

KYC FORM FOR CORPORATE CUSTOMER

Screening ID

KYC ID

Account Number

001-1901CA

Date: 10-03-2077

Client ID

Account Holder's Name: Mandari Hardware Pvt. Ltd.

Date of Registration: 08-12-2067

Registration No.: 81714/067/068

Registration Office & Date: Company Registrar

Contact No: 01-4263412

PAN/VAT No. 304919532

Regd./PAN Expiry Date:

Office: 9851089492

Beneficial Owner-Name:

Fax:

Address:

Email:

Relation:

P.O.Box:

Contact No.:

Registered Address

Ward No.: 14

Tole: Kumari club marg

House No.:

District: Kathmandu

Business Address

Ward No.: 14

Tole: Kumari club marg

House No.:

District: Kathmandu

Business Area:

Business Objectives:

Number of Office: 1

Office Location:

Management (BOD Member and Chief Executive)

SN	Full Name & Post	Permanent Address	Present Address	Citizenship No./ Issuing Office	Phone/Mobile No.
(1)	Narraj Pokhrel	Kulshwa - 14	Kulshwa - 14	64188, ktm	9851020120
(2)	Gita Kumari Mudhan Pokhrel	Kulshwa - 14	Kulshwa - 14	560, parati	9841267058
(3)	Anju Sharma	Balkhu - 14	Balkhu - 14	1774/8989, ktm	9851089492

HPP/PEP/NF2F: ☐ Yes ☐ No

If yes, remark on affiliation:

Expected Monthly Turnover:

☐ Less than 25 Lakhs

☐ Less than 50 Lakhs

☒ >50 Lakhs

Expected Monthly Transaction:

☐ Less than 25

☐ Less than 50

☐ >50

Purpose of Account:

☐ Business

☐ Other (Please specify)

Supporting Documents (provided by the customer)

Remarks, 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 Certificate

☐ MOA/AOA

Audited Financials of last fiscal year

☐ Yes ☐ No

Specify the FY.

Income Tax Clearance of Last Fiscal Year

☐ Yes ☐ No

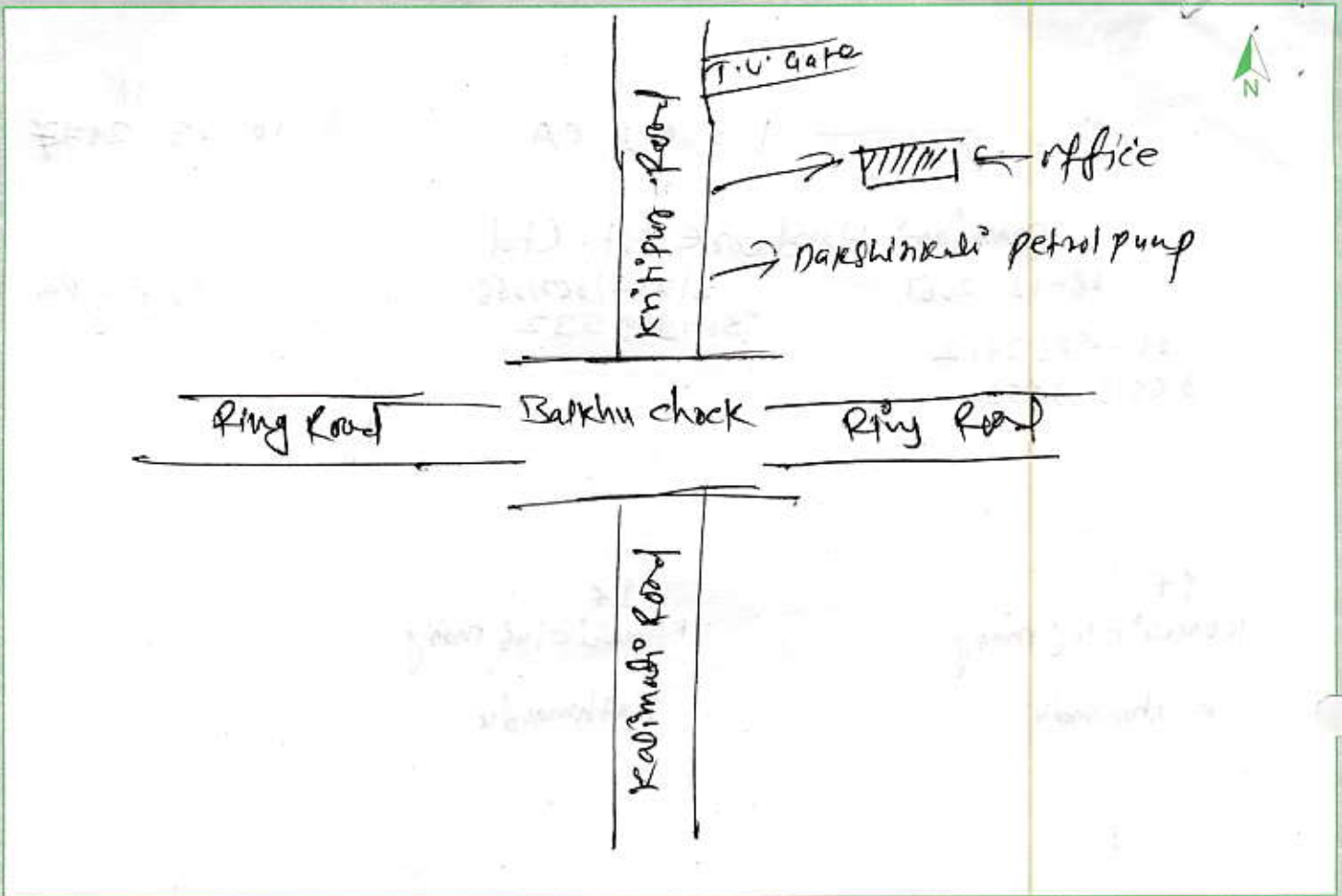
Specify the FY.



Corporate Seal

Authorised Signatory

Date:



Company Seal

Bank's Use Only

Account Risk Grading:

- ☐ High Risk
 ☐ Medium Risk
 ☐ Low Risk
 ☐ HPP/PEP

Name listed in OFAC (Name listed in sanction)

- ☐ Yes
 ☐ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System:

- ☐ Yes
 ☐ No

Date Updated on: _____

Remarks if any:

CSD Staff

Date

KYC FORM FOR INDIVIDUAL CUSTOMER

Screening ID

KYC ID

Account Number

Date: 10-03-2075

Client ID

Account Holder's Name: Navraj pokhrel		PAN No.
Date of Birth:	Citizenship / ID No.: 64188	Issuing Office & Date:
Gender:	Passport No.:	Issuing Office & Date:
Nationality: <input type="checkbox"/> Res. <input type="checkbox"/> Non Res.	Marital Status:	Occupation: Subineli
Phone No.:	Mobile No.: 9851020120	
E mail:		PO Box:
Present Address Ward No.: 14 Tole: Parijat Sadak House No.: District: Kathmandu		Permanent Address Ward No.: 14 Tole: Parijat Sadak House No.: District: Kathmandu
In case of Non Residence NRN ID (If applicable): Foreign Address: Country: City/State Contact No.: Visa: Visa Expiry Date:		Beneficial Owner <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Beneficial Owner Name: Address: Relation: Contact No.:

Family Member:

SN	Relation	Name & Surname	Citizenship No.*	Issuing Office*	Date of issue*
1	Spouse	Gita Kumari mudhuni pokhrel			
2	Father	Agnidhar pokhrel			
3	Mother	mandali Devi pokhrel			
4	Grandfather	Hemlal pokhrel			
5	Grandmother				
6	Son	Satish pokhrel	271060/1282		
7	Daughter	Sabina pokhrel			
8	Daughter in Law (son's wife)*				
9	Father in Law (of married women)*				

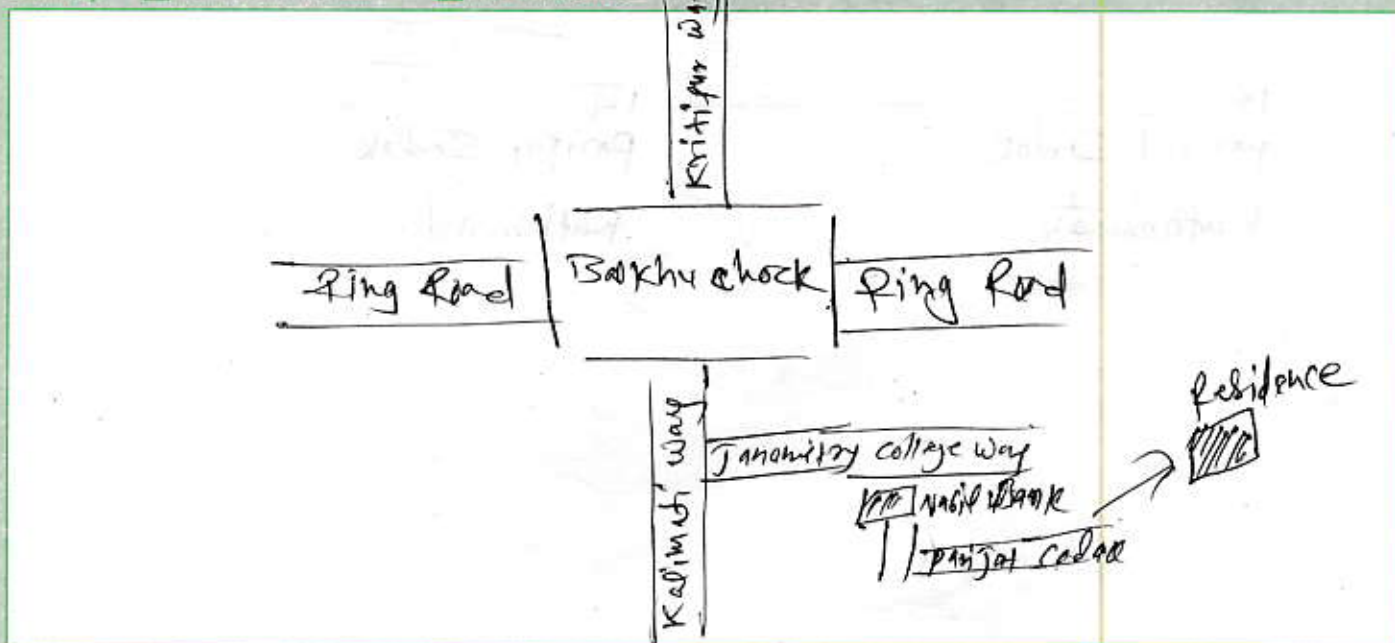
*not compulsory for low risk customers

Occupation/Business:

SN	Name of Firm/Company/Office	Address	Web Site	Post	Annual Income
1	Sanya Sai Khudya Shaul	Kathmandu - 14		MD	
2					
3					
4					
HPP/PEP/NF2F: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, remark on affiliation:			
Expected Yearly Turnover:		<input type="checkbox"/> Less than 5 Lakhs	<input type="checkbox"/> Less than 50 Lakhs	<input type="checkbox"/> >50 Lakhs	
Expected Monthly Transaction:		<input type="checkbox"/> Less than 15	<input type="checkbox"/> Less than 25	<input type="checkbox"/> >25	
Purpose of Account: <input type="checkbox"/> Remittance <input type="checkbox"/> Savings <input type="checkbox"/> Business <input type="checkbox"/> Others					
Source of fund		<input type="checkbox"/> Salary <input type="checkbox"/> Remittance <input type="checkbox"/> Investment <input type="checkbox"/> Sale of Asset			
		<input type="checkbox"/> Donation <input type="checkbox"/> Borrowings <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Others (Please Specify)			
Punished or charged for any criminal activities in the past		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Supporting Documents (provided by the customer)

Photo of account holder	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Photo of beneficial owner	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Identification Document	<input type="checkbox"/> Citizenship	<input type="checkbox"/> Passport	<input type="checkbox"/> Others _____
Address verifying document (Any one)	<input type="checkbox"/> Utility Bill (Water/Electricity/ Telephone Bill)	<input type="checkbox"/> Driving License	<input type="checkbox"/> Land ownership document
	<input type="checkbox"/> Rental Agreement	<input type="checkbox"/> letter from local authority	<input type="checkbox"/> Voter ID
Employee ID (Mandatory for Govt. Officials)	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Site Map ☐ Permanent Address ☐ Present Address

I/We hereby declare that all the information & documents provided to the bank are true & Correct.

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Thumb Impression

Account Holder's Signature

Note: Any document/information if not exists, shall be declared an N/A.

Bank's Use Only**Account Risk Grading:**☐ High Risk ☐ Medium Risk ☐ Low Risk☐ HPP/PEP

Name listed in Sanction

☐ Yes ☐ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuity Check:☐ Yes ☐ No

Date Updated on: _____

Remarks if any:

CSD Staff

Date

Screening ID

KYC ID

Account Number

Date: 10-03-2017

Client ID

Account Holder's Name: Gita Kumari mudghani prthap PAN No.

