to inform you that, I don't have any objection with you for change the Brokerage Slab in my client code, please proceed for changing in brokerage procedure, my details are given below:

Brokerage Details: Revised Slab applicable dtd. _____

| | | | | | | | | | | | | | | | | | | | |
|----------------------------|------------|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Application No. | Branch/ACS | Date | | | | | | | | | | | | | | | | | |
| Account Holder's Details: | | Client Code | | | | | | | | | | | | | | | | | |
| Name of the Account Holder | | | | | | | | | | | | | | | | | | | |

Brokerage Slab:

| Particulars | Brokerage Rs. Per Crore of Turnover | Minimum Charges |
|------------------|-------------------------------------|-----------------|
| Commodity Future | | |
| Commodity Option | | |
| Delivery | | |
| Verified By | Authorized By | |
| Name : | Name : | |
| Signature | Signature | |

Note: Other Terms and Conditions remains the same as per Tariff Sheet in KYC Form

| | |
|------------------------|--|
| Name of Account Holder | |
| Signature | |