

## Know Your Customer (KYC) Application Form | Individual



### Important Instructions:

- A. Fields marked with '\*\*' are mandatory fields.
- B. Tick ' ' wherever applicable.
- C. Please fill the form in English and BLOCK letters.
- D. Please fill the date in DD-MM-YY format.
- E. For particular section update, please tick ( ) in the box section number and strike off the sections not required to be updated.
- F. Please read section wise detailed guide
- G. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- H. List of two character ISO 3166 country codes is available at the end.
- I. KYC number of applicant is mandatory for update application.
- J. The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode

### For office use only

(To be filled by financial institution)

Application Type\*

☐ New ☐ Update

KYC Number

(Mandatory for KYC update request)

Account Type\*

☐ Normal ☐ Minor ☐ Aadhaar OTP based E-KYC (in non-face to face mode)

### ☐ 1. Personal Details (Please refer instruction A at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T- Transgender	
PAN*	<input type="text"/>		<input type="checkbox"/> FORM 60 furnished	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others – Country	Country Code	<input type="text"/>
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Person of Indian Origin

### ☐ 2. PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction B at the end)

Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A-Passport Number  Passport Expiry Date
- ☐ B-Voter ID Card
- ☐ C-Driving Licence  Driving Licence Expiry Date
- ☐ D-NREGA Job Card
- ☐ E-National Population Register Letter
- ☐ F-Proof of Possession of Aadhaar No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer
- II ☐ E-KYC Authentication No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer
- III ☐ Offline verification of Aadhaar No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer

### PHOTO\*



Signature /Thumb Impression across photo without covering the face

Address [For other than resident Individual, please mention Overseas Address]

Line 1*	<input type="text"/>
Line 2	<input type="text"/>
Line 3	<input type="text"/>
District*	<input type="text"/>
Pin/Post Code*	<input type="text"/>
State/U.T Code*	<input type="text"/>
City/Town/Village*	<input type="text"/>
ISO 3166 Country Code*	<input type="text"/>

### ☐ 3. CURRENT ADDRESS DETAILS (Please refer instruction B at the end)

- ☐ Same as above mentioned address (In such cases address details as below need not be provided)
- I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)
  - ☐ A-Passport Number
  - ☐ B-Voter ID Card
  - ☐ C-Driving Licence
  - ☐ D-NREGA Job Card
  - ☐ E-National Population Register Letter
  - ☐ F-Proof of Possession of Aadhaar No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer
- II ☐ E-KYC Authentication No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer
- III ☐ Offline verification of Aadhaar No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer
- IV ☐ Deemed Proof of Address – Document Type code

Address

Line 1*	<input type="text"/>
Line 2	<input type="text"/>
Line 3	<input type="text"/>
District*	<input type="text"/>
Pin/Post Code*	<input type="text"/>
State/U.T Code*	<input type="text"/>
City/Town/Village*	<input type="text"/>
ISO 3166 Country Code*	<input type="text"/>

☐ **4. Contact Details** (All communications will be sent to Mobile number/Email-ID provided including for validation purpose) (Please refer instruction **C** at the end)

Tel. (Off) [ ] [ ] [ ] - [ ] [ ] [ ] [ ] Tel. (Res) [ ] [ ] [ ] - [ ] [ ] [ ] [ ] Mobile\* [ ] [ ] - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

Email ID\*

*\*mandatory and subject to validation. hence provide the valid information in legible manner*

#### ☐ 5. Remarks (If any)

[illegible]

## 6. Applicant Declaration

- I hereby declare that the details furnished above are true and correct to the best of my knowledge/belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.
- I hereby declare that I am not making this application for the purpose contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address and to download the information from CKYCR
- I am providing the consent to MF/RTA/SEBI registered intermediary to share this KYC data / applicable Aadhaar XML data with KRA and share the data to other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.

Date: 

D	D
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M	M
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Y	Y	Y	Y
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Signature/Thumb Impression of Applicant

## 7. Attestation / For Office Use only

Documents Received ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC Process ☐ Equivalent e-document ☐ Video Based KYC

KYC documents verification carried out by

Date: 

D	D
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M	M
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Y	Y	Y	Y
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[illegible][illegible][illegible][illegible]

## Institution details

Name

[illegible]

## In-Person Verification (IPV) carried out by

Date: 

D	D
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M	M
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Y	Y	Y	Y
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## Institution details

[illegible][illegible]