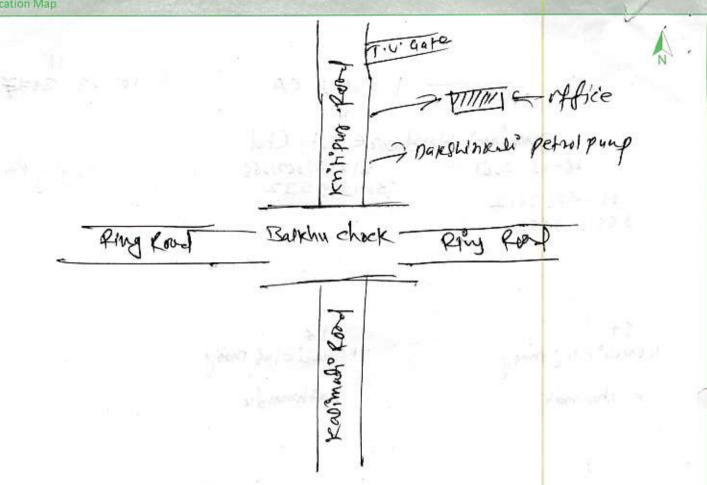


KYC FORM FOR CORPORATE CUSTOMER

Date:

Citizens International Ltd.		- Screening ID		
GIUZCIIS शिक्षेत्रमा वैक अन्यसंग्रममान सि.	-01 kg	KYC ID		
Account Number D 0 1	1 9	OLCA	Date: 11	0-03-20#
Client ID				
Account Holder's Name: Mandan	Hard Dore	epit. Ud.		
Date of Registration \$8-12 - 2067		121410571060	Registration Office & D	Date: Company Registr
	PAN/VAT No. 30	1919532	Regd./PAN Expiry Date	Company Fallst.
Contact No: 01 - 4263412	Beneficial Owner-Nar			
Office: 9 6510 89492	Address:	ne:	* * * * * * * * * * * * * * * * * * *	
Email:	Relation:			
P.O.Box:	Contact No.:			
Registered Address	Section and Control of the Control o	ess Address		433
Ward No.: 1 +	Ward	No.: 1 🗶		
Tole: Kumou club many		Kumali club p	1024	
House No.:	House	No.	~, d	
District: Kathmandy	Distric	Kathmande		
Business Area:	·	- Month		
Business Objetives:		-		
Number of Office: 1	Office Location:			
Management (BOD Member and Chief Exe	cutive)			
SN Full Name & Post	Permanent Address	Present Address	Citizenship No./ Issuing Office	Phone/Mobile No.
1) NavraT pokkrel	Kwallim - 16	Kulallanor-14		m.9851020120
2) Gita Kumay Mudshan		Kwlethor-14		9841267958
Pothrel	12.101.100	12 310 11011	-0,147-	3 0 112 103 0
3) ANJU Sharma	3alKhu-14	Barkhy-14	1774/8 489 841	9851089402
			1	
14-15		- V N		
HPP/PEP/NF2F: ☐ Yes ☐ No	If yes,	remark on affiliation:		
Expected Monthly Turnover:	Less t	han 25 Lakhs 🔲 I	less than 50 Lakhs	2-50 Lakhs
Expected Monthly Transaction:	Less t	han 25	Less than 50	>50
Purpose of Account:	Busine	ess 🔲 (Other (Please specify)	. 64
Supporting Documents (provided by the co	ustomer)	757	Rema	rks, if any
Photo of account operators	Obtained	☐ Not Obtained		
Photo of all managerial personnel	Obtained	☐ Not Obtained		
Citizenship of all managerial personnel	Obtained	☐ Not Obtained		
Registration Document	Registration Certifi	cate MOA/AOA		Hard.
Audited Financials of last fiscal year	Yes No Spec	ify the FY.		
Income Tax Clearance of Last Fiscal Year	Yes No Spec	ify the Fy Hardway	-	
		10/		-1
		(M.H.W)	170	3/02mi
Corporate Seal		to 1	0.0000000000000000000000000000000000000	ed Signatory





Company Seal

Bank's Use Only

Account Risk Grading:	Information Update in Core Banking System:
☐ High Risk ☐ Medium Risk ☐ Low Risk ☐ HPP/PEP	☐ Yes ☐ No :
Name listed in OFAC (Name listed in sanction)	Date Updated on:
Yes No Remarks / information if any:	Remarks if any:
Barnch Manager	CSD Staff
Date:	Date



THE PARTY OF THE PROPERTY OF THE PROPERTY OF THE PARTY OF	
KYC FORM FOR INDIVIDUAL CUSTO	MERI

Screening ID KYC ID. Date 10-03-2075 Account Number Client ID NavraT Pokhrel
Citizenship/ID No.: 64188 PAN No. Account Holder's Name: Issuing Office & Date: Date of Birth: Gender: Issuing Office & Date: Passport No.: Nationality: Res. Occuption: TSWineld Non Res. Marital Status: Mobile No.: 9851020120 Phone No.: PO Box: E mail: Present Address Permanent Address Ward No.: 14 Ward No.: 14 Parijat Sadak Parijat Sodak Tole: House No.: District: District: Beneficial Owner □ No In case of Non Residence NRN ID (If applicable): If Yes, Beneficial Owner Name: .. Foreign Address: ____ Country: City/State Address: -Contact No.: Relation: Contact No.: Visa: Visa Expiry Date: Family Member: Issuing Office* Date of issue* Citizenship No.* SN Relation Grita kuman mudhhai portue. Agnid kan porkhnel mandalu Den porkhnel 1 Spouse 2 Father 3 Mother Hemlal pokhrel Grandfather 4 5 Grandmother Satish porthod Satina porkhad 271060/1282 6 Son 7 Daughter Daughter in Law (son's wife)* 8 Father in Law (of married women)* not compulsory for low risk customers Occupation/Business: Web Site Annual Income Post SN intya sae Khuddya Bhanled Kulathwar - 14 WD 3 4 If yes, remark on affiliation: HPP/PEP/NF2F: Yes No >50 Lakhs Less than 5 Lakhs Less than 50 Lakhs Expected Yearly Turnover: >25 Less than 15 Less than 25 Expected Monthly Transaction: Business Others Purpose of Account: Remittance Savings Sale of Asset Salary Remittance Investment Source of fund Loan Repayment Others (Please Specify) Donation Borrowings Punished or charged for any criminal activities in the past No

Supporting Documents (provided by the customer)	04 (1976) 10264 W	
Photo of account holder Obtained	☐ Not obtained	
Photo of beneficial owner Obtained	☐ Not obtained	
Identification Document Citizenship	Passport	Others
Address verifying document (Any one) Utility Bill (Water/Elec	tricity/ Driving License	Land ownership document
Rental Agreement	letter from local authority	☐ Voter ID
Employee ID (Mandatory for Govt. Officials) \ N/A	Yes	No
4,415,37	31	
Site Map Permanent Address Present Address		
	3-1/	
- J=1	10 m	2.1
John Street	2000	() 1 () () () () () ()
15	2	
the state of the s		educa dibus V
- Rina Read Barkhy	whock Die D-1	
Zing Road Sarkhy	Alba Kad	
·		
		gesidence
Way	7	erises.
3	January college way	1///
1-6	MASH BANK	
3	11-00-15-1-60	Dan
Sp. In Sp.	1 / Pan) at se	240
l ×	V	
I/We hereby declare that all the information & documents provided	d to the bank are true & Correct.	
Right Left		
Night Left		
		The cas
Thumb Impression		Account Heldade Stand
Note: Any document/information if not exists, shall be declared an	N/A	Account Holder's Signature
	Use Only	Line Control of the Control
Account Risk Grading:	Information Update in Core Ban	king System & accuity Check:
☐ High Risk ☐ Medium Risk ☐ Low Risk	Yes No	
☐ HPP/PEP	Date Updated on:	
Name listed in Sanction	Paragraph of Control o	100
Yes No		
Remarks / information if any:	Remarks if any:	
	N. *.	
Barnch Manager	CSD Staff	100
Darrier Harager	CJD 3/6/1	1.0
Date:	Date	The state of the s



