

PART I - KNOW YOUR CLIENT (KYC) APPLICATION FORM (For Individuals)

Name and address of intermediary (pre-printed)

Please fill this form in ENGLISH and in BLOCK LETTERS

A. IDENTITY DETAILS										Photograph																	
1	Name of the Applicant									Please affix your recent passport size photograph	Signature Across photograph																
2	Father's / Husband's Name																										
3	a) Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	b) Marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married	c) Date of Birth	D	D	M	M	Y	Y	Y	Y														
4	a) Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify, _____)			b) Status	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National																					
5	a) PAN													b) Unique Identification Number (UID) / Aadhaar, if any													
6	Specify the proof of identity submitted		<input type="checkbox"/> PAN card <input type="checkbox"/> Any other (Please specify; _____)																								

B. ADDRESS DETAILS									
1	Correspondence Address								
		City/town/village		PIN Code					
		State		Country					
2	Specify the proof of address submitted for correspondence address								
3	Contact Details	Tel. (Off.)				Tel. (Res.)			
		Fax No.				Mobile No.			
		Email ID							
4	Permanent Address (If different from above. Mandatory for Non-Resident Applicant to specify overseas address)								
		City/town/village		PIN Code					
		State		Country					
5	Specify the proof of address submitted for permanent address								

C. OTHER DETAILS																
1	Gross Annual Income Details (please specify):															
	Income Range per annum				OR	Networth										
	<input type="checkbox"/> Below ₹ 1 lac <input type="checkbox"/> ₹ 1- 5 lac <input type="checkbox"/> ₹ 5- 10 lac <input type="checkbox"/> ₹ 10- 25 lac <input type="checkbox"/> More than ₹ 25 lac					Amount (₹) _____ As on (date) <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>				D	D	M	M	Y	Y	Y
D	D	M	M	Y	Y	Y	Y									
	(Networth should not be older than 1 year)															

	Occupation (please tick any one and give brief details): _____	
2	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Others (Please specify; _____)
3	Please tick, if applicable: <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP)	
4	Any other information _____	

D.	DECLARATION
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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.

Signature of the Applicant _____	Date	D	D	M	M	Y	Y	Y	Y
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FOR OFFICE USE ONLY

<input type="checkbox"/> (Originals verified) True copies of documents received									
<input type="checkbox"/> (Self-Attested) Self Certified Document copies received									
Signature of the Authorised Signatory _____								Seal/Stamp of the intermediary	
Date		D	D	M	M	Y	Y		