



**J. G. SHAH FINANCAL CONSULTANTS PVT. LTD.**  
**418, STOCK EXCHANGE TOWER**  
**MUMBAI - 400001.**

SEBI Reg. No INZ000209538 | Depository CDSL: IN-DP-15-2015

**COMPLAINT REGISTRATION FORM - Against Trading Member / CDSL DP**

**1. General Information**

**A. Personal Details:**

Name of the Complainant \_\_\_\_\_  
 Residential Address \_\_\_\_\_  
 (For correspondence) \_\_\_\_\_  
 \_\_\_\_\_ Pin code \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_  
 Telephone no. \_\_\_\_\_ Cell no. \_\_\_\_\_  
 E-Mail id \_\_\_\_\_  
 Permanent A/c No.(PAN) \_\_\_\_\_  
 Unique Client Code \_\_\_\_\_  
 (Allotted by Trading Member)

**B. Demat Account Details**

DP Name \_\_\_\_\_  
 DP-id \_\_\_\_\_ DP A/c no.: \_\_\_\_\_

**2. Trading member Particulars**

Name of the Trading Member J G Shah Financial Consultants Private Limited  
 SEBI Registration Number INZ000209538 / IN-DP-15-2015

**3. Nature of Complaint: (please tick relevant box)**

SN	Nature of complaint	CM*	SLB*	DP*
1	Non-Issuance of the Documents by the Trading Member / DP			
2	Non-receipt of funds / securities			
3	Non-Receipt of Funds / Securities kept as margin			
4	Non-Receipt of Corporate Benefit (Dividend/Interest/Bonus/Rights etc.)			
5	Auction clarification			
6	Close out / Square up of positions			
7	Trades executed without authorization/ consent			
8	Excess Brokerage charged by Trading Member / DP			
9	Service Related			
	a) Non/ Wrong execution of order			
	b) Opening / Closing of Account			
	c) Connectivity/ System related			
10	Others, Specify _____			

\*Segment: **CM** = Capital Market, **SLB** = Shares Lending and Borrowing, **DP** = CDSL DP



**3.A. Any other segment of the Exchange:** \_\_\_\_\_

**4. Value of Claim** (Provide the calculation/ break up of claim value): Rs. \_\_\_\_\_

**5. List of documents enclosed with the Complaint:**

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

**6. Details of Complaints taken up with Trading Member/ CDSL DP:**

- Date on which complaint taken up with trading member/DP: \_\_\_\_\_
- Copies of correspondence with the member.

**7. Detailed Description of the complaint:**


Place : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
Complainant's Signature