KYC FORM FOR INDIVIDUAL CUSTOMER

द्रिर्देखिलार्ड / Internation	181 Ltd. नेसनल लि.	Scr	eening ID KYC ID					
Account Number			CONTRACTOR OF THE PARTY OF THE	Date	. ()	10-0-4		
				Date	10~	03-20年		
Client ID	<u> </u>							
Account Holder's Name: Cita		mud Chon'	Pr Charpan	No.		20200		
Date of Birth: 15-04-2030	Citizenship / ID	No.: 560	Issui	ng Office & D	ate: Pan	rahi ua -10-0		
Gender: France	Passport No.:		Issu	ing Office & C	ate:			
Nationality: Res. Non Re	s. Marital Status:		Occi	uption: 🔇	Whine	61		
Phone No.: 4278580	Mobile No.:	98412679	ડજ	- 1				
E mail:				PO B	ox:			
Present Address		Permanent Addre						
Ward No.: 14	a lor	Ward No.:	1 C	- 1-1-				
Tole: Name and South	aje	Tole: Pa	wlat 2	relair				
Tole: Parijat Sad House No.: Ruthmandy		District: Kar	mondy					
In case of Non Residence	2	Beneficial Owner	The second	No				
NRN ID (If applicable): Foreign Address:		If Yeş, Beneficial Owner						
Country: City/State						1		
Contact No.:		Relation:	Address: Relation:					
Visa:	e alf	Contact No.:						
Visa Expiry Date:								
amily Member:								
SN Relation	Name	& Surname	Citizenship I	No.* Issuin	g Office*	Date of issue*		
1 Spouse	NAME	Pokhrel	64188	tath	marke	20-11-2038		
2 Father ,		non kumal	9 118		1-(0)			
3 Mother	Sherma	mud 6 han						
4 Grandfather		1 01/6.11						
5 Grandmother								
6 Son	SOURCE	Porharel	271060/1	282 1eaH	mappely	02-09-064		
7 Daughter	(1) Solic	L Sasina Porch	مرا		A REPORT OF THE PARTY OF THE PA			
8 Daughter in Law (son's wife)*						740		
9 Father in Law (of married women)	* Aguldho	porthref Lsopina port s porthref	121060/3	6216 Kat	macry	26-17-206		
Occupation/Business:	251-4-252			*not	ompulsory	for low risk customers		
SN Name of Firm/Company	/Office	Address	Wel	Site"	Post	Annual Income		
1		a =====	1					
2								
3								
4	15	use romark on affiliat	last		-			
HPP/PEP/NF2F: Yes No		yes, remark on affiliat		than 50 Lakh		>50 Lakhs		
Expected Yearly Turnover:		Less than 5 Lakh			7			
Expected Monthly Transaction:		Less than 15		than 25		>25		
Purpose of Account: Remittance		Business	Othe	1245				
Source of fund Salary Donation	Remittance Borrowings	☐ Investment ☐ Loan Repaymen		of Asset Prs (Please Specify	1			
Punished or charged for any criminal a	ctivities in the past	´ ☐ Yes ☐ No	12					

Supporting Documents (provided by the customer)	V
VALUE OF THE SECOND STREET, THE	
Photo of account holder Obtained	☐ Not obtained
Photo of beneficial owner Obtained	☐ Not obtained
Identification Document Citizensh	p Passport Others
Address verifying document (Any one) Utility Bil	(Water/Electricity/ Driving License Land ownership document
☐ Rental Ag	
Employee ID (Mandatory for Govt. Officials) N/A	☐ Yes ☐ No
0.40 3.21	
ite Map Permanent Address Present Address	ess
Ping Road 13	Jehr check Fing Rood Jammaid of College many Residence Maciel 13 ann Projet Solak
We hereby declare that all the information & document	s provided to the bank are true & Correct.
We hereby declare that all the information & document	s provided to the bank are true & Correct.
Right Left Thumb Impression	Account Holder's Signature
Right Left Thumb impression ote: Any document/information if not exists, shall be de	Account Holder's Signature
Right Left Thumb impression ote: Any document/information if not exists, shall be designed.	Account Holder's Signature clared an N/A.
Thumb Impression Date: Any document/information if not exists, shall be deserted account Risk Grading:	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check:
Right Left Thumb Impression Ote: Any document/information if not exists, shall be december to the state of the shall be decembered. Baccount Risk Grading: High Risk	Account Holder's Signature clared an N/A.
Right Left Thumb Impression Dite: Any document/information if not exists, shall be deserted by the state of	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check:
Thumb Impression ote: Any document/information if not exists, shall be decount Risk Grading: High Risk	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check: Yes No
Thumb impression ote: Any document/information if not exists, shall be de Ba Account Risk Grading: High Risk	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check: Yes No Date Updated on:
Thumb Impression ote: Any document/information if not exists, shall be decount Risk Grading: High Risk	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check: Yes No
Thumb impression ote: Any document/information if not exists, shall be de Ba Account Risk Grading: High Risk	Account Holder's Signature clared an N/A. ank's Use Only Information Update in Core Banking System & accuity Check: Yes No Date Updated on:



KYC FORM FOR INDIVIDUAL CUSTOMER

Screening ID

HUZE	115	सिटिशन्स बै	क शन्टरनेत	रल लिं.						KYC ID					
Account Num	ber					T		TT				Date	10-	13-2045	5
Client ID															
Account Hold	er's Name	- An	ñu s	show	wa						PAN No.				
Date of Birth:						/ ID N	0.:17	741	8489		Issuing O	office & L	ate:		
Gender:	9	V E		Passpo							Issuing O	ffice & E	ate: 2 04	18-12-27	Kathe
Nationality: [Res.	□ N	on Res.	Marita	Stat	us:				- 8	Occuptio		Winel		
Phone No.: 🗸	4672	033		Mobile	No.:	9	851	089	492			5.5			
E mail:												PO B	ox:		
Present Addre	1741 715								Address						
Ward No.:	20	: 01		n				No.:		.0)	1./	0			
Tole: K	< 4 male	1 0	146 1	Jar 9		WE I	lole:	e No.:	NUM	ay o	club	11101	(1	-	
District:	Kathu	nandi	,						Kat			14.	-		
In case of Nor			1				The State of the S		wner	274 C 076	(Constraint)	No			
NRN ID (If app		27				-			wite)		L	_1140			
Foreign Addre				l-Let		31					1-60	1 64	357		
Country: _						- 11	Addre		1						
Contact No.:				1			Relat	ion:							
Visa:							Contact No.:								
Visa Expiry Da	ite:					_									
Family Membe	er:						Ton to	BE							
SN	Relatio	n			Nai	me &	Surnar	me	- 0	itizens	hip No.*	Issuir	g Office*	Date of issu	e*
1 Spouse				Gaur						22	04	Kath	mande	05-81-	2062
2 Father				Som											
3 Mother				AX M											- 300
4 Grandfat 5 Grandmo			9	Sed.	Sh	anv	na v	Chan	al	-					
5 Grandmo	atrier		P			-1.		1616				14 1			
7 Daughter	г		-	Pin.	V	SIN	grw	1a_		129	504	Val.	mand 4	05-01-	200
	r in Law (s	on's wife	e)*	MI	9	SVC	M. In	(Q		20	06	Pigr	Internal I	05-09	- 2002
	Law (of ma														
Occupation/B	usiness:			4150			981					*not	ompulsory	for low risk custo	mers
	Name of FI	rm/Con	npany/C	ffice			Ad	ddress			Web Site		Post	Annual Inc	ome
1															
2															
3					0.		-		_ =						
4	VE. TIVE		Min			16		al as a	ffiliation						
HPP/PEP/NF2	-	-	No			ii ye.		-	5 Lakhs	9.500	Less than	EO Labb		>50 Lakhs	
Expected Yea	200		- 3			-		77 77	561	-			5		-
Expected Mo		- C - O - O - O - O - O - O - O - O - O	- 4	Deni	OM IT			s than 1	1.0		Less than Others	23		>25	16
Purpose of A	ccount: L	Remit		Savin	-			iness estment	+		Sale of A	ceat			
Source of fun	nd L	Salary Donat		Remi			_	n Repay		-	Others (M		1		_
Punished or c	harged for	any crim	ninal act	ivities in	the p	ast	Yes		No	-					18

Samuel Branch Control of the Control		
Supporting Documents (provided by the customer)	4 → 14140. ADSCH 07	
Photo of account holder Obtaine		199
Photo of beneficial owner Obtaine		The state of the s
Identification Document Citizens	The state of the s	Others
	(Water/Electricity/ Driving License Telephone Bill)	Land ownership document
Rental A	greement letter from local authority	☐ Voter ID
Employee ID (Mandatory for Govt. Officials) N/A	Yes	□ No
HOLD ST. T. T.		
Site Map Permanent Address Present Address	dress	
Ping Road	alkhy chock Ring Ross	Mil Lesidona
/We hereby declare that all the information & documents Right Left	ts provided to the bank are true & Correct.	
Thumb Impression		3021
		Account Holder's Signatu
lote: Any document/information if not exists, shall be d		
	ank's Use Only	
Account Risk Grading:	Information Update in Core Ba	nking System & accuity Check:
High Risk Medium Risk Low Risk	Yes No	
☐ HPP/PEP	Date Updated on:	
Name listed in Sanction	0.000 miles 100	1
☐ Yes ☐ No		
Remarks / information if any:	Remarks if any:	
Remarks / information if any:	Remarks if any:	
Remarks / information if any: Barnch Manager	Remarks if any: CSD Staff	

