

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form / Individual

Instructions:

A) Field marked with *are mandatory fields.
 B) Please Fill the form in English and in BLOCK Letters.
 C) Please read guidelines / detailed instructions overleaf.
 D) List of Two character ISO-3166 country codes are available overleaf.

Application Type : New Update

Account Type* : Normal Small

KYC Number :

PERSONAL DETAILS

PHOTO

Name* (Same as ID Proof) :

Maiden Name (If any*) :

Father / Spouse Name* :

Mother Name* :

Date of Birth* :

Gender* : Male Female Transgender

Marital Status* : Married Unmarried

Nationality* : Indian Others Country Name

Residential Status* : Resident Individual Non Resident Indian Foreign National Person of Indian Origin

Occupation* : Private Sector Service Public Sector Government Sector Business Professional

Self Employed Retired Housewife Student Other Please Specify

Tick if applicable : Residence for Tax purposes in Jurisdiction(s) outside India

Signature / Thumb Impression

ADDITIONAL DETAILS REQUIRED* (If Applicant is resident outside India for Tax purposes)

(Please read guidelines / details for *Jurisdiction of Residence* and Tax Identification Number*)

ISO-3166 Country Code of Jurisdiction of Residence* :

Tax Identification Number of equivalent (if issued by Jurisdiction)* :

Place / City of Birth* : ISO - 3166 Country Code of Birth* :

PROOF OF IDENTITY (PoI)* (One Certified Copy of any one of the following Proof of Identity (PoI) needs to be submitted)

PAN :

UID (Aadhaar) :

Voter ID Card :

NREGA Job Card :

Passport Number :

Passport Expiry Date : DD - MM - YYYY

Driving License :

Driving License Expiry Date : DD - MM - YYYY

Other (any document notified by the Central Government) :

PROOF OF ADDRESS (PoA)

CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (One Certified Copy of any one of the following Proof of Address (PoA) needs to be submitted)

Line 1* :

Line 2* :

Line 3* :

City / Town / Village :

State/U.T* : Pin / Post Code : ISO - 3166 Country Code :

Proof of Address* : Passport Driving License

Aadhaar Card

Voter Identity Card NREGA CARD

Other Please Specify

CORRESPONDENCE / LOCAL ADDRESS DETAILS

Same as Current / Permanent / Overseas Address Details (In case of multiple correspondence / local addresses, Please fill Annexure A1*)

Line 1* :

Line 2* :

Line 3* : City / Town / Village :

State/U.T* : Pin / Post Code : ISO - 3166 Country Code :

ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT* (If Applicant is resident outside India for Tax purposes)

Same as Current / Permanent / Overseas Address Details Same as Correspondence / Local Address Details

Line 1* :

Line 2* :

Line 3* : City / Town / Village :

State/U.T* : Pin / Post Code : ISO - 3166 Country Code :

CONTACT DETAILS (Communications will be done on provided Mobile no. and E-mail-ID)

Tel. (Off) :

Tel. (Res) :

Mobile :

Fax :

E-mail ID :

DETAILS OF RELATED PERSON (In case of additional related persons, Please fill 'Annexure B1' form)

Addition of Related Person Deletion of Related Person KYC Number (if available) :

Related Person Type : Guardian of Minor Nominee Assignee Authorized Representative Beneficial Owner Beneficiary

Name* : Prefix First Name Middle Name Last Name

PROOF OF IDENTITY (PoI)* (Mandatory if KYC number is not available, One Certified Copy of any one of the following Proof of Identity/PoI needs to be submitted)

PAN :

UID (Aadhaar) :

Voter ID Card :

NREGA Job Card :

Passport Number :

Passport Expiry Date :

Driving License :

Driving License Expiry Date :

Other (any document notified by the Central Government) :

OTHER DETAILS

Income Range : Below 1 Lac to 5 Lac 5 Lac to 10 Lac 10 Lac to 15 Lac 15 Lac to 25 Lac 25 Lac and above

Net Worth (in INR) : As on :

Educational Qualification : Below SSC SSC HSC Graduate Masters Professional (CA, CS, CMA, Others)

Please Tick if Applicable : Politically Exposed Person Related to Politically Exposed Person

Any Other Information :

APPLICANT DECLARATION

In hereby declare that the details furnished above are true and correct to the best of my/our knowledge and 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/we are aware that I/we may be held liable for it.

I would like to share my personal / KYC details with Central KYC Registry.

Place :

Date :

Signature / Thumb Impression of Applicant

ATTESTATION / FOR OFFICE USE ONLY

Documents Received : Self-Certified True Copies Notary

Risk Category : High Medium Low

IN PERSON VERIFICATION DETAILS

Identity Verification : Done

Date :

Emp. Name :

Emp. Code :

Emp. Designation :

Emp. Branch :

Signature :

(Employment Signature)

INSTITUTION DETAILS

Name :

Code :

Stamp :

(Institution Stamp)