



**FORM FOR REGISTRATION OF COMPLAINTS AGAINST MEMBERS**  
*(Please submit in duplicate)*

**1. Information about Complainant**

**A. Personal Details:**

Name of the Complainant \_\_\_\_\_  
Correspondence Address \_\_\_\_\_  
(Provide complete address) \_\_\_\_\_  
\_\_\_\_\_ Pin code \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Telephone no. \_\_\_\_\_ Mobile no. \_\_\_\_\_  
E-Mail id \_\_\_\_\_  
Permanent A/c No.(PAN) \_\_\_\_\_

**2. Complaint against:** *(please tick appropriate box)*

Clearing Member (CM)  Warehouse Service Provider (WSP)  Vault Service Provider

(VSP)

Name: \_\_\_\_\_

Address of branch of member \_\_\_\_\_  
\_\_\_\_\_

Contact person at the branch \_\_\_\_\_

**3. Nature of Complaint**

Sr. No.	Nature of Complaint	Tick the applicable
1.	Non-receipt of money/securities/other collaterals given to CM	
2.	Non-receipt of funds/securities after settlement of a contract, from CM	
3.	Quality and Quantity related issues against WSP/VSP, after having passed through the Clearing and Settlement Mechanism	
4.	Others, please specify.	

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

**5. List of documents attached:-**

(i)

(iv)

(ii)

(v)

(iii)

(vi)

**6. Details of Correspondence with CM/ WSP/ VSP:**

i) Date on which complaint taken up with CM/WSP/VSP: \_\_\_\_\_

ii) Copies of correspondence with the CM/WSP/VSP attached: Yes / No

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


- In case of any additional information to be provided, the same shall be attached as supplement to this Form

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

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

Complainant's Signature

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**List of documents required to be attached with complaint registration form:**

- 1 Copies of Know Your Depositor (KYD)/ Depositor Transaction Declaration (DTD)/bills/invoices issued pertaining to the transaction under dispute.
- 2 Copy of proof of delivery (for commodity delivered by the complainant) - If the complaint pertains to transactions related to delivery.
- 3 Copies of letters/correspondence written to and reply if any, received in respect of your complaint.
- 4 Any other documents/ details relevant w.r.t the complaint

**Guidelines for filling the complaint registration form**

- 1 Please submit the complaint in the prescribed format with complete details OR send scanned copy by email to MCCIL at [investorgrievances@mcclar.in](mailto:investorgrievances@mcclar.in)
- 2 Please furnish photocopies of relevant documents. Originals are not required to be submitted with the complaint form.
- 3 Incomplete forms or complaints not supported with relevant details/documents may not be considered.
- 4 In case of subsequent correspondences, kindly quote date and reference number of the letter sent by MCCIL

**All Complaints may be forwarded to the Investor Service Desk, Mumbai office address as under:**

**Metropolitan Clearing Corporation of India Limited**

**Building A, Unit 205B, 2<sup>nd</sup> Floor, Agastya Corporate Park**

**Sunder Baug Lane, Kamani Junction, L.B.S Road, Kurla West**

**Mumbai 400070**