Date of Birth: 15-04-2050

Citizenship / ID No.: 560

Issuing Office & Date: parasi, 04-10-046

Gender: female

Passport No.:

Issuing Office & Date:

Nationality: ☐ Res. ☐ Non Res.

Marital Status:

Occupation: Business

Phone No.: 4278580

Mobile No.: 9841267958

E mail:

PO Box:

Present Address

Ward No.: 14

Tole: Panigat Sadak

House No.:

District: Kathmandu

Permanent Address

Ward No.: 14

Tole: Panigat Sadak

House No.:

District: Kathmandu

In case of Non Residence

NRN ID (if applicable):

Foreign Address:

Country: City/State

Contact No.:

Visa:

Visa Expiry Date:

Beneficial Owner ☐ Yes ☐ No

If Yes,

Beneficial Owner Name:

Address:

Relation:

Contact No.:

Family Member:

SN	Relation	Name & Surname	Citizenship No.*	Issuing Office*	Date of Issue*
1	Spouse	Naraj Pokhrel	84188	Kathmandu	20-11-2038
2	Father	Ag Naradra Kumar			
3	Mother	Sharma mudghani			
4	Grandfather				
5	Grandmother				
6	Son	Satish Pokhrel	271060/1282	Kathmandu	02-09-064
7	Daughter	(1) Satish Sargina Pokhrel			
8	Daughter in Law (son's wife)*				
9	Father in Law (of married women)*	Aguldhara Pokhrel	271060/36216	Kathmandu	26-12-2065

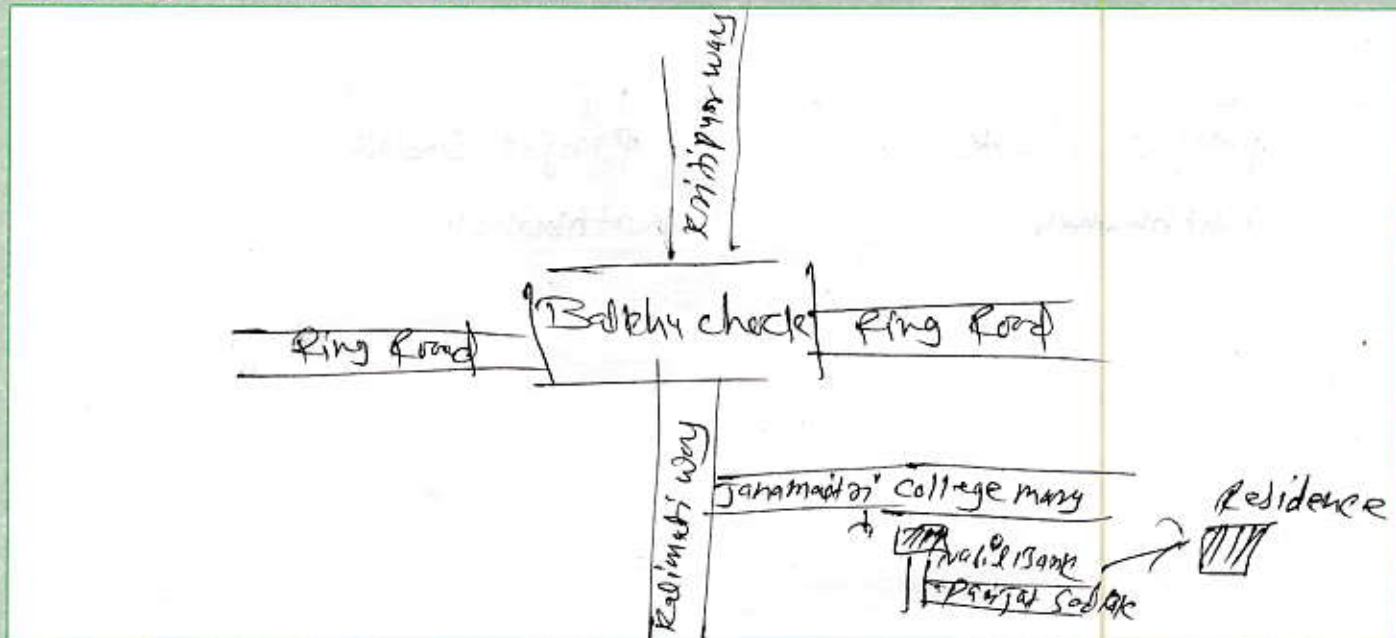
*not compulsory for low risk customers

Occupation/Business:

SN	Name of Firm/Company/Office	Address	Web Site	Post	Annual Income
1					
2					
3					
4					
HPP/PEP/NF2F: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, remark on affiliation:			
Expected Yearly Turnover:		<input type="checkbox"/> Less than 5 Lakhs	<input checked="" type="checkbox"/> Less than 50 Lakhs	<input type="checkbox"/> >50 Lakhs	
Expected Monthly Transaction:		<input type="checkbox"/> Less than 15	<input type="checkbox"/> Less than 25	<input type="checkbox"/> >25	
Purpose of Account:		<input type="checkbox"/> Remittance <input type="checkbox"/> Savings <input type="checkbox"/> Business <input type="checkbox"/> Others			
Source of fund		<input type="checkbox"/> Salary <input type="checkbox"/> Remittance <input type="checkbox"/> Investment <input type="checkbox"/> Sale of Asset			
		<input type="checkbox"/> Donation <input type="checkbox"/> Borrowings <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Others (Please Specify)			
Punished or charged for any criminal activities in the past		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Supporting Documents (provided by the customer)

Photo of account holder	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Photo of beneficial owner	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Identification Document	<input type="checkbox"/> Citizenship	<input type="checkbox"/> Passport	<input type="checkbox"/> Others _____
Address verifying document (Any one)	<input type="checkbox"/> Utility Bill (Water/Electricity/ Telephone Bill)	<input type="checkbox"/> Driving License	<input type="checkbox"/> Land ownership document
	<input type="checkbox"/> Rental Agreement	<input type="checkbox"/> letter from local authority	<input type="checkbox"/> Voter ID
Employee ID (Mandatory for Govt. Officials)	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Site Map ☐ Permanent Address ☐ Present Address

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Thumb impression

Account Holder's Signature

Note: Any document/information if not exists, shall be declared as N/A.

Bank's Use Only**Account Risk Grading:**☐ High Risk ☐ Medium Risk ☐ Low Risk
☐ HPP/PEP

Name listed in Sanction

☐ Yes ☐ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuity Check:

☐ Yes ☐ No

Date Updated on: _____

Remarks if any:

CSD Staff

Date

Screening ID

KYC ID

Account Number

Date: 10-03-2015

Client ID

Account Holder's Name: Anu Sharma		PAN No.
Date of Birth: 13-01-2026	Citizenship / ID No.: 1774/8489	Issuing Office & Date:
Gender:	Passport No.:	Issuing Office & Date: 2048-12-27, Kathmandu
Nationality: <input type="checkbox"/> Res. <input type="checkbox"/> Non Res.	Marital Status:	Occupation: Business
Phone No.: 4672033	Mobile No.: 9851089492	
E mail:		PO Box:
Present Address		Permanent Address
Ward No.: 11		Ward No.: 14
Toll: Kumari Club Marg		Toll: Kumari Club Marg
House No.:		House No.:
District: Kathmandu		District: Kathmandu
In case of Non Residence		Beneficial Owner <input type="checkbox"/> Yes <input type="checkbox"/> No
NRN ID (if applicable):		If Yes,
Foreign Address:		Beneficial Owner Name:
Country: City/State		Address:
Contact No.:		Relation:
Visa:		Contact No.:
Visa Expiry Date:		

Family Member:

SN	Relation	Name & Surname	Citizenship No.*	Issuing Office*	Date of Issue*
1	Spouse	Gaurav Sharma	15504	Kathmandu	05-01-2062
2	Father	Som Prasad Khanal			
3	Mother	Laxmi Devi Khanal			
4	Grandfather	Beel Sharma Khanal			
5	Grandmother				
6	Son	Gaurav Sharma	15504	Kathmandu	05-01-2062
7	Daughter	Riha Sharma	12906	Kathmandu	05-09-2064
8	Daughter in Law (son's wife)*				
9	Father in Law (of married women)*				

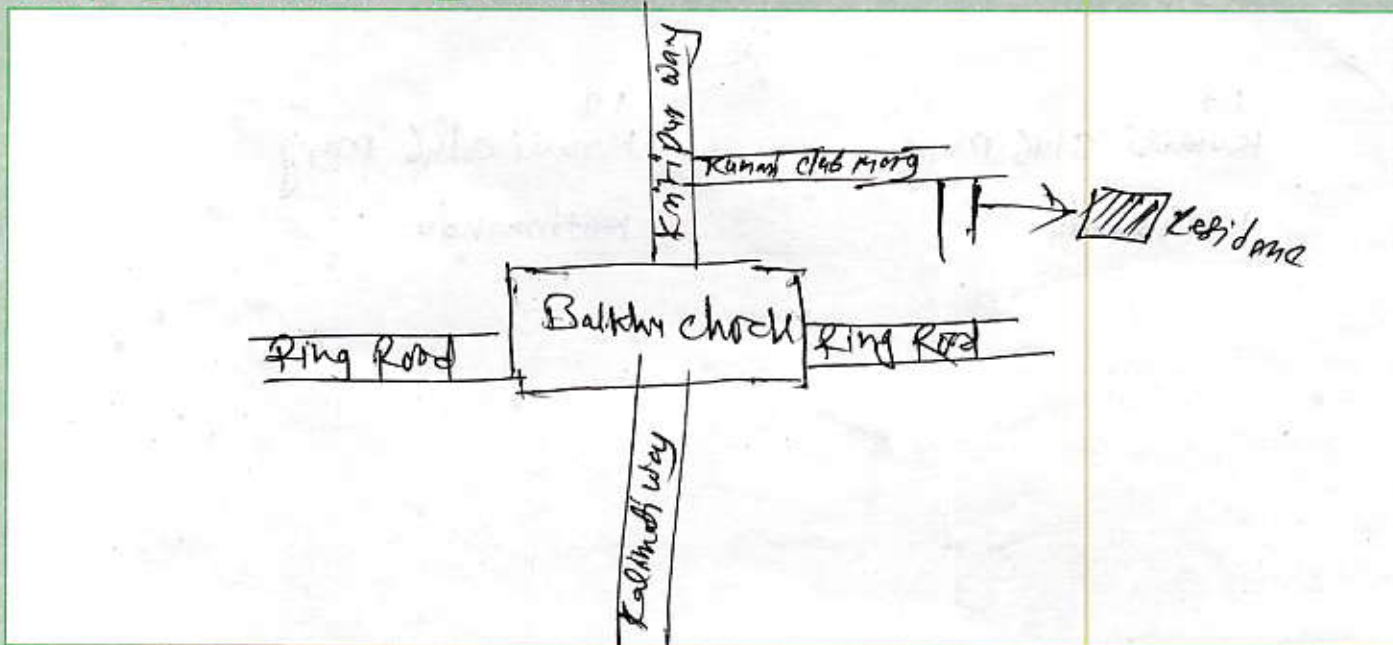
*not compulsory for low risk customers

Occupation/Business:

SN	Name of Firm/Company/Office	Address	Web Site	Post	Annual Income
1					
2					
3					
4					
HPP/PEP/NF2F: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, remark on affiliation:			
Expected Yearly Turnover:		<input type="checkbox"/> Less than 5 Lakhs	<input type="checkbox"/> Less than 50 Lakhs	<input type="checkbox"/> >50 Lakhs	
Expected Monthly Transaction:		<input type="checkbox"/> Less than 15	<input type="checkbox"/> Less than 25	<input type="checkbox"/> >25	
Purpose of Account: <input type="checkbox"/> Remittance <input type="checkbox"/> Savings <input type="checkbox"/> Business <input type="checkbox"/> Others					
Source of fund		<input type="checkbox"/> Salary <input type="checkbox"/> Remittance <input type="checkbox"/> Investment <input type="checkbox"/> Sale of Asset			
		<input type="checkbox"/> Donation <input type="checkbox"/> Borrowings <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Others (Please Specify)			
Punished or charged for any criminal activities in the past		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Supporting Documents (provided by the customer)

Photo of account holder	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Photo of beneficial owner	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained	
Identification Document	<input type="checkbox"/> Citizenship	<input type="checkbox"/> Passport	<input type="checkbox"/> Others _____
Address verifying document (Any one)	<input type="checkbox"/> Utility Bill (Water/Electricity/ Telephone Bill)	<input type="checkbox"/> Driving License	<input type="checkbox"/> Land ownership document
	<input type="checkbox"/> Rental Agreement	<input type="checkbox"/> letter from local authority	<input type="checkbox"/> Voter ID
Employee ID (Mandatory for Govt. Officials)	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Site Map ☐ Permanent Address ☐ Present Address

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Thumb Impression

Account Holder's Signature

Note: Any document/information if not exists, shall be declared as N/A.

