Know Your Customer (KYC) Application Form | Individual



Important Instructions: A. Fields marked with '*' are mandatory fields 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. B. Tick "wherever applicable. C. Please fill the form in English and BLOCK letters. H. List of two character ISO 3166 country codes is available at the end. D. Please fill the date in DD-MM-YY format. KYC number of applicant is mandatory for update application. E. For particular section update, please tick () in the box J. The 'OTP based E-KYC' check box is to be checked for accounts opened using section number and strike off the sections not OTP based E-KYC in non-face to face mode ARN-64917 EUIN - E434563 required to be updated. Application Type* New Update For office use only **KYC Number** (Mandatory for KYC update request) (To be filled by financial institution) Account Type* Aadhaar OTP based E-KYC (in non-face to face mode) Normal Minor 1. Personal Details (Please refer instruction A at the end) Prefix First Name Middle Name Last Name Name* (Same as ID proof) Maiden Name Father / Spouse Name³ Mother Name Date of Birth* F- Female T- Transgender M- Male Gender* FORM 60 furnished PAN* Marital Status* Married Unmarried Others Citizenship³ IN- Indian Others - Country Country Code Non Resident Indian

Foreign National Residential Status* Resident Individual 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) Passport Expiry Date DD - MM - YYYY A-Passport Number PHOTO* B-Voter ID Card Driving Licence Expiry Date DD - MM - YYYY C-Driving Licence D-NREGA Job Card E-National Population Register Letter F-Proof of Possession of Aadhaar II E-KYC Authentication III Offline verification of Aadhaar Signature /Thumb Impression across photo without covering the face Address [For other than resident Individual, please mention Overseas Address] Line 1* Line 2 City/Town/Village Line 3 District* Pin/Post Code* State/U.T Code* ISO 3166 Country Code* 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 II E-KYC Authentication d to attach. Aadhaar card. If submitted. Aadhaar Number to be masked by the c III Offline verification of Aadhaar d to attach. Aadhaar card. If submitted. Aadhaar Number to be masked by the custor IV Deemed Proof of Address – Document Type code Address Line 1*

Pin/Post Code*

City/Town/Village*

ISO 3166 Country Code*

State/U.T Code*

Line 2

Line 3 District*

	Details (All communications v	viii be sent to mob	ile Hallibel	/Liliali-ID	olovided) (riease i	ICICI II	ioti doti		at 1110 t	Jilu)			
el. (Off)	T	el. (Res)				Mobile		-						
mail ID														
5. Remark	s (If any)													
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. Incase 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. [Signature/Thumb Impression]														
Pate: D D - M	M - Y Y Y Y	Place:					Sign	ature/	Γhumb	lmpre	ession	of A	pplica	ant
7. Attestation /	For Office Use only													
Documents Receive		E-KYC data re	eceived from	UIDAI	Data rece	ved from	Offline	e verifica	ation	Dig	gital KY	′C Pro	ocess	
	Equivalent e-document	Video Based I	KYC											
K	KYC documents verification carried out by													
		sa out by				li li	nstituti	ion det	ails					
Date:	D D - M M - Y Y Y	Y		Name		lı	nstituti	ion det	ails					
	D D - M M - Y Y Y	Y		Name Code		lı	nstituti	ion det	ails					
Emp. Name	DD - MM - YYY	Y				lı	nstituti	ion det	ails					
Emp. Name Emp. Code Emp. Designation		Y					nstituti	ion det	ails					
Emp. Name Emp. Code Emp. Designation	DD - MM - YYYY	Y						ion det						
Emp. Name Emp. Code Emp. Designation Emp. Branch		Y				[In	nstitut		amp]					
Emp. Name Emp. Code Emp. Designation Emp. Branch	[Employee Signature]	Y				[In	nstitut	ion Sta	amp]					
Emp. Name Emp. Code Emp. Designation Emp. Branch In. Date:	[Employee Signature]	ed out by				[In	nstitut	ion Sta	amp]					
Date: Emp. Name Emp. Code Emp. Designation Emp. Branch In- Date: Emp. Name Emp. Code Emp. Code Emp. Designation Emp. Branch	[Employee Signature]	ed out by				[In	nstituti	ion Sta	namp]					