Citizens International Ltd. International Ltd. International Ltd. International Property of the Property of th

KYC Form for Individual Customer

	Branch शाखा			
CIFID		Date <u>20プ</u>	18-07-13	1
Screening ID		KYC ID		
full Name BLOCK Letter) ITF (中間時期)	HHOGEA		1910	
Date of Birth			Female Other महिला अन्य	
Marital Status Single व्यक्ति स्थिति अविवाहित रिव	Married Other Religion वेवाहित अन्य वर्म		CANCELL CONTROL OF THE PARTY OF	Other अन्य
Vationality विद्रयता	Citizenship No. 64198	Issuing Office जारी गर्ने कार्यालय रि प	upoundehi Issued Date जारी मिति	7038-77-3
Passport No. ग्रासपोर्ट ने.	Issuing Office जारी गर्ने कार्यालय	Issued Date जारी मिति	Expiry Date समाप्ति मिति	
Other ID No. == परिचयपत्र न	Issuing Office जारी गर्ने कार्यालय	Issued Date जारी मिति	Expiry Date समाप्ति मिति	
Permanent Address/स्थायी हेगा	ना	Present Address/हालको	ठे गाना	
House No. Tole Tole घर नं टोल Rural/Municipality III.पा./नेपा District जिल्ला Rathman tu Phone No.	Amouth fath Ward No. 4 वडा नं Province No. 0 प्रदेश नं. Zone अञ्चल Mobile No. मोबाइल नं.	घर नं. टोल Rural/Municipality गा.पा./न.पा. District जिल्ला Phone No.	Zone अञ्चल Mobile No मोबाइल न	Ward No. वडा नं. Province No. प्रदेश नं.
mail ਸੇਲ	मोबाइल न. 9851,02012	PAN No. पान न.	P.O. Bo: पो.बन	x No.
In case of residing in rented he	ouse/बहालको घरमा बसेको भए	In case of NRN/गैर आवी	सिय नेपाली भएमा	
		NRN ID No. एनआरएन आईडि न		
Name of Land Lord प्रचनीको नाम Phone No.	Mobile No.	Foreign Address विदेश स्थित ठेगाना City/State	Country	
होन न	मोबाइल न	शहर/राज्य Type of Visa भिसाको प्रकार	देश Expiry Date समाप्ति मिति	
शिक्षेक योग्यता 💛 🗀 🦠	Below SLC SLC Interm एसएलसी मुनि एसएलसी प्रविणता Gervice Business Profess गोकरी व्यवसाय विशेषज्ञ	ediate Bachelors प्रमाणपत्र तह स्नातक	Masters Ot स्नातकोत्तर अन् Others अन्य	
n case of service/नोकरी भएमा Name of Institution/Firm संस्था/कार्यालयको नाम		Designation, पद/स्तर	/Position	
Address ठेगाना		Contact No. सम्पर्क नं.		
Source of Income		Pension Remittanc निवृतिभरण विग्नेषण	e Others	
	to Rs. 1 lakh १ लाख सम्म			
Are you a Highy Positioned Per	son (HPP) ? Yes No	If Yes, Position यदी हो भने, पद		
के तपाई उच्चपदस्थ व्यक्ति हुनुहुन्छ Are you a Politically Exposed Pe के तपाई राजनैतिक प्रभावित व्यक्ति	erson (PEP) or Associated with Any PEP ? हुनुहुन्छ वा कुनै राजनैतिक प्रभावित् व्यक्तिसँ	Yes	No Els्न	
lf yes, Name of PEP यदी हो भने, उक्त व्यक्तिको नाम	999	Name of Political Pa राजनैतिक दलको नाम	arty	
Position पद		Relationship with P राजनैतिक व्यक्तिसँगक		
Have you been convicted for ar तपाई कुनै अपराधमा कसुरवार ठहाँ	ny crime रेनु भएका छ ? िहो िहोइन			

Famil	y Details पारिवारिक विवरण	The state of the s				
S.N.	Relationship (सम्बन्ध)	Full Name (परा नाम)		izenship No. गगरिकता नं.)	Issuing Office (जारी गर्ने कार्यालय	Date of Issue (जारी मिति)
1	Spouse (पति/पत्नी)	Gita Rumari Mudbha		discovering the second		
2	Father (बुबा)	Natendra Humas Sh	or way	17/201	nujanaen	2046-70-01
3	Mother (आमा)	Shiva Kumori Mud		AGD FO-CI		V45) kg 1
×4	Grandfather (हाजुरनुवा)	30makant Sharma	Judhak'		SHE ALL MANAGER	4-1-1
5	Grandmother (हजुरबुबा)	POST CONTRACTOR	9.136			4000
6	Son 1 (छोरा १)	Satish Pokhrel	14 4275	060/12825	Rathma	ndu-
7	Son 2 (छोरा २)	Samip POKKER		1060/1203		My 2070-06-0
8	Daughter 1 (छोरी-६)	Sabina Porntel	271	21538/030	Haltonard	14 3065-12-26
9	Daughter 2 (छोरी २)	SATTEMA, NOTE A SECOND	145		dott.	A CAMPAGE AND A
10	Daughter-in-law 1 (बुहारी १)	Taller Co. Laber Co.	1906 by 124	5 1 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sabrilla D. Albin	THE SHARE STATE OF
11	Daughter-in-law 2 (बुहारी २) Father-in-law (ससुरा)	V Recent Conference Conference Co	等處 30.7%	21-11-11		1000
CONTRACTOR OF	Declartation	Marke year to be a second to the second to t	and the same of the same			WASHINGTON DE LINE
Are you के तप Do you के तप	u have Account in Citizen Bank ईको सिटिजन्स बैकमा खाता छ	दा हुनुहुन्छ ?	No Bişə No Fişə	राज्य अमेरिकाको	नागरिक हुनुहुन्छ ?	ि । जिह्न
	Name of Account । भने, खाताको भाम			Account No. खाताः नम्बर	007 - 34	CH
	u have Account in Other Banks	Yes No If yes, Bank & Branch Name		Coldi 1194	Type of Ac	count
	ो अन्य बैकमा खाता छ ?	हों 🖳 होइन यदी छ भने, बैक र शाखाको	नाम		र्खाताको प्र	
Site M		Present Address Name of nearest lar				ance (M)
नक्सा	स्थायी हेगाना	🔲 हालको वेगाना 📗 नजिकको प्रसिद्ध स्थान	ERPONDURE.		दुरी	()+1)
		culesore (IKali mad			Harris Ha
		nation and documents submitted to the bank are वरणहरू तथा कामजातहरू साँधा रहेको घोषण गर्दछ्		W.	Right दायाँ	Left बायाँ
	-7/2					
Signat Date:	ure (दस्तखत)					
मितिः		Bank's Use Or	ly		Thumb impressio	n औटा छाप
	Supporting Documents Submit	tted by Customer	2 4 1 1			
, VA	Photograph	Yes No				
	Identification Document	Citizenship Passport	Other			
	Employee ID Address Verifying Document	Yes No	o Cartificati		Other	
	Risk Grading Low Ris	Utility Bill Land Ownershi Medium Risk High Risk, Reasi	127 - E-107 C - 1 - 1 - 1	☐ PEP	Joaner	
	Has the information updated in	core Banking System & Trust AML/GoAML checked in Blacklist report of CIB	Yes Yes Yes	No No	Other	
	Prepared & Checked By	Verified E	y		Appro	ved By

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KYC Form for Individual Customer

