To

The Chairman / Hon. Secretary, The BARC Employees' Co-op. Credit Society Ltd., BARC, Trombay, Mumbai - 400 085.



Know Your Customer (KYC) Application Form for Individual. Please fill this form in ENGLISH and in BLOCK LETTERS.

A.	A. I <u>DENTITY DETAILS</u> :	
1.	. (a) Full Name of the Applicant:	
	(b) Computer Code No.:	(3) Prodotass
	(c) Membership No.:	
	(d) Employee No.:	
2.	. Father's / Spouse Name :	
3.	. (a) Gender: Male / Female:	
	(b) Marital Status: Single / Married	
	(d) Date of Joining: d d m m y y y y	
	(e) Date of Retirement: d d m m y y y y	
4.	(a) Nationality:	S years of the App
5.	(a) PAN No.:	
	(b) Aadhaar No.:	Original verified
6.	Proof of identity submitted :	
	Voter's Card : Driving Licences : Passport :	Other:

7. A	address Details :		
(*	1) Residence Address:		al and a second
	<u> </u>	, bill years 3 abov	The DARC in the System Co- op Co
	City/Town/Village:	.080	Pin code :
	State:	Country:	
(2	c) Contact Details : Tel. (Off.)	Tel. (Res.)	Mobile No. :
	Fax:	E-mail:	ollagAeru la ameritica de la company
(3) Proof of address submitted for	orresidence:	
	Address:		eli qirlaredneM_(a)
	-		essagnian de la companya de la compa
(4)) PermanentAddress (If different	ent from above):	2 Father's LSpouse Netter
			Pin code :
	State:		
DECLA			e are true and correct to the best o
my kno	wiedge and belief and I underta	ake to inform you of any cha	nges therein immediately In coop
aware t	that I may be held liable for it.	to be false or untrue or mi	sleading or misrepresenting, I am
Sigr	nature of the Applicant	Date:	d d m m y y y y
	F	OR OFFICE USE-ONLY	OF PURPOSE CENTRE
Origina	ls verified and Self-Attested / ce	ertified Document copies red	ceived.
		_)	
	Signature of the Authorised Sig	gnatory	Dis Communication
Date: _		Se	eal / Stamp of the Receiver's