



**(Application Form (For Individual Only))**

Please fill type the form in English and BLOCK letter\*.

8/18

**A. Identity Details (please see guidelines)**

Full Name

Father / Spouses Name:

Mother Name:  Maiden Name: (if Any)

Gender:  Male  Female  Transgender Marital Status  Married  Unmarried  Other

Nationality  Indian  Other..... Date Of Birth (dd/mm/yyyy) .....

Residential Status  Resident Individual  Non-resident  Foreign Notional

Pan  Aadhaar Number

Proof of Identity Submitted For Pan Exempt Cases (please Tick)

UID(AADHAR)  Passport  Voter ID  Other-PAN NREGA .....

**B. Address Details (please see guidelines)**

Residential / Business  Residential  Business  Registered Office  Unspecified

Address For Residence Correspondence:

City Town Village:  Pin Code:  State:  Country:

Proof of Address To Be Provided By Applicant. Please Submit Any One Of The Following Valid Documents Choose The Document Attached

Passport  Ration Cord  Registered Lease Sales Agreement of residence  Driving Licence

Voter ID  \*Latest Telephone Bill  \*Latest Electricity Bill  \*Latest Gas Bill

Others(Please specify)  Mobile No:  Email ID.:

\*not more than 3 months old. validity expiry date of proof of address submitted (dd mm yyyy)

Residential / Business  Residential  Business  Registered Office  Unspecified

Address For Residence Correspondence:

City Town Village:  Pin Code:  State:  Country:

Proof of Address To Be Provided By Applicant. Please Submit Any One Of The Following Valid Documents Choose The Document Attached

Passport  Ration Cord  Registered Lease Sales Agreement of residence  Driving Licence

Voter ID  \*Latest Telephone Bill  \*Latest Electricity Bill  \*Latest Gas Bill

Others(Please specify)  Mobile No:  Email ID.:

\*not more than 3 months old. validity expiry date of proof of address submitted (dd mm yyyy)

Financial Details - Income Range (Per Annum in ₹)  Below 1 Lac  1-5 Lac  5-10 Lac  10-25 Lac  > 25 Lacs

TAX RESIDENCY OUT OF INDIA  YES  NO

**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 consent to receiving information from Central KYC Registry / CVLKRA through SMS Email on the above registered number email address.

Place:

Date:

Signature of Applicant 9/18

**For office use only**

I/We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of Rights and Obligations' document(s) RDD and Guidance Note. I/We have given sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly Intimated to the clients. I/We also undertake that any change In the Rights and Obligations' and RDD would be made available on my our website, If any for the Information of the clients.

Details Of Employee / Authorized Signatory	Documents Verified With Originals	Client Interviewed By & In-person Verification Done By	UCC Code :
Name & E Code			
Designation			
Date			
Signature			

KRA page should be provided in respect of all authorised signatories.  
Example : If Authorised Signatories are 3 than 2 additional KRA form to be (Printed & Submitted)