Branch शाखा	
CIFID	Date मिति
Screening ID k	KYCID
FUII Name (BLOCK Letter) FUI (Augustin)	BHARTPORHREL
Date of Birth A.D.	Gender Male Female Other
Marital Status Single Married Other Religion	लिङ् पुरुष प्रमहिला अन्य Hindu Muslim Buddhist Christian Other हिन्दु पुरिलम बौद्धमार्गी क्रिष्टियन अन्य
Nationality Citizenship No. 560	Issuing Office प्रेक्टिशे Issued Date 2046-10-01
Passport No. Issuing Office	Issued Date Expiry Date
पासपोर्ट नं. जारी गर्ने कार्यालय Other ID No. Issuing Office	Issued Date Expiry Date
च परिचयपत्र नं जारी गर्ने कार्यालय	जारी मिति समाप्ति मिति Present Address/हालको ठेगाना
Permanent Address/स्थायी वेगाना	
House No. Tole Xunnahri Pah Ward No. 1 प्राप्त नं टोल प्रिकास करें कि प्राप्त नं प्राप्त नं स्वाप्त	House No. Tole Ward No. पर न. दोलं वडा न. Rural/Municipality Province No. गापा,/न.पा. District Zone
দিল্লা Phone No. 0142 48580 Mobile No. 985	जिल्ला अञ्चल Phone No. Mobile No. फोन नं. मोबाइल नं
फोन न. मोबाइल न. <u>9841267958</u> Email ईमेल	PAN No.
In case of residing in rented house/बहालको घरमा बसेको भए	In case of NRN/गैर आवसिय नेपाली भएमा
	NRN ID No.
Name of Land Lord ਬਾਰਬਜੀਕੀ ਜਾਸ	एनआरएन आईडि न
Phone No Mobile No	विदेश स्थित ठेगाना Country
फोन नं. मोबाइल नं.	शहर/राज्य देश Type of Visa Expiry Date
reation Culification Below SLC SLC Intermediat	भिसाको प्रकार समाप्ति मिति
ucation Qulification हैelow SLC प्रस्एलसी प्रविणता प्रमा है हिक योग्यता Service है	णपत्र तह स्नातक स्नातकोत्तर अन्य
In case of service/नोकरी भएमा	Designation/Position
Name of Institution/Firm संस्था/कार्यालयको नाम	पद/स्तर -
Address वेगाना	Contact No. सम्पर्क नं.
	Pension Remittance Others नेवृतिभरण विभ्रेषण अन्य
Annual Income Upto Rs. 1 lakh antifa आय एक. १ लाख सम्म प्राप्त २० लाख सम्म	
Are you a Highy Positioned Person (HPP) ? Yes के तपाई उच्चपदस्थ व्यक्ति हुनुहुन्छ ?	If Yes, Position यदी हो भने, पद
Are you a Politically Exposed Person (PEP) or Associated with Any PEP ? के तपाई राजनैतिक प्रभावित व्यक्ति हुनुहुन्छ वा कुनै राजनैतिक प्रभावित् व्यक्तिसँग सर	म्बन्धित हुनुहुन्छ ? िहो प्रिके
if yes, Name of PEP	Name of Political Party राजनैतिक दलको नाम
यदी हो भने, उक्त व्यक्तिको नाम Position	Relationship with PEP
पद	राजनैतिक व्यक्तिसँगको सम्बन्ध

Famil	y Details पारिकारिक विवरण					THE RESIDENCE OF THE PARTY OF T
S.N.	Relationship (सम्बन्ध)		Name	Citizenship No.	Issuing Office	Date of Issue
1	Spouse (पृति/पत्नी)	(Asi	नाम)	ं (नागरिकता न.)	(जारी गर्ने कार्यालय)	(जारी मिति)
2	Father (बुबा)	Money 6	OKHAEL	64188	Rupandeki	20384100
3	Mother (आमा)	Agnidhas POH	ntel .			
4	Grandfather (हजुरबुवा)	Mandari	horoune		The second of	4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
5	Grandmother (हजुरबुबा)			190	Daller Bridge A	-1700km 44
6	Son 1 (छोरा १)	Quality Nath	1.0 11.01.00	/ ph v/s dl. d	LUNCON STA	anter cal
7	Son 2 (छोरा २)	Sorish boxt		24 70to hos		
8	Daughter 1 (छोरी-१)	Samil DON		047060/15032	A STATE OF THE PARTY OF THE PAR	120-06-04
9	Daughter 2 (छोरी २)	Sabina POHL	161	2+1000/30510	Radhmandu	3062-12-36
10	Daughter-in-law 1 (बुहारी १)	The Season Color Strains	the Alexander Late	- 1	CIMAGEA	×
11	Daughter-in-law 2 (बुहारी २)	T. Children Co. Co. Co.	- Humbly Avenue San	ENTRY HAVE TO	TO THE PARTY	- miletila etc
.12	Father-in-law (ससुरा)	2 4	Total Or The	DEST AND THE PARTY OF	AND WINDS	
CONTRACTOR OF	THE RESERVE OF THE PARTY OF THE	and the later of t	AND AND DESCRIPTION OF THE PARTY OF THE PART	Christian Colonia Salah		N. of Concession
	Declartation ou a U.S Resident ?	Yes N	O. Arous	ou a U.S Citizen ?		ar III No
के तप	ई संयुक्त राज्य अमेरिकाको बासिन	दा हुनुहुन्छ ? िशे		ाई संयुक्त राज्य अमेरिकाको	नागरिक हनुहुन्छ ? ही	es UNO होइन
Are vo	ou a Permanent Resident Card	(Green Card) Holder?		No	333	
के तप	ई संयुक्त राज्य अमेरिकाको स्थायी	बसोबास (ग्रिन कार्ड) धारक हुन्		होइन		
Doyo	u have Account in Citizen Bank	k Internation Ltd. ?	Yes	No		BENERAL CO
	ईको सिटिजन्स बैकमा खाता छ ?		一 前 一	डोइन		
	Name of Account । भने, खाताको नाम			Account No.	051-	
	u have Account in Other Banks ?	Yes No If yes, Bar	nk & Branch Name	खाता नम्बर	Type of Accou	int
	ो अन्य बैकमा खाता छ ?	हों होइन यदी छ भ	ने, बैंक र शाखाको नाम		खाताको प्रकार	
Site M	ap Permanent Address	Present Address Na	ame of nearest landmar		Distance	e (M)
नक्सा	स्थायी हेगाना	हालको देशाना न	जिकेको प्रसिद्ध रहान		दुरी (मि)	
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		TO AMERICAN PROPERTY.			NAME OF TAXABLE PARTY.	AND DESCRIPTION AND DESCRIPTION OF THE PERSON OF THE PERSO
I/We h	ereby declare that all the inform यहाँ उपलब्ध गराइएका सम्पूर्ण वि	ration and documents submitte	ed to the bank are true a	nd correct.	Right दायाँ	Left बायों
of den	नता वनराव्य नहाइदका राजून व	विश्वादयं तथा कार्गणात्वरः सामा	रहका पावण नवस्तुनवस्त		,e09)	0-2-5-01
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Signati	ure (दस्तखत)					
Date:				transfer to the	Supplement Supplement	ON BERNON
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	Supporting Documents Submit			N. C. C.		
	Photograph	Yes	No			
	Identification Document	Citizenship	Passport	Other		
	Employee ID	Yes	No			
	Address Verifying Document	Utility Bill	Land Ownership Certi	ficate	Other	THE WALL ST
	Risk Grading Low Risk		High Risk, Reason	HPP PEP		
	Has the information updated in			Yes No	Other	
	The customer's name has been	checked in Blacklist report of C	JB .	Yes No		
	Self Declaration Obtained	The state of the s	No.	Yes No		
	Remarks If any:	No.	death and property	Total Control		
		ENSURE CONTRACTOR		THE WARE TRANS		
	THE RESERVE OF THE PERSON NAMED IN					THE WATER
JUNE 193	Prepared & Checked By		Verified By		Approved	D.



KYC Form for Individual Customer

CIFID	Branch शाखा		Dat		67-73	
Screening ID		кус	押(त D			
Full Name BLOCK Letter) नाम (नेपालीमा)	IRAHE	AN			9	6 c c
Date of Birth	13B.S.	A.D. Ge 氧.Ħ. 同o		Male हिं	male Other हेला अन्य	
Marital Status Single वाहिक स्थिति अविवाहित	Married Other विवाहित अन्य	Religion Hir			ddhist Christia द्वमार्गी क्रिष्टियन	
lationality षिद्रयता Nepali	Citizenship No. 🛂 अ	-E8118/1N	Issuing O जारी गर्ने	ffice कार्यालय	Issue जारी	ed Date 2048-12-7 用品
Passport No. गासपोर्ट नं.	Issuing Office जारी गर्ने कार्यालय		Issued Da जारी मिति	ite		ry Date प्त मिति
Other ID No. त्य परिचयपत्र ने	Issuing Office जारी गर्ने कार्यालय	y Mg	Issued Da जारी मिति	ite	Expi समार्ग	ry Date प्त मिति
Permanent Address/स्थायी ठे	गना		Present Ac	ldress/हालको दे	गाना	
House No. Tole विशेष उर ने दोल Rural/Municipality गापा/नेपा District जेल्ला Rathman Phone No.	Zone अञ्चल Bogh Mobile No.	न पा vince No. 03 Ri न गा 04 1 ि	ouse No. र म. ural/Munio प्पा/न.पा. istrict neen hone No. गेन ने.	Tole ਈਲ zipality	Zone अञ्चल Mobile। मोबाइल	
Email ਭੇਜੇਲ				N No.		P.O. Box No. पो.ब.न
Name of Land Lord घरघनीको नाम Phone No. फोन न	Mobile No. मोबाइल नं.	ए: 	RN ID No. नआरएन अ oreign Ad iदेश स्थित ity/State हर/राज्य ype of Visa सेसाको प्रका	dress वेगाना	Countr देश Explry समाप्ति	Date
,ucation Qulification हैक्षिक योग्यता n case of service/नोकरी भएमा Name of Institution/Firm संस्था/कार्यालयको नाम Address हेगाना	Below SLC SLC एसएलसी पुनि एसएलसी पुनि विकास विकास विकास विकास करें।	Intermediate प्रविणता प्रमाणपत्र Professional विशेषज्ञ		Bachelors स्नातक Housewife गृहिणी Designation/Pi पद/स्तर Contact No. सम्पर्क नं.	Masters स्नातकोत्तर Others अन्य osition	Others 31-2
Source of Income Source of Income त	लब च्यावसाय पि pto Rs. 1 lakh	Rent Pens बहाल निवृति Upto Rs. 20 lakh रू. २० लाख सम्म		Remittance विप्रेषण Upto Rs. 50 । रू. ५० लाख	\$400,000 pt 100	s e Rs. 50 lakh চান্ত মন্दা ৰৱী
Are you a Highy Positioned Pe के तपाई उच्चपदस्थ व्यक्ति हुनुहु- Are you a Politically Exposed I के तपाई राजनैतिक प्रभावित व्यक्ति If yes, Name of PEP यदी हो भने, उक्त व्यक्तिको नाम Position पद	erson (HPP) ? Yes छ ? Person (PEP) or Associated with क हुनुहुन्छ वा कुनै राजनैतिक प्रभा	होइन यदी Any PEP ?	Name रাजनैति Relatio	q Yes J		
Have you been convicted for तपाई कुनै अपराधमा कसुरवार ठ	any crime हरिनु भएका छ ? िहो	No होइन	_^	E. Car		

