

KNOW YOUR CLIENT (KYC) APPLICATION FORM

Please fill this form in ENGLISH and in BLOCK LETTERS.

For Individuals:

IDENTITYDETAILS:

1. Name of the Applicant: _____

**2. Father's/
Spouse Name:** _____

3. Gender: Male/ Female **b. Marital status: Single/ Married**
c. Date of birth: (dd/mm/yyyy)

4. Nationality:
b. Status: Resident Individual/ Non Resident/ Foreign National

5. a. PAN: **b. Aadhaar Number, if any: _**

6. Specify the proof of Identity submitted: _

1. ADDRESSDETAILS

2. Residence Address: _

3. City/town/village: Pin Code: _____
State: _____ Country: _____

2. Contact Details: (Off.) Tel. _____ (Res.)
Mobile No. _____ Fax: Email id: _____

3. Specify the proof of address submitted for residence address: _

4. Permanent Address (if different from above or overseas address, mandatory for Non-Resident Applicant): _

_ City/town/village: Pin Code: State: Country: _

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.

Signature of the Applicant Date: (dd/mm/yyyy)

Originals verified and Self-Attested Document copies received

(.....)

Name & Signature of the Authorised Signatory

Date Seal/Stamp of the intermediary