KNOW YOUR CLIENT (CKYC\KRA\KYC)

APPLICATION FORM (FOR INDIVIDUALS ONLY)

Please fill in ENGLISH and in BLOCK LETTERS

For Office use only

Application Type ☐New ☐Update/Modification **Account Type** ☐Normal ☐Simplified (for low risk Customer) ☐Small

KRA KYC No :_____ **Central KYC No :**_____

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (As appearing in supporting identification document).

Name _____

Maiden Name (if any)_____

Father/Spouse Name _____

Mother Name _____

PHOTOGRAPH

Please affix the recent passport size photograph and sign across

2. Gender ☐Male ☐Female **B. Marital Status** ☐ Single ☐Married **C. Date of Birth** _____

3. Nationality ☐ Indian ☐ Other_____(ISO 3166 Country Code_____)

4. Status Please tick(✓) ☐ Resident Individual ☐ Non Resident Indian ☐Person of Indian Origin ☐ Foreign National (Passport Copy Mandatory For NRIs & Foreign Nationals)

5. PAN _____ Please enclose a duly attested copy of your PAN Card

UID Aadhaar Number, if any: _____

6. Proof of Identity submitted for Pan exempt cases Please tick (✓)

☐ UID (Aadhaar) ☐ Passport ☐Voter ID ☐Driving License ☐Others _____(Please see guideline 'D' overleaf)

7. Occupation Type ☐ **S-Service** (☐**Private Sector** ☐ **Public Sector** ☐**Government Sector)** ☐**B-Business**

☐**O-Other** (☐**Professional** ☐ **Self Employed** ☐**Retired** ☐ **Housewife** ☐**Student)** ☐ **X-Not Categorized**

B. Details of Related Person

☐ **Addition of related Person** ☐ Deletion of related Person CKYC Number of Related Person (if available*) _____

Related Person Type ☐ Guardian of Minor ☐Assignee ☐Authorized Representative

Related Person Name_____

C. Address Details (please see guidelines overleaf)

1. Proof of address Correspondence/Permanent to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

☐ Passport ☐ Ration Card ☐ Registered Lease/Sale Agreement of Residence ☐Driving License ☐ Voter Identity Card ☐ *Latest Bank A/c statement/Passbook

☐ *Latest Telephone Bill (Only Land Line) ☐ *Latest Electricity Bill ☐ *Latest Gas Bill ☐ UID (Aadhaar) ☐ Others (Please Specify)_____

*Not more than 3 Months old. **Validity/Expiry date of proof of address submitted**_____

2. Address for Residence/Correspondence

City/Town/Village		**State**		**Country**		**Pin Code**	

3. Permanent Address of Resident Applicant if different from above C1 or Overseas Address (Mandatory) for Non- Resident Applicant

☐ Same as Correspondence Address

City/Town/Village		**State**		**Country**		**Pin Code**	

4. Contact Details

Tel. (Off.)															**Tel. (Res.):**													
Mobile	9	1	-												**Fax**													
E-Mail ID																												

5. Any Other information\Remark :_____

D. APPLICANT DECLARATION

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading, I am/we are aware that I/We may be held liable for it.

Place: **Date:**

SIGNATURE OF APPLICANT

FOR OFFICE USE ONLY **IPV** ☐**Done on**

AMC/Intermediary name **OR** code

☐ (Originals verified) Self Certified **Document** copies received

☐ (Attested) True Copies of documents received Main Intermediary

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature
Date

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature
Date