S.N. Relationsi (মাৰন্য) 1 Spouse (पति/पत्नी) 2 Father (ব্ৰুৱা) 3 Mother (সাদা) 4 Grandfather (স্টড্যুংব্র	hip		- China Carlotte	WITH THE REAL PROPERTY.		
1 Spouse (पति/पली) 2 Father (ব্রুরা) 3 Mother (সাদা) 4 Grandfather (স্তুব্	TO SEE SEE SEE SEE SEE SEE SEE SEE SEE SE	Full Name		THE PARTY OF THE P		
2 Father (बुबा) 3 Mother (आमा) 4 Grandfather (हजुरबु		(पुरा नाम)		Citizenship No. (नागरिकता ने.)		Date of Iss
3 Mother (आमा) 4 Grandfather (हजुरबु				(नागरकता न.)	(जारी गर्ने कार्यालय)	(जारी मिति
4 Grandfather (हजुरबु	2 mas	rasad Rha	-			
4 Grandfather (हजुरबु 5 Grandmother (हजुर		i Khanal	nai			
5 Grandmother (हजुर	THE RESERVE OF THE PARTY OF THE	Chritina	7 4		100	
	बुबा)		1	- Vije	Company of the same	Transfer 4
6 Son 1 (ছাবা ৭)	Garage	ar Sharma	3 14	150		(School II
7 Son 2 (छोरा २)		SHOLLING	100 XX	15504	U total	2062-01-
8 Daughter 1 (ভাগ ৭)		Sharma	2.50	S. III S. P.		
9 Daughter 2 (ছাবী ২)	The second secon	SHOWING	20-90-	271080 12	906	2064-09.
10 Daughter-in-law 1 (3		a Dahal		112 5 000 1134	21100250	Al III A
11 Daughter-in-law 2 (3	30141 4)	a samon	and the same			L. Carlo
12 Father-in-law (ससुरा)	1.434			12 30 Mg.	To be Spinish	10Minto
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re you a U.S Resident ? तपाई संयुक्त राज्य अमेरिका re you a Permanent Reside	100	es No । होइन	Are you a U के तपाई संयु	S Citizen ? क्त राज्य अमेरिकाको	। मागरिक हुनुहुन्छ ? रिह	es No
and of the close could distill the	का रक्षाया बसाबास (ग्रिन कार	कि _ ८ व्यक्तात वरपाय (No BIST		3	0121
or new and rettle places aldottell &	zen Bank Internation Ltd. ?	Yes				NAME OF THE OWNER.
ves. Name of Account	- Anju Sh	a) ma	<u></u> होइन			
ी हो भने, खाताको नाम		Carse		Account No.	051	
you have Account in Othe इिको अन्य बैकमा खाता छ	PACE TO SERVICE AND ADDRESS OF THE PACE AND ADDRESS OF	If yes, Bank & Branch Nam	ie .	खाता नम्बर		
The second secon		यदा छ भने, बैक र शाखाक	ने नाम		Type of Accou	int
e Map Permanent Ad सा स्थायी देगाना	dress Present Addre		andmark			
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nereby declare that all the	information and documents	submitted to the bank are	true and correc		SELECTION OF THE PERSON OF THE	Carried A
ी गर्ने सालका मान्यका	पूर्ण विवरणहरू तथा कागजात	हरू साँची रहेको घोषण गर्दछ	/गर्दछी ।		Right दार्यो	Left बायाँ
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ture (वस्तखत)		Sank's Use a			a non	
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ture (दस्तखत) Supporting Documents Si Photograph Identification Document Employee ID Address Verifying Docume	Yes Citizenship Yes	No Passport No	☐ Other		Thumb Impression औरा	छाप
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Supporting Documents Su Photograph Identification Document Employee ID Address Verifying Docume Risk Grading Lov Has the information update The customer's name has b	Yes Citizenship Yes Tes Utility Bill W Risk Medium Risk ed in core Banking System 8.	No Passport No Land Ownership (☐ Other Certificate ☐ HPP ☐ Yes	PEP Oti	her 1	BIT
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KYC FORM FOR CORPORATE CUSTOMER संस्थागत ग्राहक पहिचान विवरण फाराम

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· 100 4 1	1 1 1					
Account Number 0 0	700	0 7 30 6	A	Date Mit:		
Client ID Niew Vituaus						
NAME OF THE PARTY					212.5	
ccount Name:					100000	
वाताको नामः Moon o		Registration No.: 1	Nt. Ttg.	Registration Office	& Date;	
rafi 自由 206キー】	5-08	Registration No.: दर्ता न 8171410	64\068 Regd./PAN Expiry Date	दर्ता कार्यालय र मिति	Post i	ce by the con
यायी लेखा न 30 40	112235	- V	समाप्ति मितिः		100	11995 JOBY -15-C
Office Contact No: ०५५	583113	2	Beneficial Owner-Nam हिताचिकारीको नामः	" "da .	shou	ma
Office Fax No: गर्यालय प्रयासन गः			Address: Galkh	WL W	15-1.5	
Office Email:			Citizenship No.: नागरिकता नं: १३ २५।		3 2	
ost Box No.:			Relation:		9851	1089425
तिह्द बक्त नंः Registered Address दर्ता गरिएको ठेगाना) Ball	S		नाताः Business Address	Balkhu	400.	103343 F
दर्ती गरिएको ठेगाना) 🚨 🖎 Vard No.: 🔍 📉	Tole:		(व्यवसायिक ठेगाना) Ward No.: 14	Tole:		
हा ने:	टोल:		401 4	टोल:		Zah Dan
			House No.:			188 - CON
			घर नः			18/ 5/4
House No.: iv 국: District:	Province No.:		District:	Province ਧਰੇਗ ਜੋ:	No.: e	3 4.11
ार ने: District: जिल्ला: Hathmandu	प्रदेश मः 0.9	Trading TService	District: जिल्लाः Ko4hm o	ार्थिय प्रदेश नेः	-	200
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ार नः District: जेल्लाः Hathmandu Hature of Business: □ Man यवसायको प्रकृतिः □ जन्पा	प्रदेश नः 0.9 nufacturing दन	' व्यापार ' सेवा	District: जिल्ला: KOANNO Import/Export	Other Number o जन्य शास्त्राको संस्	of Branche	200
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ार ने: District: जिल्ला: Nathmondu Hature of Business:	प्रदेश नः 0.9 nufacturing दन and Chief Executives	व्यापार सेवा ve) व्यवस्थापन (संघालक सवस्य Permanent Address	District: जिल्लाः २ प्रमुख कार्यकारी अधिकृत Present Address	Urd प्रदेश नं: Other Number o अन्य शाखाको संग (Citizenship No./Issu	of Brancho ख्याः ing Office ने कार्यालय	Phone/Mobile No.
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स्य ने: listrict: arem: Hathmondu lature of Business: Man प्रवस्तायको प्रकृति: उत्पा anagement (BOD Members ar Full Name & Po प्रया नाम ए पद	प्रदेश नः 0.9 hufacturing दन nd Chief Executionst wa Marvel	व्यापार सेवा ve) व्यवस्थापन (संचालक सवस्य Permanent Address स्थायी ठेगाना Gollkhu रियोधिंसे	District: जिल्लाः स्टिन्नेभ्रास्ट जिल्लाः स्टिन्नेभ्रास्ट जायात/निर्यात हक् र प्रमुख कार्यकारी अधिकृत Present Address हालको तेगाना Galkhu Hulenhaa	Other Street प्रदेश नः Other अप्राधाको संव	of Brancho ख्याः ing Office ने कार्यालय	Phone/Mobile No. फोन न/मोबाइल न 9851020120
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Photo of account operators Photo of all managerial personnel Citizenship of all managerial personnel Registration Document Audited Financials of last fiscal year Income Tax Clearance of Last Fiscal Year	Obtained Obtained Obtained Obtained Obtained Obtained Obtained OTE Registration Certificate OTE No Specify the FY No Specify the FY OTE OF No Specify the FY	Not Obtained / SAAAA Not Obtained / SAAAAA MOA/AOA	Remarks, if any
Account Risk Grading: High Risk Medium Risk PEP Name listed in OFAC (Name listed in sanction) Yes No Remarks / information if any:	Low Risk	Properties of the properties o	g System:
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व्यक्तिगत ग्राहक पहिचान फाराम KYC FORM FOR INDIVIDUAL CUSTOMER

