## 'CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity/ Other than Individuals Important Instructions: A) Fields marked with '\*' are mandatory fields. F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end. B) Tick 'V' wherever applicable. G) List of two character ISO 3166 country codes is available at the end. C) Please fill the date in DD-MM-YYYY format. H) Please read section wise detailed guidelines / instructions at the end D) Please fill the form in English and in BLOCK letters. For particular section update, please tick (<) in the box available before the section number and strike off the sections not required to be updated. E) KYC number of applicant is mandatory for update application. Application Type\* □ Update (To be filled by financial institution) KYC Number (Mandatory for KYC update request) □ 1. ENTITY DETAILS\* (Please refer instruction A at the end) □ Name\* Entity Constitution Type\* (Please refer instruction B at the end) Date of Incorporation / Formation\* Date of Commencement of Business Place of Incorporation / Formation\* Country of Incorporation / Formation\* TIN or Equivalent Issuing Country Form 60 furnished TIN / GST Registration Number 2. PROOF OF IDENTITY (Pol)\* (Please refer instruction **B** at the end) Officially valid document(s) in respect of person authorised to transact Certificate of Incorporation / Formation Registration Certificate Partnership Deed ☐ Trust Deed Memorandum and Articles of Association Resolution of Board / Managing Committee Power of attorney granted to its manager, officers or employees to transact on its behalf ☐ Activity Proof - 2 (For Sole Proprietorship Only) Activity Proof - 1 (For Sole Proprietorship Only) 3. ADDRESS\* (Please see instruction C at the end) 3.1 Registered Office Address / Place of Business\* Other Document Registration Certificate Proof of Address\* Certificate of Incorporation / Formation Line 1\* Line 2 Line 3 City / Town / Village\* District\* PIN / Post Code\* State / U.T Code\* ISO 3166 Country Code\* 3.2 Local Address in India (If different from Above)\* Line 1\* Line 2 Line 3 City / Town / Village\* PIN / Post Code\* District\* State / U.T Code\* ISO 3166 Country Code<sup>3</sup> 4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided" may be used) (Please refer instruction D at the end) Tel. (Off) FAX Mobile Email ID Mobile 5. NUMBER OF RELATED PERSONS (Please refer instruction E at the end)

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7. APPLICANT	DECLARAT	ION (PI	ease ref	er Inst	ructio	n G	at the	e end)	)																		
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l/we hereby conser registered number/em		ng info	rmation	from (	Centra	l KY	C Re	egistry	/ thro	ough	SMS	S/Em	ail o	n the	ab	ove											
Date: DD-M	M - Y Y	YY		Plac	e:													Signa	iture /	Thumb	Impr	ession	of Au	thorise	d Pers	on(s)	
8. ATTESTATION	/FOR OF	FICE U	SE ONL	Y																							
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KYC VERIFICATION CARRIED OUT BY										INSTITUTION DETAILS																	
dentity Verification Emp. Name Emp. Code Emp. Designation Emp. Branch	Done	D	ate			- 9				Name Code IInstitution Stamp)																	