Instruction / Check list / Guidelines for filling individual KYC Application Form

General instructions:

Do

- 1. Self-Certification of documents is mandatory.
- Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [F].
- 3. If any proof of identity or address is in a foreign language, then translation into English is required duly attested by the official as indicated above
- 4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 5. If current & permanent addresses are different, then proofs for both have to be submitted.
- 6. Sole proprietor must make the application in his individual name & capacity.
- 7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport / PIO Card /OCI and overseas address proof is mandatory.
- 8. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 9. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board / Passport of Minor / Birth Certificate must be provided.

A. Clarification / Guidelines on filling 'Personal Details' section

- 1. Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2. One of the following is mandatory: Mother's name, Spouse's name, Father's name.

B. Clarification / Guidelines on filling 'Current Address details' section

- 1. In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
- 2. PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force.
- 3. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 4. In Section 2, one of I, II and III is to be selected. In case of online E-KYC authentication, II is to be selected.
- 5. In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
- 6. List of documents for 'Deemed Proof of Address'

ocument Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal tax receipt.
03	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
04	Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.

- 7. Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8. "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 9. "Digital KYC process" has to be carried out as stipulated in the PML Rules, 2005.

C. Clarification / Guidelines on filling 'Contact details' section

- 1. Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999)
- 2. Do not add '0' in the beginning of Mobile number.

D. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person, if available.

E. Clarification on Minor

- 1. Guardian details are optional for minors above 10 years of age for opening of bank account only
- 2. However, in case guardian details are available for minor 10 years of age, the same (or CKYCR number of guardian) is to be uploaded.

F. List of people authorized to attest the documents after verification with the originals:

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
- 6. Government authorised officials who are empowered to issue Apostille Certificates.

G. List of people authorized to perform In Person Verification (IPV):

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
- 5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

H. PAN Exempt Investor Category

- 1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
- 2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
- 3. Investors residing in the state of Sikkim.
- 4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India

List of two digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State/U.T	Code
Andaman & Nicobar	AN
Andhra Pradesh	AP
Arunachal Pradesh	AR
Assam	AS
Bihar	BR
Chandigarh	CH
Chhattisgarh	CG
Dadra and Nagar Haveli	DN
Daman & Diu	DD
Delhi	DL
Goa	GA
Gujarat	GJ
Haryana	HR

State/U.T	Code
Himachal Pradesh	HP
Jammu & Kashmir	JK
Jharkhand	JH
Karnataka	KA
Kerala	KL
Lakshadweep	LD
Madhya Pradesh	MP
Maharashtra	MH
Manipur	MN
Meghalaya	ML
Mizoram	MZ
Nagaland	NL
Orissa	OR

State/U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarkhand	UA
West Bengal	WB
Other	XX

List of ISO 3166 two digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GO	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Island	MH	Slovakia	SK
Australia	AU		GF	Martinique		Slovenia	SI
		French Guiana			MQ		
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Island	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Moyotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MΧ	South Georgia and the South Sandwich Islands	
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SI
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	MZ	Taiwan province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	10	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcaim	PN	Uzbekistan	UZ
	CG		JO	Poland	PL	Vanuatu	VU
Congo		Jordan					
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rica	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	OA	Virgin Islands, British	VG
Cote d'Ivoire Code d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion Reunion	RE	Virgin Island, U.S.	VI
Croatia	HR	Korea, Republic	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao Curacao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy Saint Barthelemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascensino and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kittsand Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French Part)	MF		

Supplementary CKYC Form

Know Your Client (KYC) Application Form

For Individuals Only

(Please fill the form in English and in BLOCK Letters) Fields marked with * are mandatory fields

(To be additionally filled by customers using old KYC form)



