

## Customer KYC Form - Individual

### Personal Details

Customer Name	<input type="text"/>																										
	<input type="text"/>																		Title	<input type="text"/>							
Maiden Name (if any)	<input type="text"/>																										
Father's Name	<input type="text"/>																										
Mother's Name	<input type="text"/>																										
Mothers' Maiden Name (if any)	<input type="text"/>																										
Spouse Name	<input type="text"/>																										
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender																								
Marital Status	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others																								
Date of Birth	<input type="text"/>								ISO-3166 Country Code of Birth														<input type="text"/>				
Place of Birth	.....																		Community	.....							
<input type="checkbox"/> Resident	<input type="checkbox"/> Non Resident	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin																								
Nationality	<input type="checkbox"/> Indian	<input type="checkbox"/> Other - Country Code	<input type="text"/>																								
Occupation	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Sector Service																								
	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired																							
	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Other - specify	.....																							

### Income Details

Annual Income (in INR)	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1 to 5 Lac	<input type="checkbox"/> 5 to 10 Lac
	<input type="checkbox"/> 10 to 15 Lac	<input type="checkbox"/> 15 to 25 Lac	<input type="checkbox"/> 25 Lac and above

Net Worth (in INR) Rs. .... as on .....

### Education

Education	<input type="checkbox"/> Below SSC	<input type="checkbox"/> SSC	<input type="checkbox"/> HSC
	<input type="checkbox"/> Graduate	<input type="checkbox"/> Masters	<input type="checkbox"/> Professional

Colour Photo

Customer Signature

## Customer KYC Form - Individual

### Proof of Identity

PAN

Voter ID

UID (Aadhaar)

Driving Licence  Expiry Date.....

Passport No.  Expiry Date.....

NREGA Card No.

Other Proof of Identity (Type).....(No.).....

### Address

Preferred Address ☐ Permanent ☐ Communication ☐ Office

Proof of Address.....

Permanent Address

City

State  PIN  Country

Communication Address

City

State  PIN  Country

Office Address

City

State  PIN  Country

Emp. ID

If SIB Staff PPC

Customer Signature

## Customer KYC Form - Individual

### Contact Details

Mobile

1.

2.

Tel (1 - Res., 2 - Office)

1.

2.

Email ID 1 .....

Email ID 2 .....

Preferred: Mobile ☐ 1 ☐ 2 Tel ☐ 1 ☐ 2 Email ☐ 1 ☐ 2

### Related Person Details

Related person Type ☐ Guardian of Minor (Father) ☐ Guardian of Minor (Mother)

☐ Guardian (Legal / Court appointed) ☐ Others (Please specify) .....

Related Person's Name .....

Related Person's Customer ID ..... Related Person's Proof of identity (Type) .....

Related Person's Proof of identity (No) ..... (Expiry).....

### Foreign Residence Details

☐ Residence for Tax purposes is in jurisdiction outside India. If so, the Country Code

Tax Identification No (overseas)

Visa No..... Expiry ..... NRI Status change date .....

Overseas Address

City

State  PIN  Country

☐ Residence for Tax purposes is in more than one jurisdiction outside India. If so, the Country Code

Tax Identification No (overseas)

Visa No..... Expiry ..... NRI Status change date .....

Overseas Address

City

State  PIN  Country

Customer Signature