

□ CONTACT DETAILS (Communications will be done on provided Mobile no. and E-mail-ID)Tel. (Off) : STD CODE Tel. (Res) : STD CODE Mobile : Fax : STD CODE 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 BeneficiaryName* : 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 : DD - MM - YYYY Driving License : Driving License Expiry Date : DD - MM - YYYY 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 aboveNet Worth (In INR) : As on : DD - MM - YYYYEducational Qualification : Below SSC SSC HSC Graduate Masters Professional (CA, CS, CMA, Others)Please Tick if Applicable : Politically Exposed Person Related to Politically Exposed PersonAny 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 NotaryRisk Category : High Medium Low**IN PERSON VERIFICATION DETAILS**Identity Verification : DoneDate : DD - MM - YYYYEmp. Name : Emp. Code : Emp. Designation : Emp. Branch : Signature : (Employment Signature)**INSTITUTION DETAILS**Name : Code : Stamp :

(Institution Stamp)