ARN-64917 EUIN-E434563

1. Identity Details (Please re	efer instruction A at the	end)								
PAN		Please enclose a duly attested copy of your PAN Card								
	Prefix	First Name	Middle Name	Last Name						
Name* (same as ID proof)										
Maiden Name (If any*)										
Mother Name*										
Mother Name										
Residential Status*	Resident Individua	ıl 🗆 N	lon Resident Indian							
	☐ Foreign National	F	Person of Indian Origin							
Occupation Type*	☐ S-Service ☐ Pri	vate Sector	Public Sector							
	O-Others Pro		Self Employed	sewife						
	☐ B-Business	□ >	(-Not Categorised							
2. FATCA/CRS Information	(Tick if Applicable)	☐ Residence for	Tax Purposes in Jurisdiction(s) Outside Inc	dia (Please refer instruction B at the end)						
Additional Details Require	, , ,			,						
Country of Jurisdiction of			Country Code of Jurisdiction of F	Residence as per ISO 3166						
Tax Identification Number	or equivalent (If issue	ed by jurisdiction)*								
Place / City of Birth*		Country	of Birth*	Country Code as per ISO 3166						
Address Line 1*										
Line 2										
Line 3			City / To	own / Village*						
District*	Z	ip / Post Code*	State/UT Code	as per Indian Motor Vehicle Act, 1988						
State/UT*			untry*	Country Code as per ISO 3166						
State/01			unity	as per 130 3100						
3. Details of Related Person	n (Optional) (please refe	er instruction G at the	end)(in case of additional relatedpersons,ple	ease II 'Annexure B1')						
Related Person	☐ Deletion of Related	Person KYC N	Number of Related Person (if available*)							
Related Person Type*	☐ Guardian of Minor	Assigne	_ ` ` ' _	tive						
	Prefix	First Name	Middle Name	Last Name						
Name*	(If KVC number and name	are provided below deta	ils of section 6 are optional)							
Proof of Identity [Pol] of										
(Certified copy of any one of the										
A- Passport Number			Passport Expiry Date	D D M M Y Y Y Y						
☐ B- Voter ID Card										
C- PAN Card										
☐ D- Driving Licence			Driving Licence Expi	ry Date D D M M Y Y Y Y						
E- Aadhaar Card										
☐ F- NREGA Job Card										
Z- Others (any documer	nt notified by the centr	al government)	Identification N	lumber						
4. Remarks (If any)										
5. Applicant Declaration										
I hereby declare that the details furn therein, immediately. In case any of	f the above information is found I am not making this application	to be false or untrue or misle on for the purpose of contrav	e and belief and I undertake to inform you of any changes ading or misrepresenting, I am aware that I may be held ention of any Act, Rules, Regulations or any statute of me to time.							
-			bove registered number/email address.							
Date: D D M M	YYYY	Place:		Signature / Thumb Impression of Applicant						

General Instructions:

- 1. Self-Certification of documents is mandatory.
- 2. KYC number of applicant is mandatory for update/change of KYC details.
- 3. For particular section update, please tick () in the box available before the section number and strike off the sections not required to be updated.
- 4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
- 5. If any proof of identity or address is in a foreign language, then translation into English is required.
- 6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- 8. Sole proprietor must make the application in his individual name & capacity.
- 9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- 10. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/ Passport of Minor/Birth Certificate must be provided.

A. Clarification / Guidelines on filling 'Identity Details' section

- 1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/ insurance number, citizen/personal identification/services code/number, and resident registration number)

C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Investors

- 1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2. Mention identification / reference number if 'Z Others (any document notified by the central government)' is ticked.
- Others Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- 4. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address [PoA] section

- 1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

E. Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

F. Clarification / Guidelines on filling 'Contact details' section

- 1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2. Do not add '0' in the beginning of Mobile number.

G. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

H. Clarification / Guidelines on filling 'Related Person details - Proof of Identity [Pol] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

Main Intermediary

Application No.:



Please fill this update / modification form in ENGLISH and in BLOCK LETTERS (Please strike off Sections that are not used).

www.camskra.com ARN-64917 EUIN - E434563

A Name of Applicant (As per original KYC record	is)
	empt Ref. No. UID/Aadhaar, if any:
Proof of identity submitted for PAN Exempt case. Please ti	ck (⁄)
☐ Aadhaar Card ☐ Passport ☐ Voter ID ☐ Driving Licens	e Others (Please specify)
Title Please tick (✓) Mr. ☐ Ms. ☐	
Name	
Date of Birth d d / m m / y y y y	
B. New Identity Details (please see guidelines of	overleaf
New Name (As appearing in supporting identification document)	•
	on Resident (Passport Copy Mandatory for NRIs & Foreign Nationals)
	lease enclose a duly attested copy of your PAN Card
4. Father's / Spouse's Name	
5. Marital Status Please tick (✓) ☐ Single ☐ Married	
6. Nationality Please tick (✓) ☐ Indian ☐ Others	Please specify
C. New Address Details (please see guidelines	overleaf)
1. New Address for Correspondence	
City / Town / Village	Country Pin Code
State 2. New Contact Details	Country
Tel. (Off.) (ISD) (STD)	Tel. (Res.) (ISD) (STD)
Mobile (ISD) (STD) E-Mail Id.	Fax (ISD) (STD)
*Latest Telephone Bill (only Land Line)	
City / Town / Village	Pin Code
State	Country
	ase submit ANY ONE of the following valid documents & tick (\checkmark) against the document attach Agreement of Residence \square Driving License \square Voter Identity Card \square *Latest Bank A/c Statement/Passb
□*Latest Telephone Bill (only Land Line) □*Latest E	lectricity Bill *Latest Gas Bill Others (Please specify)
*Not more than 3 Months old. Validity/Expiry date of pro	of of address submitted ddd/mmm//yyyyy
DECLARATIO	
hereby declare that the details furnished above are true and cor undertake to inform you of any changes therein, immediately. In	case any of the above information is found to be
alse or untrue or misleading or misrepresenting, I am aware tha Im not making this application for the purpose of contravention o	t I may be held liable for it. I hereby declare that I
egisation or any notifications directions issued by any governmental authorise sharing of the information furnished on this form with a	or statutory authority from time to time. I hereby
luthorise snaring of the information furnished on this form with a SEBI Registered Intermediaries	III SEDI registereti NTO Registration Agentres/
Place:	Date
FOR OFFICE	USE ONLY IPV Done on d d / m m / y y
MC/Intermediary name OR code	
•	Seal/Stamp of the intermediary should contain Staff Name Staff Name Staff Name
☐ (Originals Verified) Self Certified Document copies received	Emp.No./ARN. No
(Attested) True copies of documents received	Designation Designation Name of the Organization Name of the Organization
T (Urresten) tine cobies of documents received	Signature Signature

Date

Date



INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

- Self attested copy of PAN card is mandatory for all clients in all type of change request.
- Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [E].
- If any proof of identity or address is in a foreign language, then translation into English is required.
- 4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 5. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- B. Proof of Identity (POI): List of documents admissible as Proof of Identity (*Documents having an expiry date should be valid on the date of submission.):
- PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
- 2. Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
- Identity card/ document with applicant's Photo, issued by any
 of the following: Central/State Government and its
 Departments, Statutory/Regulatory Authorities, Public Sector
 Undertakings, Scheduled Commercial Banks, Public Financial
 Institutions, Colleges affiliated to Universities, Professional
 Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their
 Members; and Credit cards/Debit cards issued by Banks.
- C. Proof of Address (POA): List of documents admissible as Proof of Address: (*Documents having an expiry date should be valid on the date of submission.)
- Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.
- Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill -Not more than 3 months old.

- 3 Bank Account Statement/Passbook -Not more than 3 months old
- Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly or Parliament/Documents issued by any Govt. or Statutory Authority.
- Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI,ICSI,Bar Council etc.,to their Members.
- The proof of address in the name of the spouse may be accepted.
- D. List of people authorized to attest the documents after verification with the originals:
- 1. Authorised officials of Asset Management Companies (AMC).
- Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
- Government authorised officials who are empowered to issue Apostille Certificates.
- E. List of people authorized to perform In Person Verification
- 1. Authorised officials of Asset Management Companies (AMC).
- Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
- In case of NRI applicants, a person permitted to attest documents in E(5) above, may also conduct the In Person Verification and confirm this in the KYC Form.