Bank's Use Only**Account Risk Grading:**

☐ High Risk ☐ Medium Risk ☐ Low Risk
☐ HPP/PEP

Name listed in Sanction

☐ Yes ☐ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuity Check:

☐ Yes ☐ No

Date Updated on: _____

Remarks if any:

CSD Staff

Date

KYC Form for Individual Customer



Branch
शाखा

CIF ID _____

Date
मिति 2078-02-13

Screening ID _____

KYC ID _____

Full Name (BLOCK Letter) **NAVARAJ POHRAEL**

नाम (ब्लॉकलेटर) _____

Date of Birth जन्ममिति 201906 B.S. वि.स. _____ A.D. ई.स. _____ Gender लिंग ☒ Male पुरुष ☐ Female महिला ☐ Other अन्य

Marital Status वैवाहिक स्थिति ☐ Single अविवाहित ☒ Married विवाहित ☐ Other अन्य Religion धर्म ☒ Hindu हिन्दु ☐ Muslim मुस्लिम ☐ Buddhist बौद्धमार्गी ☐ Christian क्रिष्टियन ☐ Other अन्य

Nationality राष्ट्रियता _____ Citizenship No. नागरिकता नं. 64188 Issuing Office जारी गर्ने कार्यालय Rupanesh Issued Date जारी मिति 2038-11-20

Passport No. पासपोर्ट नं. _____ Issuing Office जारी गर्ने कार्यालय _____ Issued Date जारी मिति _____ Expiry Date समाप्ति मिति _____

Other ID No. अन्य पहिचानपत्र नं. _____ Issuing Office जारी गर्ने कार्यालय _____ Issued Date जारी मिति _____ Expiry Date समाप्ति मिति _____

Permanent Address/स्थायी ठेगाना

House No. घर नं. _____ Tole टोल Janmatri Path वडा नं. 14 Ward No. _____
Rural/Municipality गा.पा./न.पा. _____ Province No. 03 प्रदेश नं. 03
District जिल्ला Kathmandu अञ्चल Bagmati
Phone No. फोन नं. _____ Mobile No. मोबाइल नं. 9851020120

Present Address/हालको ठेगाना

House No. घर नं. _____ Tole टोल _____ वडा नं. _____ Ward No. _____
Rural/Municipality गा.पा./न.पा. _____ Province No. _____ प्रदेश नं. _____
District जिल्ला _____ अञ्चल _____
Phone No. फोन नं. _____ Mobile No. मोबाइल नं. _____

Email ईमेल _____ PAN No. पान नं. _____ P.O. Box No. पो.ब.नं. _____

In case of residing in rented house/बहालको घरमा बसेको भए

Name of Land Lord घरघनीको नाम _____
Phone No. फोन नं. _____ Mobile No. मोबाइल नं. _____

In case of NRN/गैर आवासिय नेपाली भएमा

NRN ID No. एनआरएन आईडि नं. _____
Foreign Address विदेश स्थित ठेगाना _____
City/State शहर/राज्य _____ Country देश _____
Type of Visa भिसाको प्रकार _____ Expiry Date समाप्ति मिति _____

Education Qualification शिक्षक योग्यता ☐ Below SLC एसएलसी मुनि ☐ SLC एसएलसी ☐ Intermediate प्रथिगता प्रमाणपत्र तह ☐ Bachelors स्नातक ☒ Masters स्नातकोत्तर ☐ Others अन्य
☐ Service नोकरी ☒ Business व्यवसाय ☐ Professional विशेषज्ञ ☐ Housewife गृहिणी ☐ Others अन्य

In case of service/नोकरी भएमा
Name of Institution/Firm संस्था/कार्यालयको नाम _____ Designation/Position पद/स्तर _____
Address ठेगाना _____ Contact No. सम्पर्क नं. _____

Source of Income आयको स्रोत ☐ Salary तलब ☒ Business व्यवसाय ☐ Rent बहाल ☐ Pension निवृत्तिभरण ☐ Remittance विप्रेषण ☐ Others अन्य
Annual Income वार्षिक आय ☐ Upto Rs. 1 lakh रु. १ लाख सम्म ☒ Upto Rs. 20 lakh रु. २० लाख सम्म ☐ Upto Rs. 50 lakh रु. ५० लाख सम्म ☐ Above Rs. 50 lakh रु. ५० लाख भन्दा बढी

Are you a Highly Positioned Person (HPP)? के तपाईं उच्चपदस्थ व्यक्ति हुनुहुन्छ? ☐ Yes हो ☒ No होइन If Yes, Position यदी हो भने, पद _____

Are you a Politically Exposed Person (PEP) or Associated with Any PEP? के तपाईं राजनैतिक प्रभावित व्यक्ति हुनुहुन्छ वा कुनै राजनैतिक प्रभावित व्यक्तिसँग सम्बन्धित हुनुहुन्छ? ☐ Yes हो ☒ No होइन

If yes, Name of PEP यदी हो भने, उक्त व्यक्तिको नाम _____ Position पद _____ Name of Political Party राजनैतिक दलको नाम _____ Relationship with PEP राजनैतिक व्यक्तिसँगको सम्बन्ध _____

Have you been convicted for any crime तपाईं कुनै अपराधमा कसुरवार ठहरिनु भएका छ? ☐ Yes हो ☒ No होइन

Family Details पारिवारिक विवरण

S.N.	Relationship (सम्बन्ध)	Full Name (पूरा नाम)	Citizenship No. (नागरिकता नं.)	Issuing Office (जारी गर्ने कार्यालय)	Date of Issue (जारी मिति)
1	Spouse (पति/पत्नी)	Gita Kumari Mudbhari Pokhrel	560	Rupandehi	2046-10-04
2	Father (बुबा)	Narendra Kumar Sharma Mudbhari			
3	Mother (आमा)	Shiva Kumari Mudbhari			
4	Grandfather (हजुरबुबा)	Somakant Sharma Mudbhari			
5	Grandmother (हजुरबुबा)				
6	Son 1 (छोरा १)	Satish Pokhrel	271060/12822	Rathmandu	
7	Son 2 (छोरा २)	Samip Pokhrel	271060/120353	Rathmandu	2070-06-01
8	Daughter 1 (छोरी १)	Sabina Pokhrel	271060/36216	Rathmandu	2065-12-26
9	Daughter 2 (छोरी २)				
10	Daughter-in-law 1 (बुहारी १)				
11	Daughter-in-law 2 (बुहारी २)				
12	Father-in-law (ससुरा)				

FATCA Declaration

Are you a U.S Resident ?
के तपाईं संयुक्त राज्य अमेरिकाको बासिन्दा हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Are you a U.S Citizen ?
के तपाईं संयुक्त राज्य अमेरिकाको नागरिक हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Are you a Permanent Resident Card (Green Card) Holder ?
के तपाईं संयुक्त राज्य अमेरिकाको स्थायी बसोबास (ग्रीन कार्ड) धारक हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Do you have Account in Citizen Bank International Ltd. ?
के तपाईंको सिटिजन बैंकमा खाता छ ? ☐ Yes हो ☒ No होइन

If yes, Name of Account

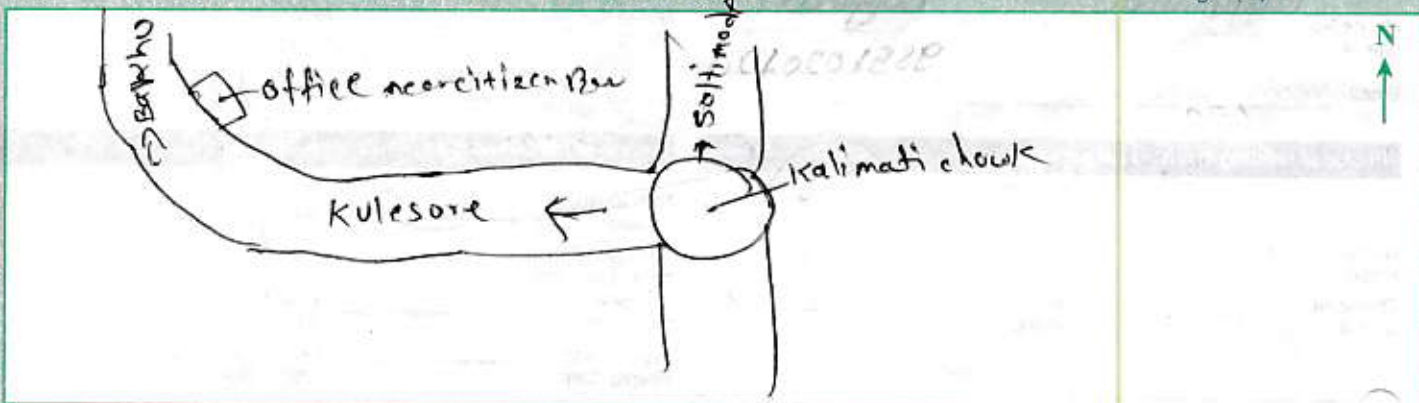
Account No. 001-37CA
खाता नम्बर

Do you have Account in Other Banks ? ☒ Yes हो ☐ No होइन If yes, Bank & Branch Name

Type of Account
खाताको प्रकार

Site Map ☐ Permanent Address ☐ Present Address Name of nearest landmark
नक्सा स्थायी ठेगाना हालको ठेगाना नजिकको प्रसिद्ध स्थान

Distance (M)
दुरी (मि)



I/We hereby declare that all the information and documents submitted to the bank are true and correct.
म/हामी यहाँ उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा कागजातहरू सही र सत्य रहेको घोषणा गर्दछु/गर्दछौ ।

Right बायाँ

Left बायाँ



Thumb impression औंठा छाप

Signature (दस्तखत)

Date:
मिति:

Bank's Use Only

Supporting Documents Submitted by Customer

Photograph ☐ Yes ☐ No
Identification Document ☐ Citizenship ☐ Passport ☐ Other
Employee ID ☐ Yes ☐ No
Address Verifying Document ☐ Utility Bill ☐ Land Ownership Certificate ☐ Other
Risk Grading ☐ Low Risk ☐ Medium Risk ☐ High Risk, Reason ☐ HPP ☐ PEP ☐ Other
Has the information updated in core Banking System & Trust AML/GoAML ☐ Yes ☐ No
The customer's name has been checked in Blacklist report of CIB ☐ Yes ☐ No
Self Declaration Obtained ☐ Yes ☐ No
Remarks If any:

Prepared & Checked By

Verified By

Approved By

KYC Form for Individual Customer



Branch
शाखा

CIF ID

Screening ID

KYC ID

Date
मिति

Full Name
(BLOCK Letter) **GITAKUMARI MUDBHARI POKHAREL**

नाम (नेपालीमा) **गिताकुमारी मुद्बहारी पौखरेल**

Date of Birth
जन्ममिति **26/06/1985** B.S. **26/06/1985** A.D. **26/06/1985** Gender ☐ Male ☒ Female ☐ Other

Marital Status
वैवाहिक स्थिति ☐ Single ☒ Married ☐ Other Religion ☐ Hindu ☐ Muslim ☐ Buddhist ☐ Christian ☐ Other

Nationality
राष्ट्रियता **Nepali** Citizenship No. **560** Issuing Office **Parasi** Issued Date **2046-10-04**

Passport No.
पासपोर्ट नं. Issuing Office जारी गर्ने कार्यालय Issued Date जारी मिति Expiry Date समाप्ति मिति

Other ID No.
अन्य परिचयपत्र नं. Issuing Office जारी गर्ने कार्यालय Issued Date जारी मिति Expiry Date समाप्ति मिति

Permanent Address/स्थायी ठेगाना

House No. **24** Tole **Kumhari Path** Ward No. **24**
घर नं. टोल वडा नं.
Rural/Municipality **Kathmandu** Province No. **03**
गा.पा./न.पा. प्रदेश नं.
District **Kathmandu** Zone **Bagmati**
जिल्ला अञ्चल
Phone No. **014298580** Mobile No. **98541267958**
फोन नं. मोबाइल नं.

Present Address/हालको ठेगाना

House No. Tole Ward No.
घर नं. टोल वडा नं.
Rural/Municipality Province No.
गा.पा./न.पा. प्रदेश नं.
District Zone
जिल्ला अञ्चल
Phone No. Mobile No.
फोन नं. मोबाइल नं.

Email **gitakumari.pokharel@gmail.com** PAN No. **pan n.** P.O. Box No. **पो.ब.नं.**

In case of residing in rented house/बहालको घरमा बसेको भए

Name of Land Lord
घरघनीको नाम
Phone No. **मोबाइल नं.**

In case of NRN/गैर आवासिय नेपाली भएमा

NRN ID No. **एनआरएन आईडि नं.**
Foreign Address **विदेश स्थित ठेगाना**
City/State **देश**
Type of Visa **मिसाको प्रकार** Expiry Date **समाप्ति मिति**

Education Qualification
शैक्षिक योग्यता ☐ Below SLC ☐ SLC ☐ Intermediate ☐ Bachelors ☐ Masters ☐ Others
☐ एसएलसी मुनि ☐ एसएलसी ☐ प्रविणता प्रमाणपत्र तह ☐ स्नातक ☐ स्नातकोत्तर ☐ अन्य
☐ Service ☐ Business ☐ Professional ☐ Housewife ☐ Others
☐ नोकरी ☐ व्यवसाय ☐ विशेषज्ञ ☐ गृहिणी ☐ अन्य

In case of service/नोकरी भएमा
Name of Institution/Firm
संस्था/कार्यालयको नाम
Address
ठेगाना
Designation/Position
पद/स्तर
Contact No.
सम्पर्क नं.