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2	Father (बुबा)		pokh				,
3	Mother (आमा)	Mariano	PORTE			II.	
4	Grandfather (हजुरबबा)	•					/
5	Grandmother (हजुरआमा)	J-10-					
6	Son 1 (घोरा १)						
	Son 2 (छोरा २)	_					
7	Daughter 1 (छोरी १)						
	Daughter 2 (छोरी २)					L	
8	Daughter in Law (बुहारी) (son's wife)						
9	Father in Law (शयुरा) (of married women) (विवाहित महिलाको हकमा)				1		
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Are 命 a	you civil servant/high position/poli तपाई राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिज्ञ	tician/Keiatives of politicia /राजनीतिज्ञको नातेदार हुनुहुन्छ	61 (Yes No	म	100	ore than 50 Lakh
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	ning नासक कराबार रक्त. pected Monthly No. of Transaction: मानित मासिक कारोबार संख्या :	ŧ	रेण्ड th	an 15	Less than 25 २५ भन्दा कम	□ M	ore than 25 भन्दा बढी
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	ाको उद्देश्यः विश्रेषण विश्रेषण	्र यचत	च्यापार estment		अन्य of Asset धी विजि	Rental Income	
	urce of fund पिलब को योत पिusiness पि	ं विप्रेषण ं लगा-		ent Othe	ers (Please Specify)	चर भाडा	
	न्यापार	े सापटी 💛 ऋण	किस्ता भुता	ानी "" अन्य	(जल्लेक गर्नुहोस्)	-	
Pur	nished or charged for any criminal act तमा फोजदारी कसरमा दण्डित या जरियाना	vities in the past ?	⊐ ^{Yes}	□No 89			

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I/We hereby declare that all the information & c	ocuments provided to the bank	k are true & Correct.	
म/हानी यहाँ सपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा का	गजातहरू साँचो रहेको घोषणा गर्दछु/ग	र्वधी ।	
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		(1)	1
Thumb Impression औता छाप			Account Holder's Signature
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Note: Any document/information if not exists, s	hall be declared an N/A.		(Navroj Pokhve
Land Land Life Street, 1945	Bank's Us	e Only	
	Children Co. Printed Street, Co. Str.		
Supporting Documents (provided by the cust	omer) □□Øbtained	Not obtained	_
Photo of account holder	Obtained	Not obtained	
Photo of beneficial owner	Deftizenship	Passport	Others
Identification Document	Utility Bill (Water/Electricity		Land ownership document
Address verifying document (Any one)	Telephone Bill)	letter from local authority	☐ Voter ID
AND THE STREET S		☐ Yes ·	□ No
Employee ID (Mandatory for Govt. Officials)	□ N/A	☐ les	
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Account Risk Grading:	*	Information Update in Core Bankir	ng System & accurty Check:
Account Risk Grading:	Low Risk	□ Mar. □ Na	
	Low Risk	□ Mar. □ Na	
☐ High Risk ☐ Medium Risk	Low Risk	F001 10 20-20-00	
☐ High Risk ☐ Medium Risk ☐ HPP ☐ PEP	Low Risk	□ Mar. □ Na	
High Risk Medium Risk HPP PEP Name list in Sanction	Low Risk	□ Mar. □ Na	
High Risk Medium Risk HPP PEP Name list in Sanction Yes No	Low Risk	Yes No Date Updated on:	
High Risk Medium Risk HPP PEP Name list in Sanction Yes No	Low Risk	Yes No Date Updated on:	9.07.20.19



त्यक्तिगत ग्राहक पहिचान फाराम KYC FORM FOR INDIVIDUAL CUSTOMER

Scree	ening ID		KYC ID	(A) I		Pid:	
Acco खुला	ount Number	S08505612-005-0-92-0.0	1. 040,000 MD-12VI		Client ID प्राहक आई.डि		
	ount Holder's Name: (द्रां कि	Kuno	i Mud	aboli Pok			
Date	e of Birth: Act +11/0+ DA	Citizenship	0 / ID No.:	60	Issuing Office	& Date: Para	ioultoby
	所語: 1510 41 20 3 6 ider:	नागारकता/प	रिचय पत्र नः 💙		Issuing Office	& Date:	1 - 1/2-1
लिङ्ग No.	ionality:	Passport N राहदानी न	lo.:	35	जारी गर्ने जिल्ला Passport Expir	Md:	
राष्ट्रि	uni Mepali				राहदानी समाप्ति	(A) (A)	
Pho फोन	ne No.:	Marital Stal वैदाहिक स्थि	tus: Marrie	d Mobile No.: -		Decuption: BL	usiners
E ma	ail: ~					PO Box: पोष्ट बक्स न:	
Pres War	sent Address (हालको ठेगाना) d No.:	oense - Alexander	r.	Permanent Adde Ward No.: यहा नं:			
वहा Tole	Live lead am	/		Tole:		1	
शेलः Hou	ise No.:		LICHT.	ਟੀਲ: House No.:		Sane	
घर र Diete		Province No. 2		घर नः District:	_/_	Province No.	14
जिल्ल		Province No. प्रदेश नः	5	जिल्लाः		प्रदेश नेः	
VRN रिअ orei विशि	ise of Non Residence (गैर आवासीय ID (If applicable): अवासीय परिचयपत्र (भएमा) ign Address: क तेगाना: htry:	नपाला भएमा)		Beneficial Owne If Yes (यदि छ भने Beneficial Owne हिराधिकारीको नामः Citizenship No.: नागरिकता नं:).	Yes No By	
197	ALC.	प्रान्तः		* * * * * * * * * * * * * * * * * * *			
	act No.: है देगानाः			Address: —	16-00-00-00-00-00-00-00-00-00-00-00-00-00	/	
	of Visa:			Relation:	/	1	
	हो प्रकार: Expiry Date:	-		नाताः			
	रागाप्ति मितिः			Contact No.: सम्पर्क नं: —			
amil	ly Members (परियारका सदस्यहरू)				17 15 15 15	this lates a	
SN	Relation सम्बन्ध		Name & Surname नाम र धर	•	Citizenship No. नागरिकता न	Issuing Office जारी गर्ने कार्यालय	Date of issue जारी मिति
हस. 1	Spouse (पति/पत्नी)	Marrai	Polcho	300	-H-HCARLII		
2	Father (युवा)	10-0		honel sho			A
3	Mother (आमा)	Abronde	4 K. POK	VIONEL Sho	VIL. P		/
		Augusta and a				/	
4	Grandfather (हजुरचुवा)						
5	Grandmother (संजुरआमा)	-			-		
6	Son 1 (छोरा १)		1000			- /	
	Son 2 (छोरा २)					-/-	
7	Daughter 1 (छोरी १)			- 100			
	Daughter 2 (ভারী ২)		3				
8	Daughter in Law (बुहारी) (son's wife)		1			/	
9	Father in Law (रासुरा) (of married women) (विवाहित महिलाको हरूका					/	
iccu	pation/Business (पेशा/व्यवसाय)	Miller Janes		是4000年11日1日	symbol and the	10000000	Expected Annua
SN	Name of Firm/Compa संस्थाको नाम	ny/Office		dress पाना	Web Site वेबसाइट	Post पद	Income अनुमानित वार्षिक आ
ह.स <u>.</u>		me	Kh	11-11	111100	Direct	7 6018
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3			-			1 0 0	
4			-				
	। you civil servant/high position/po ।पाई राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिः	litician/Relatives	of politician ?	Yes QNe			
के त Evn	ापाई राष्ट्रसंवक/उच्च पदाधिकारी/राजनीतिः ected Monthly Turnover:	इ/राजनाविद्यका नातद	Less t	हो <u>होड़</u> han 5 Lakhs г	Less than 50 Lak		ore than 50 Lakhs
अनुम	गनित मासिक कारोबार रकमः			han 5 Lakhs । भन्दा कम	বি কাল সন্থা ক্রম - Loss than 25	- M	তান্ড শন্বা ৰটী ore than 25
Ехр अनुम	ected Monthly No. of Transaction गनित मासिक कारोबार संख्या :		Less t	han 15 दाकम [্র Less than 25 ২৭ भन्दा कम	U 34	भन्दा बढी
Pur	pose of Account: Remittan		Busin	ess	Others अन्य		
-	ाको उद्देश्यः विभ्रेषण Salary	स्वत Remittance	Investment	☐ Sale	of Asset भी बिकि	Rental Income	-
	and the state of	— विश्रेषण — Borrowings सापटी	ि लगानी Loan Repayi ऋण किस्ता भु		ी बिक्ति PFS (Please Specify) (चल्लेक गर्नुसेस्)	🖵 घर भाडा	
Pun	nished or charged for any criminal ac तमा फोजदारी कसुरमा दण्डित वा जरिवान	10770	The second secon	□ _{\$1} No		The second state of the second	

