

**KNOW YOUR CLIENT (KYC) APPLICATION FORM**

*For Individuals*

Please fill this form in ENGLISH and in BLOCK LETTERS.

**A. IDENTITY DETAILS**

1. Name of the Applicant: Ross Geller
2. Father's/ Spouse Name: Jack Geller
3. a. Gender: Male/ Female      b. Marital status: Single/ Married      c. Date of birth: 19/03/1988 (dd/mm/yyyy)
4. a. Nationality: INDIAN      b. Status: Resident Individual/ Non Resident/ Foreign National
5. a. PAN: AGIXB076N      b. Aadhaar Number, if any: NA
6. Specify the proof of Identity submitted: DL

**B. ADDRESS DETAILS**

1. Residence Address: 19, HSR LAYOUT  
City/town/village: BANGLORE Pin Code: 560066 State: KARNATAKA Country: INDIA
2. Contact Details: Tel. (Off.) \_\_\_\_\_ Tel. (Res.) \_\_\_\_\_ Mobile No.: 91262454 Fax: \_\_\_\_\_ Email id: \_\_\_\_\_
3. Specify the proof of address submitted for residence address: DL