Source of Income
आयको स्रोत ☐ Salary ☒ Business ☐ Rent ☐ Pension ☐ Remittance ☐ Others
तलब व्यवसाय बहाल निवृत्तिभरण विप्रेषण अन्य
Annual Income
वार्षिक आय ☐ Upto Rs. 1 lakh ☐ Upto Rs. 20 lakh ☐ Upto Rs. 50 lakh ☐ Above Rs. 50 lakh
रु. १ लाख सम्म रु. २० लाख सम्म रु. ५० लाख सम्म रु. ५० लाख भन्दा बढी

Are you a Highly Positioned Person (HPP)? ☐ Yes ☒ No
के तपाईं उच्चपदस्थ व्यक्ति हुनुहुन्छ? हो होइन यदि हो भने, पद

Are you a Politically Exposed Person (PEP) or Associated with Any PEP? ☐ Yes ☒ No
के तपाईं राजनैतिक प्रभावित व्यक्ति हुनुहुन्छ वा कुनै राजनैतिक प्रभावित व्यक्तिसँग सम्बन्धित हुनुहुन्छ? हो होइन

If yes, Name of PEP
यदी हो भने, उक्त व्यक्तिको नाम
Position
पद
Name of Political Party
राजनैतिक दलको नाम
Relationship with PEP
राजनैतिक व्यक्तिसँगको सम्बन्ध

Have you been convicted for any crime
तपाईं कुनै अपराधमा कसुरवार ठहरिनु भएका छ? ☐ Yes ☒ No
हो होइन

Copy

Family Details पारिवारिक विवरण

S.N.	Relationship (सम्बन्ध)	Full Name (पूरा नाम)	Citizenship No. (नागरिकता नं.)	Issuing Office (जारी गर्ने कार्यालय)	Date of Issue (जारी मिति)
1	Spouse (पति/पत्नी)	Navraj Pokhrel	64188	Rupandehi	2038-11-20
2	Father (बुबा)	Agnidhar Pokhrel			
3	Mother (आमा)	Mandari Pokhrel			
4	Grandfather (हजुरबुबा)				
5	Grandmother (हजुरबुबा)				
6	Son 1 (छोरा १)	Satish Pokhrel	271060/12322	Kathmandu	
7	Son 2 (छोरा २)	Samip Pokhrel	071060/120323	Kathmandu	2030-06-01
8	Daughter 1 (छोरी १)	Sabina Pokhrel	271060/36216	Kathmandu	2065-12-26
9	Daughter 2 (छोरी २)				
10	Daughter-in-law 1 (बुहारी १)				
11	Daughter-in-law 2 (बुहारी २)				
12	Father-in-law (ससुरा)				

FATCA Declaration

Are you a U.S Resident ?

के तपाईं संयुक्त राज्य अमेरिकाको बासिन्दा हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Are you a U.S Citizen ?

के तपाईं संयुक्त राज्य अमेरिकाको नागरिक हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Are you a Permanent Resident Card (Green Card) Holder ?

के तपाईं संयुक्त राज्य अमेरिकाको स्थायी बसोबास (ग्रीन कार्ड) धारक हुनुहुन्छ ? ☐ Yes हो ☒ No होइन

Do you have Account in Citizen Bank International Ltd. ?

के तपाईंको सिटिजन बैंकमा खाता छ ? ☒ Yes हो ☐ No होइन

If yes, Name of Account

Account No. 051

यदी हो भने, खाताको नाम

Do you have Account in Other Banks ? ☐ Yes हो ☐ No होइन If yes, Bank & Branch Name

तपाईंको अन्य बैंकमा खाता छ ? यदि छ भने, बैंक र शाखाको नाम

Type of Account

खाताको प्रकार

Site Map ☐ Permanent Address

स्थायी ठेगाना

☐ Present Address

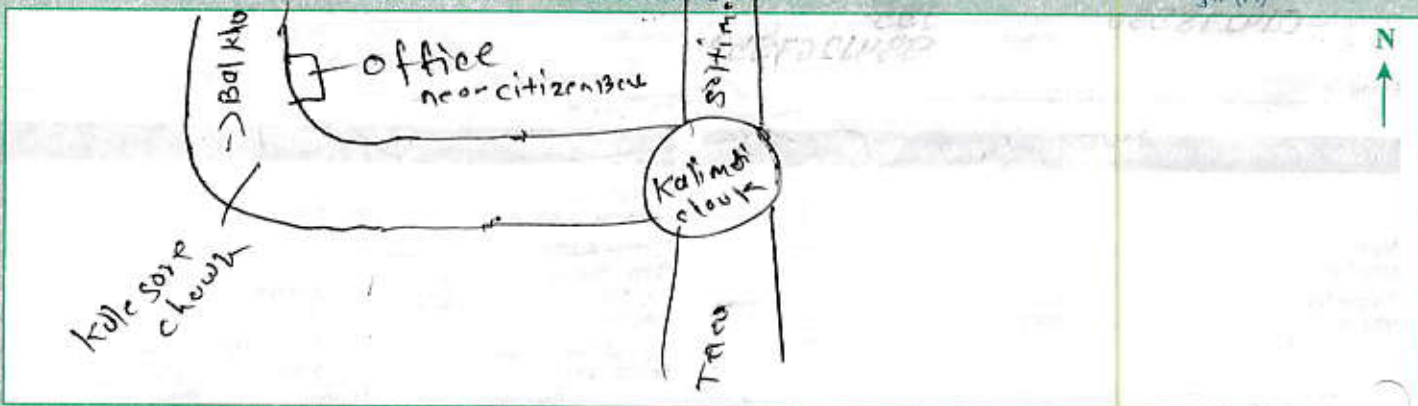
हालको ठेगाना

Name of nearest landmark

नजिकैको प्रसिद्ध स्थान

Distance (M)

दुरी (मि)



I/We hereby declare that all the information and documents submitted to the bank are true and correct. म/हामी यही उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा कागजातहरू सौचो रहेको घोषण गर्दछु/गर्दछौ ।

Right दायाँ

Left बायाँ



Thumb Impression औंठा छाप

Signature (दस्ताखत)

Date:

मिति:

Bank's Use Only

Supporting Documents Submitted by Customer

Photograph

☐ Yes

☐ No

Identification Document

☐ Citizenship

☐ Passport

☐ Other

Employee ID

☐ Yes

☐ No

Address Verifying Document

☐ Utility Bill

☐ Land Ownership Certificate

☐ Other

Risk Grading

☐ Low Risk

☐ Medium Risk

☐ High Risk, Reason

☐ HPP

☐ PEP

☐ Other

Has the information updated in core Banking System & Trust AML/GoAML

☐ Yes

☐ No

☐ Other

The customer's name has been checked in Blacklist report of CIB

☐ Yes

☐ No

Self Declaration Obtained

☐ Yes

☐ No

Remarks If any:

Prepared & Checked By

Verified By

Approved By

KYC Form for Individual Customer



Branch
शाखा

CIF ID

Date
मिति 2078-02-13

Screening ID

KYC ID

Full Name
(BLOCK Letter)

ANJU SHAAMA

नाम (नेपालीमा)

Date of Birth
जन्ममिति 20260113 B.S.

विसं.

A.D.

Gender

Male

Female

Other

Marital Status
वैवाहिक स्थिति Single ☐ Married ☒ Other ☐

अविवाहित

विवाहित

Religion

Hindu

Muslim

Buddhist

Christian

Other

Nationality
राष्ट्रियता Nepali

Citizenship No.

नागरिकता नं. 1774/8489

Issuing Office

जारी गर्ने कार्यालय

Issued Date

जारी मिति 2078-12-27

Passport No.

पासपोर्ट नं.

Issuing Office

जारी गर्ने कार्यालय

Issued Date

जारी मिति

Expiry Date

समाप्ति मिति

Other ID No.

अन्य पहिचानपत्र नं.

Issuing Office

जारी गर्ने कार्यालय

Issued Date

जारी मिति

Expiry Date

समाप्ति मिति

Permanent Address/स्थायी ठेगाना

House No. Tole Balthu

Ward No. 14

Rural/Municipality

Province No. 03

District

Hathmandu

Zone

अञ्चल

Bagmati

Phone No.

फोन नं.

Mobile No.

मोबाइल नं.

9851089492

Email

ईमेल

Present Address/हालको ठेगाना

House No.

Tole

Ward No.

Rural/Municipality

Province No.

District

Zone

Phone No.

फोन नं.

Mobile No.

मोबाइल नं.

PAN No.

पान नं.

P.O. Box No.

पो.ब.नं.

In case of residing in rented house/बहालको घरमा बसेको मए

Name of Land Lord

घरघनीको नाम

Phone No.

फोन नं.

Mobile No.

मोबाइल नं.

In case of NRN/गैर आवश्यक नेपाली भएमा

NRN ID No.

एनआरएन आईडि नं.

Foreign Address

विदेश स्थित ठेगाना

City/State

शहर/राज्य

Country

देश

Type of Visa

भिसाको प्रकार

Expiry Date

समाप्ति मिति

Education Qualification

शैक्षिक योग्यता

Below SLC

एसएलसी मुनि

SLC

एसएलसी

Intermediate

प्रविणता प्रमाणपत्र तह

Bachelors

स्नातक

Masters

स्नातकोत्तर

Others

अन्य

Service

नोकरी

Business

व्यवसाय

Professional

विशेषज्ञ

Housewife

गृहिणी

Others

अन्य

In case of service/नोकरी भएमा

Name of Institution/Firm

संस्था/कार्यालयको नाम

Address

ठेगाना

Designation/Position

पद/स्तर

Contact No.

सम्पर्क नं.

Source of Income

आयको स्रोत

Salary

तलब

Business

व्यवसाय

Rent

बहाल

Pension

निवृत्तिभरण

Remittance

विप्रेषण

Others

अन्य

Annual Income

वार्षिक आय

Upto Rs. 1 lakh

रु. १ लाख सम्म

Upto Rs. 20 lakh

रु. २० लाख सम्म

Upto Rs. 50 lakh

रु. ५० लाख सम्म

Above Rs. 50 lakh

रु. ५० लाख भन्दा बढी

Are you a Highly Positioned Person (HPP) ?

के तपाईं उच्चपदस्थ व्यक्ति हुनुहुन्छ ?

Yes

हो

No

होइन

If Yes, Position

यदी हो भने, पद

Are you a Politically Exposed Person (PEP) or Associated with Any PEP ?

के तपाईं राजनैतिक प्रभावित व्यक्ति हुनुहुन्छ वा कुनै राजनैतिक प्रभावित व्यक्तिसँग सम्बन्धित हुनुहुन्छ ?

Yes

हो

No

होइन

If yes, Name of PEP

यदी हो भने, उक्त व्यक्तिको नाम

Position

पद

Name of Political Party

राजनैतिक दलको नाम

Relationship with PEP

राजनैतिक व्यक्तिसँगको सम्बन्ध

Have you been convicted for any crime

तपाईं कुनै अपराधमा कसुरवार ठहरिनु भएका छ ?

Yes

हो

No

होइन

Family Details पारिवारिक विवरण

S.N.	Relationship (सम्बन्ध)	Full Name (पूर्ण नाम)	Citizenship No. (नागरिकता नं.)	Issuing Office (जारी गर्ने कार्यालय)	Date of Issue (जारी मिति)
1	Spouse (पति/पत्नी)				
2	Father (बुबा)				
3	Mother (आमा)	Som Prasad Khanal			
4	Grandfather (हजुरबुबा)	Laxmi Khanal			
5	Grandmother (हजुरबुबा)				
6	Son 1 (छोरा १)	Gaurav Sharma	15504		
7	Son 2 (छोरा २)				
8	Daughter 1 (छोरी १)	Riha Sharma	231060/12906		2062-01-05
9	Daughter 2 (छोरी २)				
10	Daughter-in-law 1 (बुहारी १)	Anjula Dahal			2064-09-05
11	Daughter-in-law 2 (बुहारी २)				
12	Father-in-law (ससुरा)				

FATCA Declaration

Are you a U.S Resident?

के तपाईं संयुक्त राज्य अमेरिकाको बासिन्दा हुनुहुन्छ? ☐ Yes हो ☒ No होइन

Are you a U.S Citizen?

के तपाईं संयुक्त राज्य अमेरिकाको नागरिक हुनुहुन्छ? ☐ Yes हो ☒ No होइन

Are you a Permanent Resident Card (Green Card) Holder?