te Map Permanent Address ि स्वा प्रशामी ठेगाना	Present Address हालको ठेगाना		0
britaku	140 Joseph P Davier, W. Amari Charles and Carl	Adil Kalin	nort1
		1 Fal	khy
Thumb Impression ਗੀਰਾ ਯਾਧ			Account Holder's Signatur खाताबालाको हस्तासर
te: Any document/information if not exists,			Chitakumoti mud
	Bank's U	se Only	
upporting Documents (provided by the cust	£10	☐ Not obtained	
hoto of account holder	Dbtained Obtained	Not obtained	
hoto of beneficial owner	Citizenship	Passport	Others
lentification Document ddress verifying document (Any one)	Utility Bill (Water/Electric	53.0	Land ownership document
datess vernying document (1997) array	Telephone Bill	letter from local authority	☐ Voter ID
imployee ID (Mandatory for Govt. Officials)	□ N/A	Yes ·	□ No
Account Risk Grading:	TEC TIONS - ON	Information Update in Core Bank	ing System & accuity Check:
☐ High Risk ☐ Medium Risk ☐ HPP ☐ PEP	Low Risk	☐ Yes ☐ No Date Updated on:	.07.2015
Name list in Sanction			19
☐ Yes ☐ No Remarks / information if any:	6.	Remarks if any:	
Barnch Manager Date:		CSD Staff 03.0A-2	19



त्यक्तिगत ग्राहक पहिचान फाराम KYC FORM FOR INDIVIDUAL CUSTOMER

	ount Holder's Name:	1010119101 28122440	1 CA	ग्राहक आर्च्डि PAN No.: स्थायी लेखा न:		
Date	2 of Birth: _ 1 - 1 0 - 0 1	Citizenship / ID No.:	1774 8489	Issuing Office जारी गर्ने जिल्ला	& Date: Ktm	27 126
Gen	der: F	नागरिकता/परिचय पत्र नः	1779 14 143.	Issuing Office	& Date: When	
लिङ् Nati		Passport No.: राहदानी नं:		जारी गर्ने जिल्ला Passport Expir	y Date:	
राष्ट्रि	adi Nobel		Mobile No.:	राहदानी समाप्ति	मितिः Occuption: n	L . V
फोन	4: 082/082435	Marital Status: S •	मोबाइल नः		Occuption: 37	usiner
E m इमेल					PO Box: पोष्ट बक्स नः	
	sent Address (हालको ठेगाना) rd No.: । 🖊		Permanent Addr Ward No.:	'ess(स्थायी वेगाना)		
वडा Tole	नः ()		वहा नः Tole:	- W.	No.	
टोल:			ਵੀਲ: House No.:		-	
घर :	न.:	Total Maria	घर नः District:		Province No.	
जिल	Tarmanau u	V2. F2. LVC. St	जिल्लाः	/	प्रदेश नः	
	ise of Non Residence (गैर आवासीय ने ID (If applicable):	नेपाली भएमा)	Beneficial Owne		Yes No छ प्रैन	
र उ	त्रवासीय परिचयपत्र (भएमा)		lf Yes (यदि छ गर्ने Beneficial Owner हिताधिकारीको नामः		187.71.	
	ign Address: क ठेगाना:		हिताधिकारीको नामः		25	
ou	ntry: City	y/State:	Citizenship No.: नागरियसा ने:	-		
লে: Cont	act No.:	र/प्रान्तः	Address:			
	िर्मानाः e of Visa:		वेगानाः —		1	
भेसा	हो प्रकारः		Relation: नाताः	/	-	
/isa	Expiry Date: समाप्ति मिति:		Contact No.: सापके ने:			
_	ly Members (परिवारका सदस्यहरू)		• High 1.	VER DING		
SN	Relation	Name & Suri	32 V 13 (2)	Citizenship No. नागरिकता न	Issuing Office जारी गर्ने कार्यालय	Date of issue जारी मिति
<u>कस</u> 1	सम्बन्ध Spouse (परि/पत्नी)	नाम र ध	₹	नागारकता न	जारा गन कालास्य	GIRT PHO
2	Father (युवा)	Som Pd Kly	enal			
3	Mother (आग)	Laxui Khow				
4	Grandfather (हजुरवृबा)	12(100 1000	01			
5	Grandmother (हजुरआगा)					
6	Son 1 (छोरा १)	Gaulas St	oling	/		
	Son 2 (छोरा २)	Gaulois St Rika Strol				
7	Daughter 1 (छोरी १)	Rika show	ma			
	Daughter 2 (छोरी २)					
8	Daughter in Law (बुहारी) (son's wife)					
9	Father in Law (सस्य) (वा married women) (वियोधित महिलाको इकमा)				II.	
)ccı	ipation/Business (पेशा/व्ययसाय)	AND SECURE OF THE SECOND		District Co		Expected Ann
SN	Name of Firm/Compar संस्थाको नाम	ny/Office	Address देगाना	Web Site वेबसाइट	Post पद	Income अनुमानित वार्षिक
非 和		was Km	5111		Director	Sloh
2	Mandan Hord	The second			1-13	
		- d				
3						
4	you civil servant/high position/po तपाई राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिङ्	।/राजनातिज्ञका नातदार हनुहन्छ हा :	[1] 615	71		ore than 50 Lak
4			gss than 5 Lakhs लाख भन्दा कम	্র Less than 50 Lak বুত জান্তা খন্যা ক্রম	L 40	ठाख भन्दा बढी
Are	ected Monthly Turnover:		and the same of th	Less than 25		ore than 25 भन्दा बढी
Are the Exp SHIP Exp	pected Monthly Turnover: मानित मासिक कारोबार रकम: pected Monthly No. of Transaction:		ess than 15	२५ भन्दा कम	Same of the	ALIMI MIDE
4 Are के । Exp अनु Exp अनु Pur	pected Monthly Turnover: मानित मासिक कारोबार रकमः pected Monthly No. of Transaction: मानित मासिक कारोबार संख्या : rpose of Account: Remittanc	e Savings	भुभन्दा कम Business	Others		4.41 401
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Ve hereby declare that all the information & अमी यहाँ उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा क	aocuments provided to the ागजातहरू साँचो रहेको घोषणा ग	ार्दछ्/गर्दछी ।	
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		DESCRIPTION OF THE PROPERTY OF	
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Thumb Impression ਕੀਰਾ ਹਾਥ		***	अफ्रिके Account Holder's Signatu श्वातावालाको हस्तावर
शीवा ग्राप		>	खातावालाको हस्ताक्षर
श्रीवा छाप	shall be declared an N/A.	>	SOUND Account Holder's Signature खातावास्त्रको हस्ताहार (Au) पु Shan-Ma
श्रीवा छाप		k Use Only	खातावालाको हस्ताक्षर
গীতা छाप ote: Any document/information if not exists,	Bank's	\hat{\chi} Use Only	खातावालाको हस्ताक्षर
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KYC FORM FOR CORPORATE CUSTOMER संस्थागत ग्राहक पहिचान विवरण फाराम

