Know Your Client (KYC) Application Form (For Individuals only)

(Please fill the form in English and in BLOCK Letters)
Fields marked with '*' are mandatory fields

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Application Type* ☐ New ☐ Update **KYC Number*** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

KYC Type* ☐ Normal (PAN is mandatory) ☐ PAN Exempt Investors (Refer instruction K)

1. Identity Details (Please refer instruction A at the end)

PAN* ☐☐☐☐☐☐☐☐☐☐   Please enclose a duly attested copy of your PAN Card

	Prefix	First Name	Middle Name	Last Name
Name* (same as ID proof)				
Maiden Name (If any*)				
Father / Spouse Name*				
Mother Name*				

Date of Birth* D D – M M – Y Y Y Y

Gender* ☐ M- Male ☐ F- Female ☐ T-Transgender

Marital Status* ☐ Married ☐ Unmarried ☐ Others

Citizenship* ☐ IN- Indian ☐ Others – Country _____ Country Code ☐☐

Residential Status* ☐ Resident Individual ☐ Non Resident Indian
☐ Foreign National ☐ Person of Indian Origin

Occupation Type* ☐ S-Service ☐ Private Sector ☐ Public Sector ☐ Government Sector
☐ O-Others ☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student
☐ B-Business ☐ X-Not Categorised ✓

Photo

Signature/ Thumb Impression

2. Proof of Identity (PoI)* (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

☐ A- Passport Number _____   Passport Expiry Date D D – M M – Y Y Y Y
☐ B- Voter ID Card _____
☐ D- Driving Licence _____   Driving Licence Expiry Date D D – M M – Y Y Y Y
☐ E- Aadhaar Card _____
☐ F- NREGA Job Card _____
☐ Z- Others (any document notified by the central government) _____ Identification Number _____

3. Proof of Address (PoA)*

☐ 3.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

Address
Line 1* _____
Line 2 _____
Line 3 _____   City / Town / Village* _____
District* _____ Zip / Post Code* _____   State/UT Code ☐☐ as per Indian Motor Vehicle Act, 1988
State/UT* _____   Country* _____   Country Code ☐☐ as per ISO 3166

Address Type* ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)
Proof of Address*

☐ Passport Number _____   Passport Expiry Date D D – M M – Y Y Y Y
☐ Voter ID Card _____
☐ Driving Licence _____   Driving Licence Expiry Date D D – M M – Y Y Y Y
☐ Aadhaar Card _____
☐ NREGA Job Card _____
☐ Others (any document notified by the central government) _____ Identification Number _____

☐ 3.2 Correspondence / Local Address Details* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary proof)

Line 1* _____
Line 2 _____
Line 3 _____   City / Town / Village* _____
District* _____ Zip / Post Code* _____   State/UT Code ☐☐ as per Indian Motor Vehicle Act, 1988
State/UT* _____   Country* _____   Country Code ☐☐ as per ISO 3166

4. Contact Details (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction **F** at the end)

Email ID

Mobile ☐☐–☐☐☐☐☐☐☐☐☐☐ Tel. (Off) ☐☐☐☐–☐☐☐☐☐☐☐☐ Tel. (Res) ☐☐☐☐–☐☐☐☐☐☐☐☐

5. FATCA/CRS Information (Tick if Applicable)   ☐ Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction **B** at the end)

Additional Details Required* (Mandatory only if above option (5) is ticked)

Country of Jurisdiction of Residence*   Country Code of Jurisdiction of Residence ☐☐ as per ISO 3166

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth*   Country of Birth*   Country Code ☐☐ as per ISO 3166

Address
Line 1*

Line 2

Line 3   City / Town / Village*

District*   Zip / Post Code*   State/UT Code ☐☐ as per Indian Motor Vehicle Act, 1988

State/UT*   Country*   Country Code ☐☐ as per ISO 3166

6. Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

☐ Related Person   ☐ Deletion of Related Person   KYC Number of Related Person (if available*)

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

	Prefix	First Name	Middle Name	Last Name
Name*				

(If KYC number and name are provided, below details of section 6 are optional)

☐ Proof of Identity [PoI] of Related Person* (Please see instruction (**H**) at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

☐ A- Passport Number   Passport Expiry Date ☐☐–☐☐–☐☐☐☐

☐ B- Voter ID Card

☐ C- PAN Card

☐ D- Driving Licence   Driving Licence Expiry Date ☐☐–☐☐–☐☐☐☐

☐ E- Aadhaar Card

☐ F- NREGA Job Card

☐ Z- Others (any document notified by the central government)   Identification Number

7. Remarks (If any)

8. Applicant Declaration

- I hereby declare that the details furnished above are true and correct to the best of my 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 or misrepresenting, I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

✓ [Signature / Thumb Impression]

Date: ☐☐–☐☐–☐☐☐☐   Place:

Signature / Thumb Impression of Applicant

9. Attestation / For Office Use Only

Documents Received ☐ Certified Copies

KYC Verification Carried Out by *(Refer Instruction I)*	Institution Details
Date ☐☐–☐☐–☐☐☐☐	Name
Emp. Name	Code
Emp. Code	Emp. Branch
Emp. Designation	
[Employee Signature]	[Institution Stamp]

In-Person Verification (IPV) Carried Out by *(Refer Instruction J)*	Institution Details
Date ☐☐–☐☐–☐☐☐☐	Name
Emp. Name	Code
Emp. Code	Emp. Branch
Emp. Designation	
[Employee Signature]	[Institution Stamp]