के तपाईं संयुक्त राज्य अमेरिकाको स्थायी बसोबास (ग्रीन कार्ड) धारक हुनुहुन्छ? ☐ Yes हो ☒ No होइन

Do you have Account in Citizen Bank International Ltd.?

के तपाईंको सिटिजन बैंकमा खाता छ? ☐ Yes हो ☒ No होइन

If yes, Name of Account

यदी हो भने, खाताको नाम Anju Sharma

Account No. 051

खाता नम्बर

Do you have Account in Other Banks?

तपाईंको अन्य बैंकमा खाता छ? ☐ Yes हो ☒ No होइन यदि छ भने, बैंक र शाखाको नाम

Type of Account

खाताको प्रकार

Site Map

☐ Permanent Address

स्थायी ठेगाना

☐ Present Address

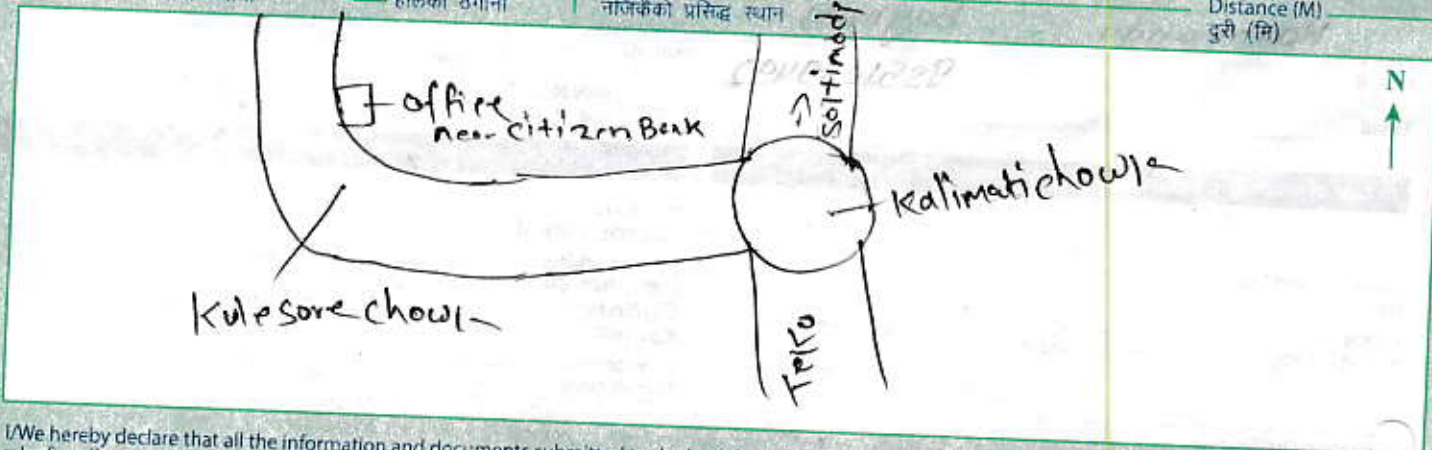
हालको ठेगाना

Name of nearest landmark

नजिकैको प्रसिद्ध स्थान

Distance (M)

दुरी (मि)



I/We hereby declare that all the information and documents submitted to the bank are true and correct.
म/हामी यहाँ उपलब्ध गराइएको सम्पूर्ण विवरणहरू तथा कागजातहरू सॉचो रहेको घोषणा गर्दछु/गर्दछौं।

Signature (दस्तखत)

Date:

मिति:

Bank's Use Only

Right दायाँ

Left बायाँ



Thumb Impression औंला छाप

Supporting Documents Submitted by Customer

Photograph

☐ Yes

☐ No

Identification Document

☐ Citizenship

☐ Passport

☐ Other

Employee ID

☐ Yes

☐ No

Address Verifying Document

☐ Utility Bill

☐ Land Ownership Certificate

☐ Other

Risk Grading

☐ Low Risk

☐ Medium Risk

☐ High Risk, Reason

☐ HPP

☐ PEP

☐ Other

Has the information updated in core Banking System & Trust AML/GoAML

☐ Yes

☐ No

☐ Other

The customer's name has been checked in Blacklist report of CIB

☐ Yes

☐ No

Self Declaration Obtained

Remarks If any:

Prepared & Checked By

Verified By

Approved By

KYC FORM FOR CORPORATE CUSTOMER

संस्थागत ग्राहक पहिचान विवरण फाराम

Screening ID

KYC ID

Account Number
खाता नं.

001000197CA

Date:
मिति:

Client ID
ग्राहक पहिचान

Account Name: खाताको नाम: Mandari Hardware Pvt. Ltd.		Registration Office & Date: दर्ता कार्यालय र मिति: Office of the Com. Registrar 2067-12-08	
Date of Registration दर्ता मिति: 2067-12-08	Registration No.: दर्ता नं: 81714/067/068	Regd./PAN Expiry Date: समाप्ति मिति: 2067-12-08	
PAN/VAT No. स्थायी लेखा नं.: 304919532		Beneficial Owner-Name: हिताधिकारीको नाम: Anju Sharma	
Office Contact No: कार्यालय सम्पर्क नं.: 014283412		Address: ठेगाना: Balkhu 14	
Office Fax No: कार्यालय फ्याक्स नं.:		Citizenship No.: नागरिकता नं.: 1774/8489	
Office Email: कार्यालय ईमेल:		Relation: नाता: Contact No.: 9851089492	
Post Box No.: पोस्ट बक्स नं.:		Business Address (व्यवसायिक ठेगाना) Balkhu	
Registered Address (दर्ता गरिएको ठेगाना) Balkhu		Ward No.: 14 Toile: वडा नं.: टोल:	
House No.: घर नं.:		House No.: घर नं.:	
District: जिल्ला: Kathmandu		Province No.: 03	
Nature of Business: व्यवसायको प्रकृति:		Number of Branches: शाखाको संख्या:	
<input type="checkbox"/> Manufacturing उत्पादन <input type="checkbox"/> Trading व्यापार <input type="checkbox"/> Service सेवा <input type="checkbox"/> Import/Export आयात/निर्यात <input checked="" type="checkbox"/> Other अन्य			

Management (BOD Members and Chief Executive) व्यवस्थापन (संचालक सदस्यहरू र प्रमुख कार्यकारी अधिकृत)

SN क्र.सं.	Full Name & Post पूरा नाम र पद	Permanent Address स्थायी ठेगाना	Present Address हालको ठेगाना	Citizenship No./Issuing Office नागरिकता नं./जारी गर्ने कार्यालय	Phone/Mobile No. फोन नं./मोबाइल नं.
	Anju Sharma	Balkhu	Balkhu	1774/8489	9851020120
	Navraj Pokhrel	Kuleshwar	Kuleshwar	64188	9851020120
	Gita Kumari Muddhara Pokhrel	Kuleshwar	Kuleshwar	560	9841264958

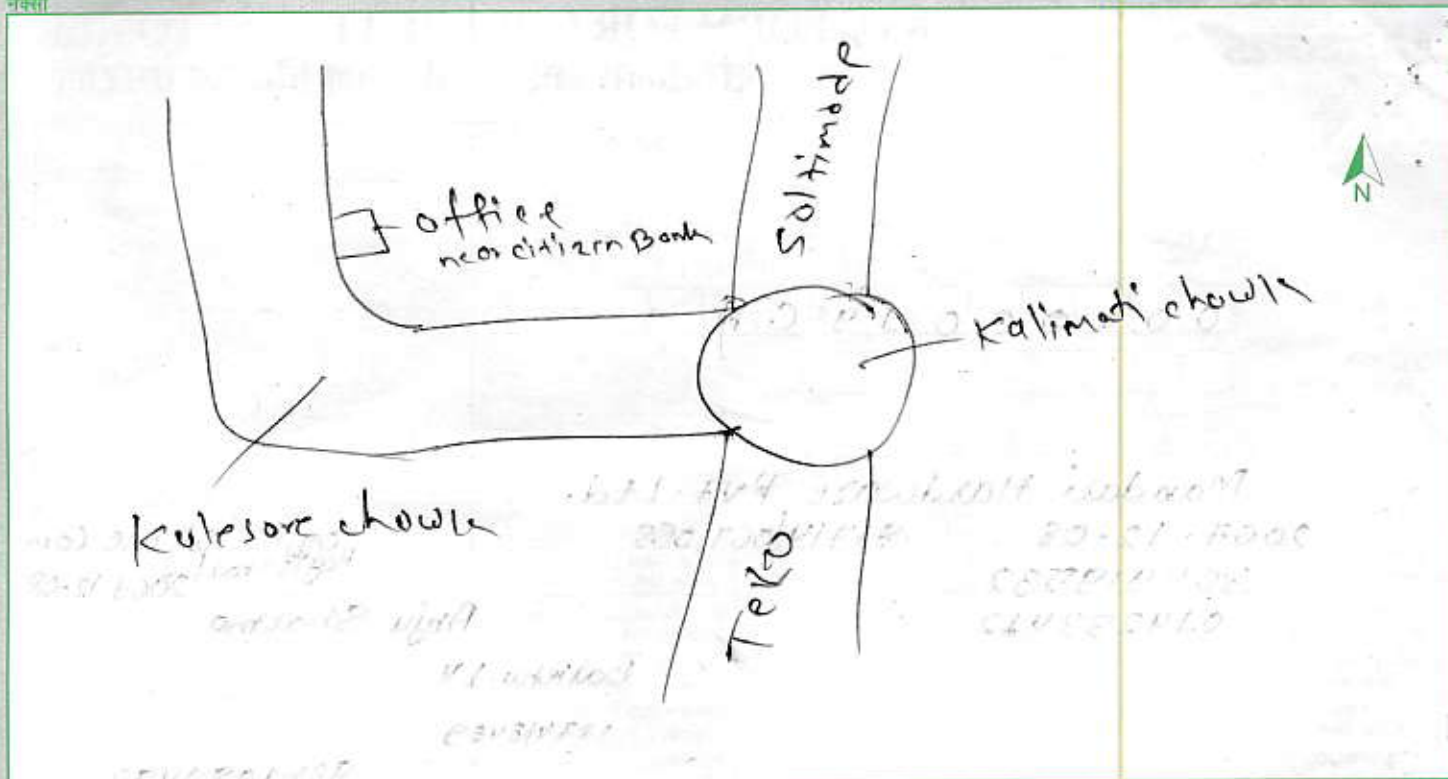
Punished or charged for any criminal activities in the past ? बिगतमा फौजदारी कसुरमा दण्डित वा जरिवाना हुनु भएको छ ?	<input type="checkbox"/> Yes छ	<input checked="" type="checkbox"/> No छैन
Expected Monthly Turnover: अनुमानित मासिक कारोबार रकम:	<input type="checkbox"/> Less than 25 Lakhs ५ लाख भन्दा कम	<input type="checkbox"/> Less than 50 Lakhs ५० लाख भन्दा कम
Expected Monthly No. of Transaction: अनुमानित मासिक कारोबार संख्या :	<input type="checkbox"/> Less than 25 २५ भन्दा कम	<input type="checkbox"/> More than 50 ५० भन्दा बढी
Purpose of Account: खाताको उद्देश्य:	<input checked="" type="checkbox"/> Business व्यापार	
	<input type="checkbox"/> Other (Please specify) अन्य (उल्लेख गर्नुहोस्)	

Are any Directors/Account Operators Civil Servant/High Positioner/Politician/Relatives of Politician?
कुनै पनि बोर्ड सदस्य/संचालक राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिज्ञ नातेदारको नातेदार ?