Screening ID

			Part of Albert		
Account Number O O L O C	00190	ICA	;	Date: クラ・	07.2015
खाता न Client ID प्राह्म परिचयपत्र © 0 1 1 7	1041				
प्राहक परिचयपत्र 🔼 🔾 🗘 🗓 🖺	13 14 1				
Account Name: NAONA P. 1	HARDWARE	Put. Ltd		Residence and a fine	t a leadaint tai sa sann leithig ann
Date of Registration	Registration No.:		Registration Of दर्ता कार्यालय र 1	fice & Date:	
PAN/VAT No. 30/191052	401 4	Regd./PAN Expiry Da समाप्ति मितिः		71(4)	
Office Contact No: 0115 8 74		Beneficial Owner-Na	Hod	4 Sha	rug
Office Fax No:		Address: ४	cathura	ndy	
कार्यालय प्रयाक्स नः Office Empil:		Citizenship No.: नागरिकता नः	8 HEFL	489	
कार्यालय इमेलः Post Box No.:		Relation: ,	Contact No सम्पर्क न		
पोष्ट बक्स नः Registered Address	The State of the	Business Address (व्यवसायिक ठेगाना)	11 22 16	-	
(दर्तो गरिएको ठेगाना) Ward No.: 🚺 . Tole: Ka	deshwor	Ward No.: If	Tole ਟੀਕ:	Kulo	thwol
यहा नः <u> </u>		House No.:	, cie.	3.4.2.5.2.3.2.3	
막다. District: Proprince No.:	03	घर नः District:	wein of the	rince No.:	03
District: Kathwawich in	0)	जिल्लाः	IN OCO CONTRA	ਜ:	
		□ Import/Euport □	Other Numl	or of Branche	AC.
Nature of Business: Manufacturing ्र व्यवसायको प्रकृतिः उत्पादन	∏rading □ Service व्यापार गेवा	import/Export [आयात/निर्यात		oe <mark>r</mark> of Branche ने संख्याः	es:
Nature of Business: Manufacturing ट्र व्यवसायको प्रकृतिः चत्पादन	े व्यापार े सेवा वर्ष		ं अन्य शाखाव		es:
Nature of Business: Manufacturing	े व्यापार े सेवा वर्ष		ात) Citizenship No		Phone/Mobile No. फोन न/मोबाइल न
Nature of Business: Manufacturing ्र व्यवसायको प्रकृति: उत्पादन Management (BOD Members and Chief Executi	ive) व्यवस्थापन (संघालक सदस्य Permanent Address	हरू र प्रमुख कार्यकारी अधिक Present Address	ात) Citizenship No	ो संख्या ./Issuing Office	Phone/Mobile No. फੀਜ ਜ/ਸੀਗੜ੍ਹ ਜ
Nature of Business: Manufacturing ्ययसायको प्रकृति: चरपादन Management (BOD Members and Chief Execution SN Full Name & Post हस पुरा नाम र पद	ve) व्यवस्थापन (संघालक सदस्य Permanent Address स्थायी देगाना िर्मे - 14	हरू र प्रमुख कार्यकारी अधिक Present Address	ात) Citizenship No	ो संख्या ./Issuing Office	Phone/Mobile No. ਧਮੈਸ ਸ/ਸੀਕਾਵਲ ਜ
Nature of Business: Manufacturing ्य्यसायको प्रकृतिः चरपादन Management (BOD Members and Chief Execution SN Full Name & Post पुरा नाम र पद Navraj Pakhval Gila Kumali Nudbh	ve) व्यवस्थापन (संघालक सदस्य Permanent Address स्थायी देगाना िर्मे - 14	हरू र प्रमुख कार्यकारी अधिक Present Address	ात) Citizenship No	ो संख्या ./Issuing Office	Phone/Mobile No. फोन न/मोबाइल न 985102012
Nature of Business: Manufacturing ्यसायको प्रकृतिः चरपादन Management (BOD Members and Chief Execution SN Full Name & Post पुरा नाम र पद Navral Pakwal	ve) व्यवस्थापन (संघालक सदस्य Permanent Address स्थायी देगाना िर्मे - 14	हरू र प्रमुख कार्यकारी अधिक Present Address	ात) Citizenship No	ो संख्या ./Issuing Office	Phone/Mobile No. फोन न/मोबाइल न 985102012
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Nature of Business: Manufacturing व्यवसायको प्रकृतिः विरादन Management (BOD Members and Chief Execution of Full Name & Post पुरा नाम र पद Navraj Pakhvel Gita Kumati Mudbh Anju Shatma	व्यापार सेवा ive) व्यवस्थापन (संघालक सपरय Permanent Address स्थायी देगाना K+M-14 oci K+M-14	हरू र प्रमुख कार्यकारी अधिक Present Address हालको ठेगाना	जन्य शास्त्राव (त) Citizenship No नागरिकता न/ज	ने संख्या ,/Issuing Office ारी गर्ने कार्यालय	Phone/Mobile No. फोन न/मोबाइल न 985102012 985108143
Nature of Business: Manufacturing ्य्यसायको प्रकृतिः चरपादन Management (BOD Members and Chief Execution SN Full Name & Post पुरा नाम र पद Navraj Pakhval Gila Kumali Nudbh	earure सेवा Permanent Address रशायी देगाना K+M-14 Mi K+M-14 Wi K+M-14 Permanent Address रशायी देगाना Fermanent Address रशायी देगाना Fermanent Address रशायी देगाना Fermanent Address रशायी देगाना Fermanent Address	हरू र प्रमुख कार्यकारी अधिक Present Address हालको ठेगाना चित्र प्रमुख का 25 Lakhs	ি জন্য সাজ্যের Citizenship No নাগবিকরা ন/জ Less than 50 ৭০ লাভ্য শন্ম	ने सर्वेगः _/Issuing Office ारी गर्ने कार्यालय	Phone/Mobile No. फोन न/मोबाइल न 985102012 9851089492 9851089492
Nature of Business: जिलापित प्रमुशिः जिलामा प्रमुशिः जिलामा विकास प्रमुशिः जिलामा विकास प्रमुशिः जिलामा प्रमुश्या विकास या अधियाना हुनु भएष	earure सेवा Permanent Address स्थायी देगाना K+M-14 Ci K+M-14 the past? पुष्ट अ	हरू र प्रमुख कार्यकारी अधिक Present Address हालको ठेगाना चित्र भेगाना han 25 takhs । भन्दा कम han 25	जन्य शास्त्राव (त) Citizenship No नागरिकता न/ज	ो सर्वयाः ./Issuing Office हो गर्ने कार्यालय Lakhs कम	Phone/Mobile No. फोन न/मोबाइल न 985102012 985108949:

location Map নুক্ষা		
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APPENDIX: B

CITIZENS BANK INTERNATIONAL LIMITED KNOW YOUR CUSTOMER (KYC) FORM

1	KNOW FOOK COSTONIER (KITS) TO MAN
KYC REQUIREMENT	DOCUMENTATION NEEDED
1, IDENTITY	FULL NAME Mandari Hardware Prt Ltd
Beneficial Owner	(For Individuals) or Title of Domain
, deficited o	Partnership / Sole Proprietorship / Ltd. Companies
	Names of Partners / Owners/ Directors / Major Share Holders
	CITIZENSHIP CERTIFICATE OR PASSPORT
. ID Documents	(Obtain Photocopy)
	INDIVIDUALS
. Legal Status	Documents as per policy to be obtained & kept with Account Opening Form
	SOLE PROPRIETORSHIP
	PARTNERSHIP*
	LTD. Cos.* OTHERS*
	* Copies of ID Documents for all Directors / Partners / Trustees etc. to be
	obtained.
	F (7.07 (7.05), 4)
. RESIDENCE /	Kathmandu-14, Balkhu, Ringradd Balkhun Ringroad
SUSINESS	Ralkhus RingRoad
NFORMATION	Barrico, Ir. Grand
. dence Address/	
elephone	
 Occupation or Line of 	
Business	
:. Business Address /	
elephone	A DESCRIPTION OF THE PROPERTY
3. INCOME	OBTAIN SOURCE OF INCOME & APPROXIMATE FIGURES FOR INDIVIDUALS. FOR OTHERS IT SHOULD BE AVAILABLE FROM THEIR ACCOUNTS AND BALANCE SHEETS
I. RELATIONSHIP	Cerent
ı. Purpose	
). Commensurate Activity	CASH NPR AMOUNT TOO NO 7
:. Funds for Opening	CASH NPR
Accounts	
	DO YOU PRESENTLY MAINTAIN AN ACCOUNT WITH CBIL? YES / NO
5. EXISTING	IF YES - ACCOUNT NO:
RELATIONSHIP	BRANCH NAME
i. INTRODUCTION	NAME & A/CNO. Kunit Babu Khatri, 1455
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ADDRESS
	ANY CORRESPONDENCE RETURNED
	DURING LAST SIX MONTHS
	HOW LONG THE ACCOUNT HOLDER IS
	KNOWN TO THE INTRODUCER
	ACCOUNT STATUS
	DATE OF MEETING IF ANY &
<u> </u>	BRIEF COMMENTS
7. CLIENT REVIEW /	
MEETING	Date of Meeting 10th July ,2012
a. Initial	Brief Comments
	Control and Contro
r. benevet	Date of Meeting 10 tu Tuly, 2012
o. Subsequent	Brief Comments

SIGNATURE

NTERVIEWING OFFICER

SIGNATURE MANAGER