FATCA-CRS Declaration & Supplementary KYC Information Declaration Form for Individuals (Please seek appropriate advice from your tax professional on your tax residency, related FATCA & CRS ARN-64917 El CRS guidance) EUIN-E434563 PAN / PEKRN* * Mandatory Fields Folio No* Name* Address Type* Nationality* ☐ Indian □ US □ Others (please specify) Residential [for KYC Registered Office address] ☐ Business Place of Birth* Country of Birth* **Gross Annual** Occupation ☐ Professional Below 1 Lakh ☐ 1-5 Lacs Business Details* [Please Income Details 5-10 Lacs Public Sector ☐ 10-25 Lacs ☐ Private Sector in INR* tick any one $(\sqrt{})$] ☐ 25 Lacs - 1 Cr **Government Service** ☐ > 1 Crore ☐ Housewife Agriculturist Net Worth in Student □ Retired INR. In Lacs & Forex Dealer dd-mmm-yyyy Date [Optional] Others [Please specify] Yes ☐ Related to PEP Politically Anv other ☐ Not Applicable **Exposed Person** information [Please specify] [PEP]* [if applicable] Are you a tax resident (i.e. are you assessed for Tax) in any other country other than India?* Yes No If 'Yes', please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen/ Resident / Green Card Holder / Tax Resident in the respective countries Country of Tax Tax Identification Identification Type If TIN is not available, please tick No. Residency Number (TIN) or ITIN or other. the reason A, B or C [as defined below] Functional Equivalent please specify] Reason A в□ с□ Reason A С□ The country where the Account Holder is liable to pay tax does not issue TIN to its residents. Reason A No TIN required [Select this reason only if the authorities of the respective country of tax residence do not required the Reason B TIN to be collected] Reason C Others – Please specify the reasons **Declaration:** I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of

I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. I hereby authorize you [PPFAS/Fund/AMC] to disclose, share,rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries/or any regulated intermediaries registered with SEBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions given below and hereby accept the same

, , , ,	ors to enable withholding to occur and pay out any sums from my account rising me of the same. I also confirm that I have read and understood the ccept the same	
Date:	Sign Here	
Place:		
		_
<u>Acknowledge of the control of the c</u>	 wledgement	
We [PPFAS, on behalf of participating Mutual Funds] acl and signed from Mr. / Ms. / M/s.	nowledge the receipt of FATCA/CRS declaration form duly filled PAN on dd-mmm-yyyy	
Date:	Signature with Name, Emp. ID & Seal	

FATCA & CRS Terms & Conditions

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which require Indian financial institutions such as the Banks/other financial entities to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with (Insert FI's name) or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green-card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

\$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/mailing address in a country other than India	Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)
Telephone number in a country other than India	If no Indian telephone number is provided 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR
Telephone number in a country other than India	Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- 1. Certificate of residence issued by an authorized government body*
- 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

^{*} Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

Aadhaar Updation Form



You can also update Aadhaar online on www.camsonline.com
ARN-64917 EUIN-E434563

Name													PAN / PEKRAN										
						ı			ı			1	7		C - 16	44			- f A	II	c1		
Aadhaar	Number												Enclosed						of Aac DAI co			dhaar	No.
(Linking y	Linking you Aadhaar in MF Folios will be subject to verification and authentification of your Aadhaar with concerned authorities.)																						
applicat obtainin	Information: The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/rules/regulations and provision of the said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016. We shall receive your demographic information which shall be used only to comply with applicable laws/rules/regulations.											st											
storing (2016 (ar includin	Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide my consent for sharing/ disclose of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for the purpose of updating the same in all my/our folios.											ct, (s)											
Signatu	re																						
				· – –																			_
Acknow	/ledgen	nent	(For	Aadh	naar	updo	ition)																
Name													F	or o	ffice	US	e on	ly					7
PAN																							
							,																
		•	•															S	9				

Toll Free - 1800-266-7790

Email us at mf@ppfas.com

Visit our Website www.amc.ppfas.com