☐ Yes
हो

☒ No
होइन





Company Seal
संस्थाको छाप

Authorised Signatory
आधिकारिक दस्तखत
Date:
मिति:

Bank's Use Only

Supporting Documents (provided by the customer)

Photo of account operators	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not Obtained
Photo of all managerial personnel	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not Obtained
Citizenship of all managerial personnel	<input type="checkbox"/> Obtained	<input type="checkbox"/> Not Obtained
Registration Document	<input type="checkbox"/> Registration Certificate	<input type="checkbox"/> MOA/AOA
Audited Financials of last fiscal year	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify the FY. _____
Income Tax Clearance of Last Fiscal Year	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify the FY. _____

Remarks, if any

Account Risk Grading:

☐ High Risk ☐ Medium Risk ☐ Low Risk
☐ HPP ☐ PEP

Name listed in OFAC (Name listed in sanction)

☐ Yes ☐ No

Remarks / information if any:

Information Update in Core Banking System:

☐ Yes ☐ No

Date Updated on: _____

Remarks if any:

Branch Manager

Date:

CSD Staff

Date

Screening ID

KYC ID

Date: 09.07.2019
मिति:

Account Number खाता नं: 0010001901CA		Client ID ग्राहक आईडि:	
Account Holder's Name: खातावालाको नाम: Navraj Pokharel		PAN No.: स्थायी लेखा नं.:	
Date of Birth: जन्म मिति: 2019-11-01	Citizenship / ID No.: नागरिकता/परिचय पत्र नं.: 64188	Issuing Office & Date: जारी गर्ने जिल्ला/मिति: 20/11/038 Ktm	
Gender: लिंग: M	Passport No.: राहदानी नं.:	Issuing Office & Date: जारी गर्ने जिल्ला/मिति:	
Nationality: राष्ट्रियता: Nepali	Passport Expiry Date: राहदानी समाप्ति मिति:	Occupation: पेशा:	
Phone No.: फोन नं.:	Marital Status: वैवाहिक स्थिति: M	Mobile No.: मोबाइल नं.: 9851026120	PO Box: पोष्ट बक्स नं.:
E mail: ईमेल:			
Present Address (हालको ठेगाना) Ward No.: वडा नं.: 14 Tola: टोल: Kuleshwar House No.: घर नं.: District: जिल्ला: Kathmandu Province No.: प्रदेश नं.: 8		Permanent Address (स्थायी ठेगाना) Ward No.: वडा नं.: Tola: टोल: House No.: घर नं.: District: जिल्ला: Same Province No.: प्रदेश नं.:	
In case of Non Residence (गैर आवासीय नेपाली भएमा) NRN ID (If applicable): गैर आवासीय परिचयपत्र (भएमा) Foreign Address: वैदेशिक ठेगाना: Country: देश: City/State: शहर/प्रान्त:		Beneficial Owner (हिताधिकारी) <input type="checkbox"/> Yes छ <input type="checkbox"/> No छैन If Yes (यदि छ भने), Beneficial Owner Name: हिताधिकारीको नाम: Citizenship No.: नागरिकता नं.: Address: ठेगाना: Relation: नरता: Contact No.: सम्पर्क नं.:	
Contact No.: सम्पर्क ठेगाना: Type of Visa: मिसाको प्रकार: Visa Expiry Date: मिसा समाप्ति मिति:			

Family Members (परिवारका सदस्यहरू)

SN क्र.सं.	Relation सम्बन्ध	Name & Surname नाम र थर	Citizenship No. नागरिकता नं.	Issuing Office जारी गर्ने कार्यालय	Date of issue जारी मिति
1	Spouse (पति/पत्नी)	Gita Kuman Pokharel			
2	Father (बुबा)	Agnidhar pokharel			
3	Mother (आमा)				
4	Grandfather (हजुरबुबा)				
5	Grandmother (हजुरआमा)				
6	Son 1 (छोरा १)				
	Son 2 (छोरा २)				
7	Daughter 1 (छोरी १)				
	Daughter 2 (छोरी २)				
8	Daughter in Law (बुहारी) (son's wife)				
9	Father in Law (शस्ुरा) (of married women)				

Occupation/Business (पेशा/व्यवसाय)

SN क्र.सं.	Name of Firm/Company/Office संस्थाको नाम	Address ठेगाना	Web Site वेबसाइट	Post पद	Expected Annual Income अनुमानित वार्षिक आय
1	Manderi Hardware	Ktm		Direct	2 lak
2					
3					
4					

Are you civil servant/high position/politician/Relatives of politician?
के तपाईं राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिज्ञ/राजनीतिज्ञको नातेदार हुनुहुन्छ छ ? ☐ Yes हो ☒ No होइन

Expected Monthly Turnover:
अनुमानित मासिक कारोबार रकम: ☒ Less than 5 Lakhs ५ लाख भन्दा कम ☐ Less than 50 Lakhs ५० लाख भन्दा कम ☐ More than 50 Lakhs ५० लाख भन्दा बढी

Expected Monthly No. of Transaction:
अनुमानित मासिक कारोबार संख्या: ☒ Less than 15 १५ भन्दा कम ☐ Less than 25 २५ भन्दा कम ☐ More than 25 २५ भन्दा बढी

Purpose of Account:
खाताको उद्देश्य: ☐ Remittance विप्रेषण ☐ Savings बचत ☒ Business व्यापार ☐ Others अन्य

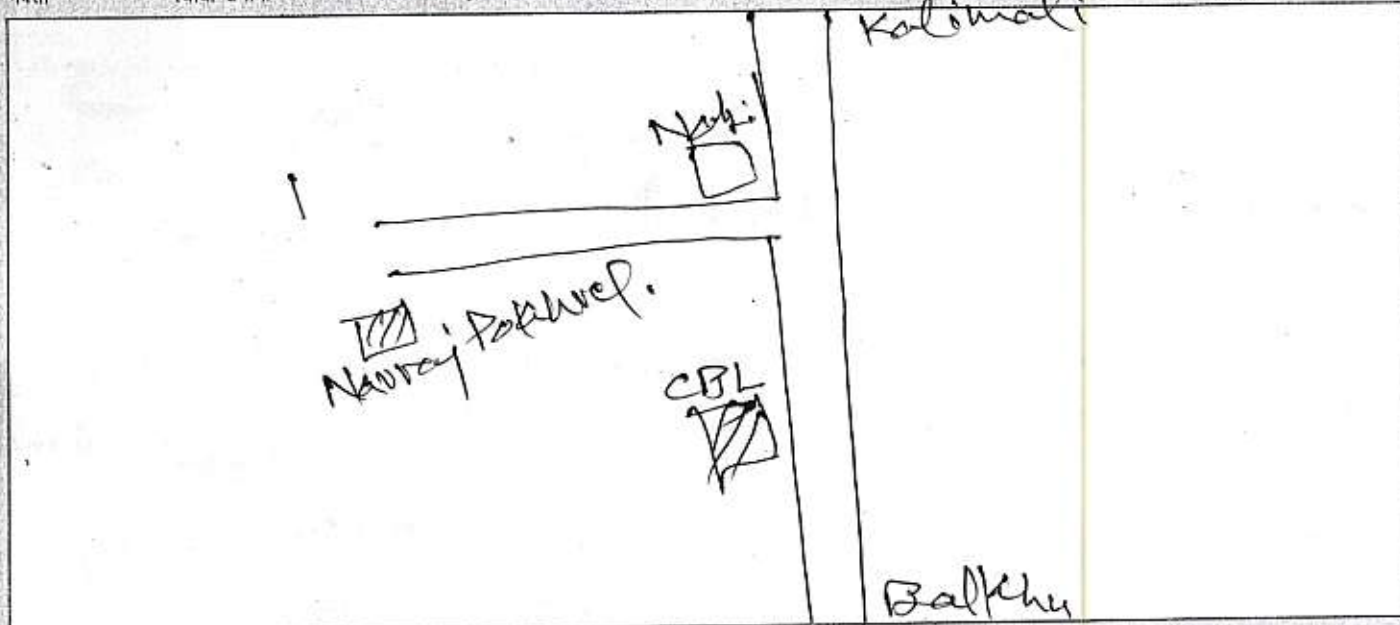
Source of fund:
आयको स्रोत: ☐ Salary तलब ☐ Remittance विप्रेषण ☐ Investment लगानी ☐ Sale of Asset सम्पत्ती बिक्रि ☐ Rental Income घर भाडा ☒ Business व्यापार ☐ Borrowings सापटी ☐ Loan Repayment ऋण किरता मुत्तानी ☐ Others (Please Specify) अन्य (कलेख गर्नुहोस्)

Punished or charged for any criminal activities in the past?
विगतमा फौजदारी कसुरमा दण्डित वा जरियाना हुनु भएको छ ? ☐ Yes छ ☒ No छैन

Site Map
नक्सा

☐ Permanent Address
स्थायी ठेगाना

☐ Present Address
हालको ठेगाना



I/We hereby declare that all the information & documents provided to the bank are true & Correct.

म/हामी यहाँ उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा कागजातहरू सौँचो रहेको घोषणा गर्दछु/गर्दछौ ।

Right दायाँ

Left बायाँ



Thumb Impression
औंठा छाप



Account Holder's Signature
खातावालाको हस्ताक्षर

(Nauraj Pokhrel)

Note: Any document/information if not exists, shall be declared an N/A.

Bank's Use Only

Supporting Documents (provided by the customer)

Photo of account holder	<input checked="" type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained
Photo of beneficial owner	<input type="checkbox"/> Obtained	<input checked="" type="checkbox"/> Not obtained
Identification Document	<input checked="" type="checkbox"/> Citizenship	<input type="checkbox"/> Passport
Address verifying document (Any one)	<input type="checkbox"/> Utility Bill (Water/Electricity/Telephone Bill)	<input type="checkbox"/> Driving License
	<input type="checkbox"/> Rental Agreement	<input type="checkbox"/> letter from local authority
Employee ID (Mandatory for Govt. Officials)	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Others _____
		<input type="checkbox"/> Land ownership document
		<input type="checkbox"/> Voter ID
		<input type="checkbox"/> No

Account Risk Grading:

☐ High Risk ☒ Medium Risk ☐ Low Risk
☐ HPP ☐ PEP

Name list in Sanction

☐ Yes ☒ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuracy Check:

☒ Yes ☐ No

Date Updated on:

09.07.2019

Remarks if any:

CSD Staff

Date

09.07.2019

Screening ID

KYC ID

Date:
मिति:

Account Number
खाता नं.

Client ID
ग्राहक आईडि

Account Holder's Name: खातावालाको नाम: Gita Kumari Mudholi Pokharel		Passport No.: पासपोर्ट नं.: 1	
Date of Birth: जन्म मिति: 15/04/2030	Citizenship / ID No.: नागरिकता/परिचय पत्र नं.: 560	Issuing Office & Date: जारी गर्ने जिल्ला/मिति: Barahi 04/10/46	
Gender: लिंग: F	Passport No.: राहदानी नं.: 1	Issuing Office & Date: जारी गर्ने जिल्ला/मिति: 1	
Nationality: राष्ट्रियता: Nepali	Marital Status: वैवाहिक स्थिति: Married	Passport Expiry Date: राहदानी समाप्ति मिति: 1	
Phone No.: फोन नं.: 1	Mobile No.: मोबाइल नं.: 1	Occupation: पेशा: Business	
E mail: ईमेल: 1		PO Box: पोस्ट बक्स नं.: 1	
Present Address (हालको ठेगाना) Ward No.: 14 वडा नं.: 14 Tola: Kuleshwar टोल: Kuleshwar House No.: 1 घर नं.: 1 District: Kathmandu Province No.: 3 जिल्ला: Kathmandu प्रदेश नं.: 3		Permanent Address (स्थायी ठेगाना) Ward No.: 1 वडा नं.: 1 Tola: 1 टोल: 1 House No.: 1 घर नं.: 1 District: 1 Province No.: 1 जिल्ला: 1 प्रदेश नं.: 1	
In case of Non Residence (गैर आवासीय नेपाली भएमा) NRN ID (if applicable): गैर आवासीय परिचयपत्र (भएमा): 1 Foreign Address: वैदेशिक ठेगाना: 1 Country: देश: 1 City/State: शहर/प्रान्त: 1 Contact No.: सम्पर्क नं.: 1 Type of Visa: मिसाको प्रकार: 1 Visa Expiry Date: मिसा समाप्ति मिति: 1		Beneficial Owner (हिताधिकारी) <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes (यदि छ भने), Beneficial Owner Name: हिताधिकारीको नाम: 1 Citizenship No.: नागरिकता नं.: 1 Address: ठेगाना: 1 Relation: नाता: 1 Contact No.: सम्पर्क नं.: 1	

Family Members (परिवारका सदस्यहरू)

SN क्र.सं.	Relation सम्बन्ध	Name & Surname नाम र थर	Citizenship No. नागरिकता नं.	Issuing Office जारी गर्ने कार्यालय	Date of issue जारी मिति
1	Spouse (पति/पत्नी)	Naurgi Pokharel			
2	Father (बुबा)	Abendra K. Pokharel Sharma			
3	Mother (आमा)				
4	Grandfather (हजुरबुबा)				
5	Grandmother (हजुरआमा)				
6	Son 1 (छोरा १)				
	Son 2 (छोरा २)				
7	Daughter 1 (छोरी १)				
	Daughter 2 (छोरी २)				
8	Daughter in Law (बुहारी) (son's wife)				
9	Father in Law (रासुरा) (or married women) (विवाहित महिलाको हकमा)				

Occupation/Business (पेशा/व्यवसाय)

SN क्र.सं.	Name of Firm/Company/Office संस्थाको नाम	Address ठेगाना	Web Site वेबसाइट	Post पद	Expected Annual Income अनुमानित वार्षिक आय
1	Mandari Hardware	Ktm		Director	7 Lakh
2					
3					
4					

Are you civil servant/high position/politician/Relatives of politician ?
के तपाईं राष्ट्रसेवक/उच्च पदाधिकारी/राजनीतिज्ञ/राजनीतिज्ञको नातेदार हुनुहुन्छ हो ? ☐ Yes ☒ No

Expected Monthly Turnover:
अनुमानित मासिक कारोबार रकम: ☒ Less than 5 Lakhs ☐ Less than 50 Lakhs ☐ More than 50 Lakhs
अनुमानित मासिक कारोबार संख्या: ☒ ५ लाख भन्दा कम ☐ ५० लाख भन्दा कम ☐ ५० लाख भन्दा बढी

