



**DREAM BIG**



## What type of application do you want to create?

Application Type (I am investing on behalf of) ▼

How much amount do you want to invest? ▼

Once you proceed to the next step, you will not be able to edit the application type.

Save & Continue



DREAM BIG



## What type of application do you want to create?

Application Type (I am investing on behalf of)  
Company ▼

Company Name

Company Email

How much amount do you want to invest? ▼

Once you proceed to the next step, you will not be able to edit the application type.

Save & Continue



Tell us about your details

Full Name	Date of Birth (dd/mm/yyyy)
Email	Confirm Email
Phone	Secondary Phone
Driver License	Passport Number
Address Line 1	Address Line 2
City	State
Zip Code	



Provide us with your bank details

Bank Name

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Bank Account Number

---

BSB

---

Account Holder Name

---





Provide us with all the required documents

Address Proof	Identity Proof	POA
<div></div> <div>Drag &amp; Drop file Or <div>Browse</div></div> <div><small>**Only jpg, jpeg, png and pdf files are allowed</small></div>		<div></div> <div>No files have been uploaded yet</div>



Provide us with all the required documents

Address Proof

Identity Proof

POA

Drag & Drop file

Or

Browse

\*\*Only jpg, jpeg, png and pdf files are allowed

PDF

TaxIdentificationNumber.pdf

29.34 KB

JPG

VoterCard.jpg

25.34 KB

PNG

PanCard.png

5.34 KB



## Review & Submit Application

Application Details

Investor Details

Bank Details

Uploaded Documents

Application Type (I am investing on behalf of): Individual

How much amount do you want to invest: >\$500,000

Edit

☐

I agree to the terms and conditions, and privacy policy.

Submit Application



Review & Submit Application

Application Details

Investor Details

Bank Details

Uploaded Documents

Full Name: Individual

Date of Birth: 22/03/1990

Email: arijit@cloudkaptan.com

Phone: 9807731920

Secondary Phone: 72374329200

Driver License: 3248934L23

Passport Number: AX09234ER3

Address: 23 Erioh Auckland Street Australia 800034

Edit

☐ I agree to the terms and conditions, and privacy policy.

Submit Application





## Review & Submit Application

Application Details

Investor Details

Bank Details

Uploaded Documents

Bank Name: Individual

Bank Account Number: 0182302301238

BSB: 234-039-340

Phone: 9807731920

Account Holder Name: 72374329200

Edit

☐

I agree to the terms and conditions, and privacy policy.

Submit Application



Review & Submit Application

Application Details   Investor Details   Bank Details   **Uploaded Documents**

**Address Proof**

PDF

TaxIdentificationNumber.pdf

29.34 KB

**Identity Proof**

PDF

TaxIdentificationNumber.pdf

29.34 KB

**POA**

PDF

TaxIdentificationNumber.pdf

29.34 KB

Edit

☐ I agree to the terms and conditions, and privacy policy.

Submit Application



## Application Submitted Successfully

You have completed all the steps successfully. Your application is currently under review. We will get back to you within 24 hours. You will receive an email, once your application is approved.



DREAM BIG



## What type of application do you want to create?

Application Type (I am investing on behalf of) ▼

Individual  
Company

Once you proceed to the next step, you will not be able to edit the application type.

Save & Continue



**DREAM BIG**



## What type of application do you want to create?

Application Type (I am investing on behalf of)

Individual



How much amount do you want to invest?




Once you proceed to the next step, you will not be able to edit the application type.

Save & Continue



Tell us about your details

What is your role in the company? 

Full Name

Date of Birth (dd/mm/yyyy)

Email

Confirm Email

Phone

Secondary Phone

Driver License

Passport Number

Address Line 1

Address Line 2

City

State

Zip Code

Do you want to add an additional entity for the company?

Yes

No



Tell us about your details

What is your role in the company?

Full Name

Date of Birth (dd/mm/yyyy)

Email

Confirm Email

Phone

Secondary Phone

Driver License

Passport Number

Address Line 1

Address Line 2

City

State

Zip Code

Do you want to add an additional entity for the company?

Yes

No

What is his/her role in the company?

Full Name

Date of Birth (dd/mm/yyyy)

Email

Confirm Email

Phone

Secondary Phone

Driver License

Passport Number

Address Line 1

Address Line 2

City

State

Zip Code

Do you want to add an additional entity for the company?

Yes

No



## Review & Submit Application

Application Details

Investor Details

Bank Details

Uploaded Documents

Application Type (I am investing on behalf of): Company

Company Name: Cloudkaptan Consultancy Services Pvt Ltd

Company Email: cloudkaptan@gmail.com

How much amount do you want to invest: >\$500,000

Edit

☐

I agree to the terms and conditions, and privacy policy.

Submit Application