

**GOVERNMENT OF INDIA
FORWARD MARKETS COMMISSION
MINISTRY OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION
(DEPARTMENT OF CONSUMER AFFAIRS)**

FORM (IR-I)

**Format of the Return to be sent by the Intermediaries (Warehouse) registered with
Recognized/Registered associations**

NAME OF THE COMMODITY EXCHANGE:

Sr. No	Description	Details
1	Name of the warehouse with Code No. if any given by the Exchange	
2	Return Number(to be assigned by the Forward Markets Commission	
3	Address of the warehouse with telephone, Fax, telex, mobile number(s) and E mail	
4	Trade Name of the warehouse	
5	PAN Number allotted by IT deptt.	
6	Date of admission /MOU with the Exchange.	
7	Constitution of the warehouse :sole proprietorship/partnership/corporate body/ financial institution	
8	Name and educational qualifications of proprietor/ partners/ directors	
9	Whether registered with of any other recognised / registered association (Commodity Exchange). If so, give the name(s) of the exchanges and code of membership, date of admission of other recognised/ registered associations	
10	Whether the warehouse or its promoters at any time convicted of any offence. If so, furnish the details if any disciplinary and criminal history.	
11	Whether the warehouse or promoters declared insolvent/bankrupt or declared defaulter by any exchange/ commodity/ stock market. If yes, furnish details.	
12	Net worth of the warehouse Please furnish details and necessary documents in support there of	
13	Whether any group/associate firm/company registered with any exchange for similar or other purpose	
14	Are warehouse related entities are registered as trading/clearing member of securities market?	
15	If yes, provide the details of subsidiary, its registrations number etc.	

Sr. No	Description	Details
16	If warehouse on lease, name of the owner(s) with address(es).	
17	Details of location.	
18	Details of storage capacity – area-wise.	
19	Details of facility available.	
20	Type of structure (attach plan of the warehouse duly certified by the Certified Engineer).	
21	Details of Insurance Policy.	
22	Details of customers –name and addresses	
23	Details of commodity handled with quantity-wise.	
24	Details of warehouse registration with the appropriate authorities including local authorities	
25	Other interests like the owner/lessee are trader/manufacturer in spot/forward markets.	
26	Name of compliance offices.	

In case there is any change in the status of any item as indicted above, the same may be communicated to the Forward Markets Commission, Mumbai within seven days through respective exchanges.

I declare that the information given in this form is true to the best of my knowledge and belief.

Place:

Signature:

Dated:

Name of Member

Confirmation of the Exchange

This is to certify that _____ is a warehouse of this recognised/registered association (Exchange) and as per their records and as per the details given by the said warehouse _____ stocks are stored as on _____ and the above information is correct

Place:

Signature:

Dated:

Name and designation

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FORWARD MARKETS COMMISSION
MINISTRY OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION
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FORM (IR-II)

Format of the Return to be sent by the Intermediaries (Clearing Corporation/Depository Participants/Clearing Banks/ Assayers/etc) registered with Recognized/Registered associations

NAME OF THE COMMODITY EXCHANGE:

Sr. No	Description	Details
1	Name of the intermediary service provider with Code No. if any given by the Exchange	
2	Nature of service/intermediary (Clearing Corporation, Depository Participants, Clearing Banks, Assayers Others (specify)	
3	Registration Number(to be assigned by the Forward Markets Commission)	
4	Address of the intermediary with telephone, Fax, telex, mobile number(s) and E mail	
5	PAN Number allotted by IT deptt.	
6	Date of admission /MOU with the exchange	
7	Constitution of the intermediary :sole proprietorship/partnership/corporate body/ financial institution	
8	Name and educational qualifications of proprietor/ partners/ directors (attach separate sheet if required)	
9	Whether registered with of any other recognised / registered association (Commodity Exchange). If so, give the name(s) of the exchanges and code of membership, date of admission of other recognised/ registered associations	
10	Whether the intermediary or its promoters at any time convicted of any offence. If so, furnish the details if any disciplinary and criminal history.	
11	Whether the intermediary or its promoters declared insolvent/bankrupt or declared defaulter by any exchange/ commodity/ stock market. If yes, furnish details.	
12	Net worth of the intermediary Please furnish details and necessary documents in support there of	
13	If the intermediary is located in leased premises, name of the owner(s) with address(es).	
14	Details of location/s.	

Sr. No	Description	Details
15	Details of service provided by the intermediary: like testing capacity of the assayer along with equipment details and commodities handled for testing/ assaying. (attach separate sheet if required).Mention SEBI registration number,if services provided for security market.also.	
16	Details of customers –name and addresses	
17	Details of commodity/ies handled	
18	Other interests like the owner/lessee are trader/manufacturer in spot/forward markets.	
19	Name of compliance offices with details.	

In case there is any change in the status of any item as indicted above, the same may be communicated to the Forward Markets Commission, Mumbai within seven days through the concerned exchanges.

I declare that the information given in this form is true to the best of my knowledge and belief.

Place:

Signature:

Dated:

Name of Member

Confirmation of the Exchange

This is to certify that _____ is an intermediary of this recognised/registered association (Exchange) and as per their records and as per the details given by the said intermediary, the above information is correct

Place:

Signature:

Dated:

Name and designation