Expected Monthly No. of Transaction:
अनुमानित मासिक कारोबार संख्या: ☒ Less than 15 ☐ Less than 25 ☐ More than 25
अनुमानित मासिक कारोबार संख्या: ☒ १५ भन्दा कम ☐ २५ भन्दा कम ☐ २५ भन्दा बढी

Purpose of Account: ☐ Remittance ☐ Savings ☒ Business ☐ Others
खाताको उद्देश्य: ☐ विप्रेषण ☐ बचत ☒ व्यापार ☐ अन्य

Source of fund: ☐ Salary ☐ Remittance ☐ Investment ☐ Sale of Asset ☐ Rental Income
आयको स्रोत: ☒ तलब ☐ विप्रेषण ☐ लगानी ☐ सम्पत्ती बिक्रि ☐ घर भाडा

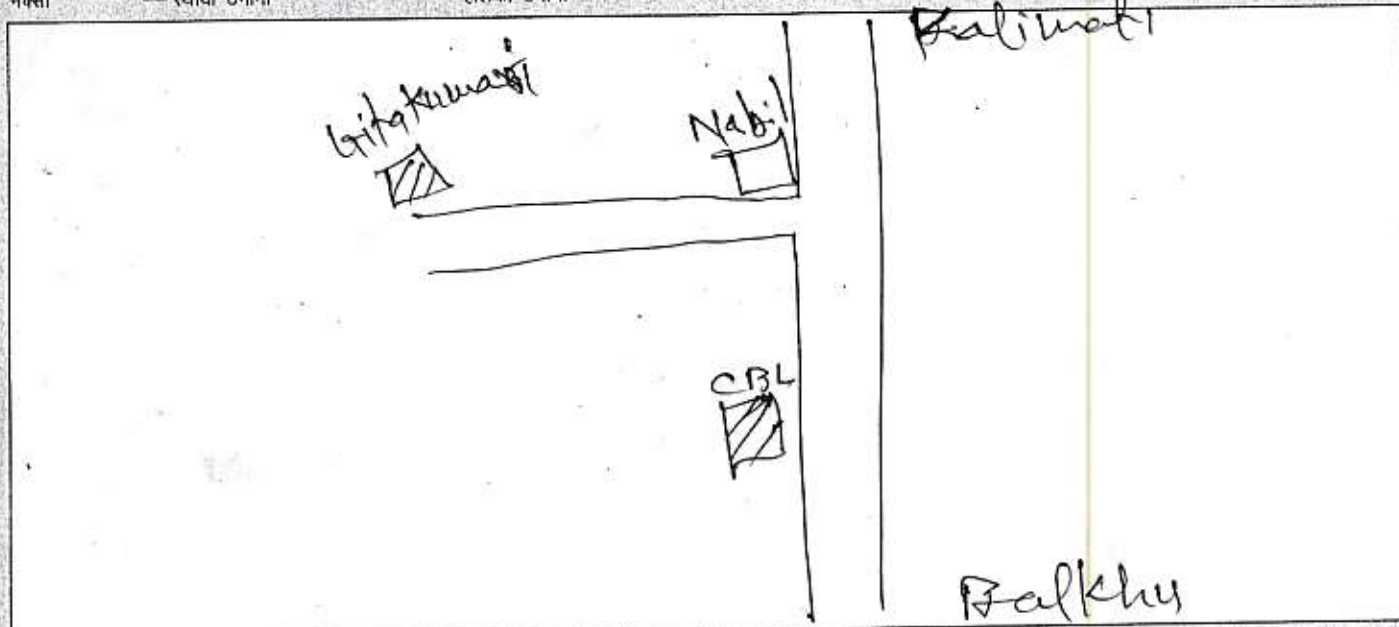
☒ Business ☐ Borrowings ☐ Loan Repayment ☐ Others (Please Specify)
☒ व्यापार ☐ ऋण ☐ ऋण किस्ता भुक्तानी ☐ अन्य (उल्लेख गर्नुहोस्)

Punished or charged for any criminal activities in the past ?
विगतमा कसुरमा दण्डित वा जरिवाना हुनु भएको छ ? ☐ Yes ☒ No

Site Map
नक्सा

☐ Permanent Address
स्थायी ठेगाना

☐ Present Address
हालको ठेगाना



I/We hereby declare that all the information & documents provided to the bank are true & Correct.

म/हामी यहाँ उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा कागजातहरू सौँचो रहेको घोषणा गर्दछु/गर्दछौ ।

Right दायाँ

Left बायाँ



Thumb Impression
औंठा छाप



Account Holder's Signature
खाताधालाको हस्ताक्षर

Note: Any document/information if not exists, shall be declared as N/A.

(Gita Kumari Mudhori)

Bank's Use Only

Supporting Documents (provided by the customer)

Photo of account holder	<input checked="" type="checkbox"/> Obtained	<input type="checkbox"/> Not obtained
Photo of beneficial owner	<input type="checkbox"/> Obtained	<input checked="" type="checkbox"/> Not obtained
Identification Document	<input checked="" type="checkbox"/> Citizenship	<input type="checkbox"/> Passport
Address verifying document (Any one)	<input type="checkbox"/> Utility Bill (Water/Electricity/Telephone Bill)	<input type="checkbox"/> Driving License
	<input type="checkbox"/> Rental Agreement	<input type="checkbox"/> letter from local authority
Employee ID (Mandatory for Govt. Officials)	<input type="checkbox"/> N/A	<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Others _____
		<input type="checkbox"/> Land ownership document
		<input type="checkbox"/> Voter ID

Account Risk Grading:

☐ High Risk ☒ Medium Risk ☐ Low Risk
☐ HPP ☐ PEP

Name list in Sanction

☐ Yes ☒ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuity Check:

☒ Yes ☐ No

Date Updated on: 09.07.2019

Remarks if any:

CSD Staff

Date

09.07.2019

Screening ID

KYC ID

Date:

मिति:

०७/०७/०७

Account Number
खाता नं.

0010001901CA

Client ID

ग्राहक आईडी

Account Holder's Name:

Anju Sharma

PAN No.:

स्थायी लेखा नं.:

Date of Birth:

13/01/2026

Citizenship / ID No.:

नागरिकता/परिचय पत्र नं.:

1774/8489

Issuing Office & Date:

जारी गर्ने जिल्ला/मिति:

Ktm 27/12/48

Gender:

F

Passport No.:

राहदानी नं.:

1

Issuing Office & Date:

जारी गर्ने जिल्ला/मिति:

Ktm

Nationality:

Nepali

Passport Expiry Date:

राहदानी समाप्ति मिति:

Phone No.:

9851089492

Marital Status:

वैवाहिक स्थिति:

S.

Mobile No.:

मोबाइल नं.:

Occupation:

पेशा:

Business

E mail:

Present Address (हालको ठेगाना)

Ward No.:

14

Tole:

Kuleshwar

House No.:

घर नं.:

District:

Kathmandu

Province No.:

3

City/State:

जिल्ला:

Permanent Address (स्थायी ठेगाना)

Ward No.:

वडा नं.:

Tole:

टोल:

House No.:

घर नं.:

District:

जिल्ला:

Province No.:

प्रदेश नं.:

In case of Non Residence (गैर आवासीय नेपाली भएमा)

NRN ID (If applicable):

गैर आवासीय परिचयपत्र (भएमा)

Foreign Address:

वैदेशिक ठेगाना:

Country:

देश:

City/State:

शहर/प्रान्त:

Contact No.:

सम्पर्क ठेगाना:

Type of Visa:

विसाको प्रकार:

Visa Expiry Date:

विसा समाप्ति मिति:

Beneficial Owner (हिताधिकारी)

If Yes (यदि छ भने),

Beneficial Owner Name:

हिताधिकारीको नाम:

Citizenship No.:

नागरिकता नं.:

Address:

ठेगाना:

Relation:

नाता:

Contact No.:

सम्पर्क नं.:

Family Members (परिवारका सदस्यहरू)

SN क्र.सं.	Relation सम्बन्ध	Name & Surname नाम र थर	Citizenship No. नागरिकता नं.	Issuing Office जारी गर्ने कार्यालय	Date of issue जारी मिति
1	Spouse (पति/पत्नी)				
2	Father (बुबा)	Som Pd Khawal			
3	Mother (आमा)	Laxmi Khawal			
4	Grandfather (हजुरबुबा)				
5	Grandmother (हजुरआमा)				
6	Son 1 (छोरा १)	Gaurab Sharma			
	Son 2 (छोरा २)				
7	Daughter 1 (छोरी १)	Riha Sharma			
	Daughter 2 (छोरी २)				
8	Daughter in Law (बुहारी) (son's wife)				
9	Father in Law (शस्वरा) (of married women) (विवाहित महिलाको हकमा)				

Occupation/Business (पेशा/व्यवसाय)

SN क्र.सं.	Name of Firm/Company/Office संस्थाको नाम	Address ठेगाना	Web Site वेबसाइट	Post पद	Expected Annual Income अनुमानित वार्षिक आय
1	Mandan Hardware	Km		Director	SLen
2					
3					
4					

Are you civil servant/high position/politician/Relatives of politician ?

Yes

No

Expected Monthly Turnover:

अनुमानित मासिक कारोबार रकम:

Less than 5 Lakhs

५ लाख भन्दा कम

Less than 50 Lakhs

५० लाख भन्दा कम

More than 50 Lakhs

५० लाख भन्दा बढी

Expected Monthly No. of Transaction:

अनुमानित मासिक कारोबार संख्या:

Less than 15

१५ भन्दा कम

Less than 25

२५ भन्दा कम

More than 25

२५ भन्दा बढी

Purpose of Account:

खाताको उद्देश्य:

Remittance

विशेषण

Savings

बचत

Business

व्यापार

Others

अन्य

Source of fund

आयको स्रोत

Salary

तलब

Remittance

विशेषण

Investment

लगानी

Sale of Asset

सम्पत्ती बिक्री

Rental Income

घर भाडा

Business

व्यापार

Borrowings

सापटी

Loan Repayment

ऋण किस्ता चुक्तागो

Others (Please Specify)

अन्य (बखुलाउनुहोस्)

Punished or charged for any criminal activities in the past ?

निगतामा फौजदारी कसुरमा दण्डित वा जरिवाना हुनु भएको छ ?

Yes

छ

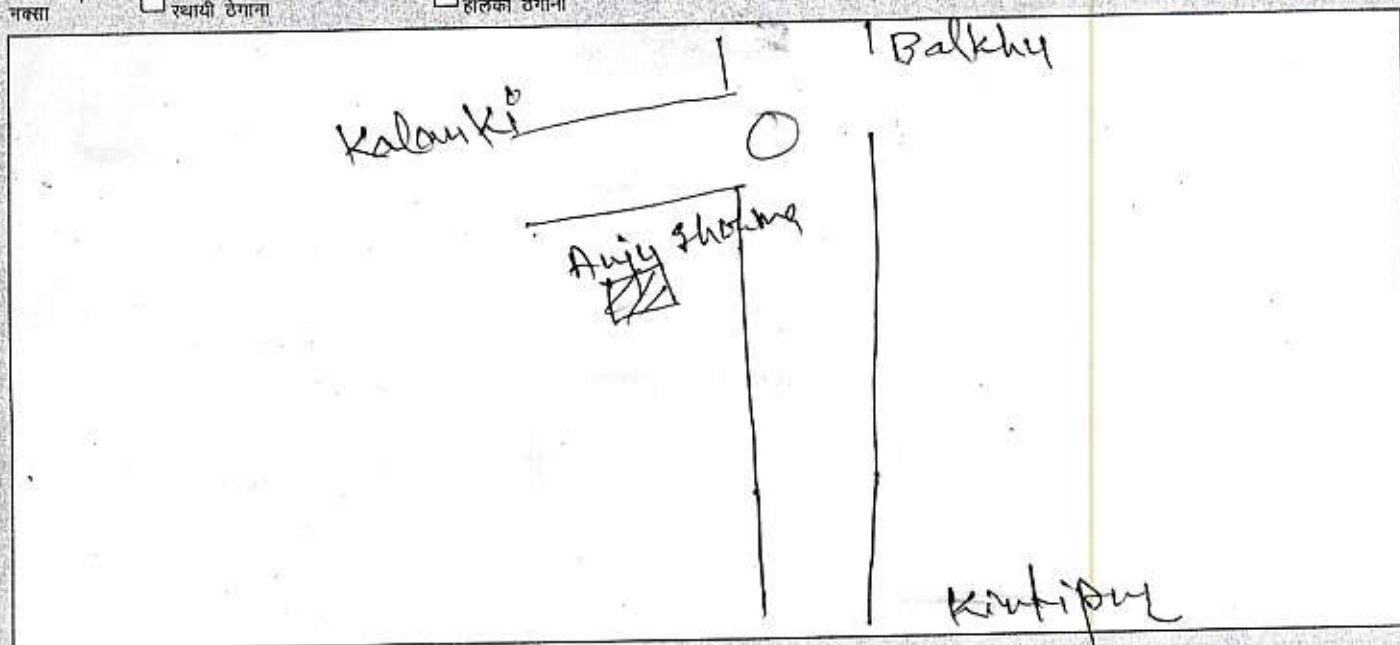
No

छैन

Site Map
नक्सा

☐ Permanent Address
स्थायी ठेगाना

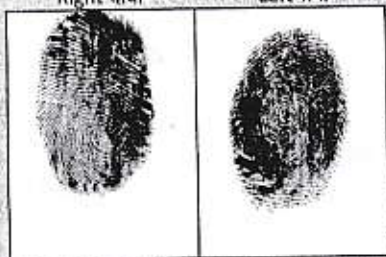
☐ Present Address
हालको ठेगाना



I/We hereby declare that all the information & documents provided to the bank are true & Correct.
म/हामी यहाँ उपलब्ध गराइएका सम्पूर्ण विवरणहरू तथा कागजातहरू सौथो रहेको घोषणा गर्दछु/गर्दछौ ।

Right दायाँ

Left बायाँ



Thumb Impression
औंठा छाप

Note: Any document/information if not exists, shall be declared an N/A.

