



Janhavi Promoters Pvt. Ltd.

(Warehouse Service Provider)

Corporate Office : 2, NGM, Husangsar, Bikaner, Rajasthan, E-mail - Info@janhavi.co.in
Helpline number 1800 2122 320, E-mail: askus@janhavi.co.in

Annexure 3 –

WSR wise details Form

1. KYD Reference No allotted to depositor by WSP: - _____

2. DETAILS OF DEPOSITOR

Whether Depositor is a Farmer: - Yes: No:

Depositing on behalf of: - Self Beneficiary (other than self)

Depositor Name: - _____

PAN of Depositor: - _____

Correspondence Address of the Depositor: - _____

Name of the authorized signatory of Depositor: - _____

Proof of Identity of Authorized Signatory of Depositor (ANY ONE- self-attested copy)

PAN Driving License Voter Id Passport

3. DETAILS OF BENEFICIARY ON WHOSE BEHALF DEPOSIT IS BEING MADE: -

Name of Beneficiary: - _____

Address of Beneficiary: - _____

Name of the authorised signatory of the Beneficiary: - _____

4. GOODS AND SERVICES TAX (GST) REGISTRATION DETAILS OF DEPOSITOR:

State: - _____ Depositor GST: - _____

Principal GST Number: - _____

(Note: In case of operation in any other States than mentioned above, please provide GST Registration details of all other States as a separate Annexure to this Application along with self-attested copy of GST Registration certificate.)

5. DEPOSIT DETAILS:

WSR Number: - _____ Deposit End Date of WSR: - _____

Commodity Name: - _____ Quantity (MT/Bale/KG): - _____

DETAILS OF BENEFICIARY ACCOUNT IN WHICH THE HOLDINGS ARE TO BE CREDITED



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Beneficiary Name	Repository Participant Name	Repository Participant ID	Beneficiary ID

GOODS HAVE BEEN PURCHASED BY THE DEPOSITOR FROM: -

Local Mandi Any other Mandi Others (Please specify)

Details of Mandi from where goods purchased by the Depositor

Mandi Name: - _____ State: - _____

Whether the Mandi Tax for the stock being deposited has been paid: - Yes No

Essential documents to be submitted by Depositor		
Document	Remark	Please Tick
Copy of Appointment letter / authorisation letter from Beneficiary for depositing on his behalf is to be attached	Required in case the Depositor is depositing on behalf of beneficiary other than self (refer annex 3 point 2 – Details of Depositor)	
CML Copy bearing Beneficiary Name and ID in which the stock is being deposited.	Refer Annex 3, Point 5 - Details of Beneficiary Account in which the stock being deposited is to be credited.	
Copy of Anugya-patra or similar applicable document in the state/the mandi. Undertaking that the Warehouses where deposits are being made is in jurisdiction where the mandi tax is paid.		
Copy of the Challan showing payments of the Mandi Tax	Required in case the stock is purchased by the depositor from Local Mandi. Refer Annex.3 Point 5- Deposit Details	
Copy of proof of payment of Mandi Tax if the stock being deposited is purchased by the depositor from any other mandi.	Required in case the stock is purchased by the depositor from any other Local Mandi. Refer Annex.3 Point 5- Deposit Details	
Copy of Invoice issued by the Depositor to the Beneficiary OR copy of Invoice Issued to the Depositor by his seller		



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DECLARATION CUM UNDERTAKING

1. I/We hereby confirm that, I/we shall abide by the Declaration cum Undertaking as submitted by me/us while signing the KYD/ application. I/ we at all times and in an event of any breach of the terms of the Declaration cum Undertaking by me/us, then I/We shall be solely liable and responsible to the Clearing Corporation / Exchange and to the WSP.
2. Beneficiary named in this form is the valid owner / holder of these Goods as deposited by me/us. Goods which are being deposited are not subject matter of any Govt. schemes, pool or distribution mechanism which restrict their dealings otherwise.
3. I/We confirm having read/been explained and understood the details as filled in this document i.e. Annexure transaction wise details.
4. I / we hereby declare that the details furnished above are true and correct.
5. I/We confirm that Mandi tax(s) are already paid pertaining to the goods deposited by me/us. I/we further confirm to produce before any Regulatory authority / NCCL / WDRA sufficient proofs, tax paid invoices as the case may be.
6. I / we hereby declare that the Goods are free from all encumbrances. I/We confirm that all the statutory compliance viz. FSSAI, stock limits, essential commodities Act, sale of goods Act, etc pertaining to the Goods being deposited by me/us are complied.
7. I/ We confirm that the goods being deposited by me /us have not crossed EDD/any expiry date assigned by any assayer
I/we confirm that the Goods as deposited by me / us are as per the Exchange (NCDEX) contract specification and I/We agree that the goods shall be accepted for deposit only if the assayer verifies the quality thereof and certifies them to be meeting the Exchange contract specification.

Place: - _____

Date: - _____

Signature of Authorised Signatory of Depositor



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FOR WSP OFFICE USE ONLY

Date of CDTF Form	CDTF Form No	Commodity Name	Quantity Deposited (MT/BALE/KG)	No of Bags Deposited
TOTAL				

Verification By:

Name of the Employee / Warehouse Manager: - _____

Designation of the Employee/Warehouse Manager: - _____

Place: - _____

Date: - _____

Signature of the Employee/Warehouse Manager
(With Seal of the warehouse /WSP)



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Instructions for WSP

Document	Remark
PAN of Depositor	WSP to check KYD Annexure 1 or Annexure 2A and 2B provided by the Depositor for correctness of PAN and Copy of PAN. Refer Annex 3 Point 2 - Details of Depositor
7/12 extract or other state specific land related documents establishing identity as farmer	Required if the Depositor is a Farmer. Refer Annex 3 Point 2 - Details of Depositor
Proof of Identity of the Authorized Signatory of Depositor	WSP to check KYD Annexure 1 or Annexure 2A/2B provided by the Depositor for correctness of Proof of Identity. Refer Annex.3 Point. 2
Copy of GST Registration certificate	WSP to check KYD Annexure 1 or Annexure 2A/2B provided by the Depositor for Copy of GST Registration Certificate. Refer Annex 3 Point 4 - GST Registrations Details