Bank's Use Only

Account Holder's Signature
खातावालाको हस्ताक्षर
(Anju Sharma)

Supporting Documents (provided by the customer)

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/Electricity/
Telephone Bill)

☐ Driving License

☐ Land ownership document

☐ Rental Agreement

☐ letter from local authority

☐ Voter ID

Employee ID (Mandatory for Govt. Officials)

☐ N/A

☐ Yes

☐ No

Account Risk Grading:

☐ High Risk

☒ Medium Risk

☐ Low Risk

☐ HPP

☐ PEP

Name list in Sanction

☐ Yes

☒ No

Remarks / information if any:

Branch Manager

Date:

Information Update in Core Banking System & accuity Check:

☒ Yes

☐ No

Date Updated on:

09.07.2019

Remarks if any:

CSD Staff

Date

09.07.2019

KYC FORM FOR CORPORATE CUSTOMER

संस्थागत ग्राहक पहिचान विवरण फाराम

Screening ID

KYC ID

Account Number
खाता नं.

0010001901CA

Date:

09-02-2017

Client ID
ग्राहक परिचयपत्र

00117541

Account Name: खाताको नाम: MANDARI HARDWARE Pvt. Ltd.		Registration Office & Date: दर्ता कार्यालय र मिति	
Date of Registration दर्ता मिति: 08/12/067		Registration No.: 81714/067-068	
PAN/VAT No. स्थायी लेखा नं.: 304919532		Regd./PAN Expiry Date: समाप्ति मिति:	
Office Contact No: कार्यालय सम्पर्क नं.: 014283412		Beneficial Owner-Name: हिताधिकारीको नाम: Anju Sharma	
Office Fax No: कार्यालय फ्याक्स नं.:		Address: ठेगाना: Kathmandu	
Office Email: कार्यालय ईमेल:		Citizenship No.: नागरिकता नं.: 1774/8489	
Post Box No.: पोस्ट बक्स नं.:		Relation: नाता: Contact No.: सम्पर्क नं.:	
Registered Address (दर्ता गरिएको ठेगाना)		Business Address (व्यवसायिक ठेगाना)	
Ward No.: वडा नं.: 14	Tole: टोल: Kuleshwor	Ward No.: वडा नं.: 14	Tole: टोल: Kuleshwor
House No.: घर नं.:	Province No.: प्रान्त नं.: 03	House No.: घर नं.:	Province No.: प्रान्त नं.: 03
District: जिल्ला: Kathmandu		District: जिल्ला: Kathmandu	
Nature of Business: व्यवसायको प्रकृति:		Number of Branches: शाखाको संख्या:	
<input type="checkbox"/> Manufacturing उत्पादन <input type="checkbox"/> Trading व्यापार <input type="checkbox"/> Service सेवा <input type="checkbox"/> Import/Export आयात/निर्यात <input type="checkbox"/> Other अन्य			

Management (BOD Members and Chief Executive) व्यवस्थापन (संचालक समस्यहरू र प्रमुख कार्यकारी अधिकृत)

SN क्र.सं.	Full Name & Post पुरा नाम र पद	Permanent Address स्थायी ठेगाना	Present Address हालको ठेगाना	Citizenship No./Issuing Office नागरिकता नं./जारी गर्ने कार्यालय	Phone/Mobile No. फोन नं./मोबाइल नं.
	Narraj Pokhrel	Ktm-14			9851020120
	Gita Kumari Mudbhori	Ktm-14			9851089482
	Anju Sharma				9851089492

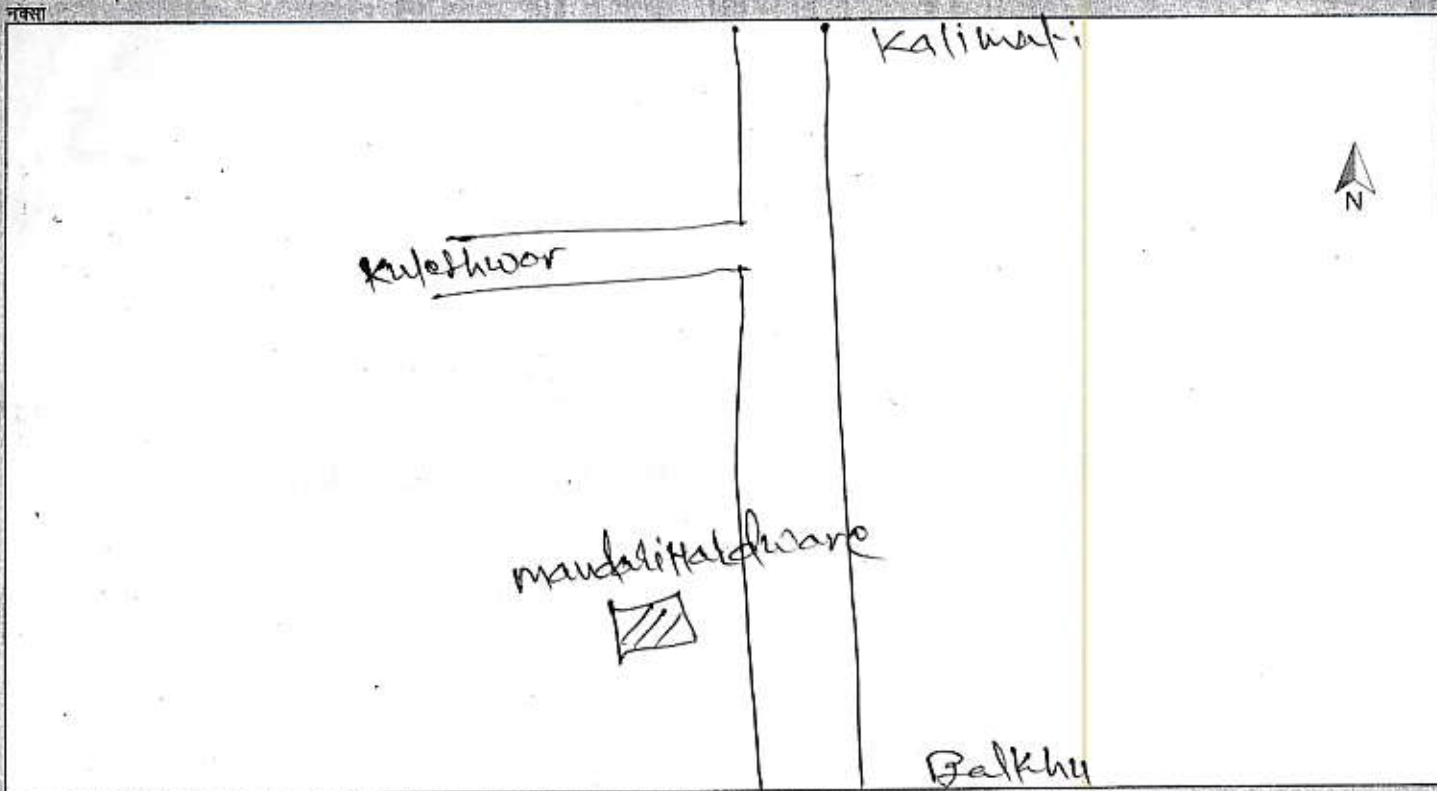
Punished or charged for any criminal activities in the past ? विगतमा फौजदारी कसुरमा दण्डित वा जरिवाना हुनु भएको छ ?		<input type="checkbox"/> Yes छ		<input checked="" type="checkbox"/> No छैन	
Expected Monthly Turnover: अनुमानित मासिक कारोबार रकम:	<input checked="" type="checkbox"/> Less than 25 Lakhs ५ लाख भन्दा कम	<input type="checkbox"/> Less than 50 Lakhs ५० लाख भन्दा कम	<input type="checkbox"/> More Than 50 Lakhs ५० लाख भन्दा बढी		
Expected Monthly No. of Transaction: अनुमानित मासिक कारोबार संख्या:	<input checked="" type="checkbox"/> Less than 25 २५ भन्दा कम	<input type="checkbox"/> Less than 50 ५० भन्दा कम	<input type="checkbox"/> More than 50 ५० भन्दा बढी		
Purpose of Account: खाताको उद्देश्य:	<input checked="" type="checkbox"/> Business व्यापार		<input type="checkbox"/> Other (Please specify) अन्य (खुलेख गर्नुहोस्)		

Are any Directors/Account Operators Civil Servant/High Positioner/Politician/Relatives of Politician?
कुनै पनि बोर्ड सदस्य/संचालक सफ्टवेयर/उच्च पदाधिकारी/राजनीतिज्ञ नातेदार हुनुहुन्छ हो ?

☐ Yes
हो

☒ No
होइन

Location Map



Company Seal
संस्थाको छाप

Authorised Signatory
आधिकारिक दस्तखत
Date:
मिति:



Bank's Use Only

Supporting Documents (provided by the customer)		Remarks, if any
Photo of account operators	<input checked="" type="checkbox"/> Obtained <input type="checkbox"/> Not Obtained	
Photo of all managerial personnel	<input type="checkbox"/> Obtained <input checked="" type="checkbox"/> Not Obtained	
Citizenship of all managerial personnel	<input checked="" type="checkbox"/> Obtained <input type="checkbox"/> Not Obtained	
Registration Document	<input type="checkbox"/> Registration Certificate <input type="checkbox"/> MOA/AOA	
Audited Financials of last fiscal year	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specify the FY. १०२५/२५	
Income Tax Clearance of Last Fiscal Year	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specify the FY.	

Account Risk Grading:

☐ High Risk ☒ Medium Risk ☐ Low Risk
☐ HPP ☐ PEP

Name listed in OFAC (Name listed in sanction)

☐ Yes ☒ No

Remarks / information if any:

Information Update in Core Banking System:

☒ Yes ☐ No

Date Updated on: ०९/०२/२०१९

Remarks if any:

Branch Manager

Date:

CSD Staff

Date

०९/०२/२०१९

APPENDIX: B
CITIZENS BANK INTERNATIONAL LIMITED
KNOW YOUR CUSTOMER (KYC) FORM

KYC REQUIREMENT	DOCUMENTATION NEEDED
1. IDENTITY 1. Beneficial Owner	FULL NAME <u>Mandari Hardware Pvt Ltd</u> (For Individuals) or Title of Domain Partnership / Sole Proprietorship / Ltd. Companies Names of Partners / Owners / Directors / Major Share Holders
2. ID Documents	CITIZENSHIP CERTIFICATE OR PASSPORT (Obtain Photocopy)
3. Legal Status	INDIVIDUALS 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.
4. RESIDENCE / BUSINESS INFORMATION 1. Residence Address / Telephone 2. Occupation or Line of business 3. Business Address / Telephone	<u>Katmandu-14, Balkhu, Ringroad</u> <u>Balkhu Ring Road</u>
5. INCOME	OBTAIN SOURCE OF INCOME & APPROXIMATE FIGURES FOR INDIVIDUALS. FOR OTHERS IT SHOULD BE AVAILABLE FROM THEIR ACCOUNTS AND BALANCE SHEETS
6. RELATIONSHIP 1. Purpose 2. Commensurate Activity 3. Funds for Opening Accounts	<u>Current</u> CASH <u>NPR</u> AMOUNT <u>300,000</u>
7. EXISTING RELATIONSHIP	DO YOU PRESENTLY MAINTAIN AN ACCOUNT WITH CBIL? YES / NO IF YES - ACCOUNT NO: _____ BRANCH NAME _____
8. INTRODUCTION	NAME & A/C NO. <u>Sunil Babu Khatri, 1455</u> 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 & BRIEF COMMENTS _____
9. CLIENT REVIEW / MEETING 1. Initial	Date of Meeting <u>10th July, 2012</u> Brief Comments _____
2. Subsequent	Date of Meeting <u>10th July, 2012</u> Brief Comments _____

SIGNATURE
INTERVIEWING OFFICER

SIGNATURE
MANAGER