



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

Important Instructions:

- A) Fields marked with '\*' are mandatory fields. B) Please fill the form in English and in BLOCK letters. C) Please fill the date in DD-MM-YYYY format. D) Please read section wise detailed guidelines / instructions at the end. E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end. F) List of two character ISO 3166 country codes is available at the end. G) KYC number of applicant is mandatory for update application. H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only

Application Type\*  New  Update

(To be filled by financial institution) KYC Number  (Mandatory for KYC update request)

Account Type\*  Normal  Simplified (for low risk customers)  Small

1. PERSONAL DETAILS (Please refer instruction A at the end)

Form section 1: Personal Details. Includes fields for Name (Prefix, First, Middle, Last), Maiden Name, Father/Spouse Name, Mother Name, Date of Birth, Gender, Marital Status, Citizenship, Residential Status, and Occupation Type. Includes a PHOTO placeholder and Signature/Thumb Impression area.

2. TICK IF APPLICABLE  RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED\* (Mandatory only if section 2 is ticked)

Form section 2: Tax Jurisdiction. Includes fields for ISO 3166 Country Code of Jurisdiction of Residence, Tax Identification Number or equivalent, Place / City of Birth, and ISO 3166 Country Code of Birth.

3. PROOF OF IDENTITY (PoI)\* (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

Form section 3: Proof of Identity. Includes checkboxes for A- Passport Number, B- Voter ID Card, C- PAN Card, D- Driving Licence, E- UID (Aadhaar), F- NREGA Job Card, Z- Others, and S- Simplified Measures Account. Includes fields for Passport Expiry Date, Driving Licence Expiry Date, and Identification Number.

4. PROOF OF ADDRESS (PoA)\*

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Form section 4.1: Proof of Address. Includes fields for Address Type, Proof of Address, and Address details (Line 1, Line 2, Line 3, District, Pin / Post Code, State / U.T Code, ISO 3166 Country Code).

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS \* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*																	
Line 2																	
Line 3																	
District*						Pin / Post Code*						State / U.T Code*			ISO 3166 Country Code*		

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES\* (Applicable if section 2 is ticked)

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

Line 1*																				
Line 2																				
Line 3																				
State*						ZIP / Post Code*						City / Town / Village*						ISO 3166 Country Code*		

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

Tel. (Off)						Tel. (Res)						Mobile									
FAX						Email ID															

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

Addition of Related Person  Deletion of Related Person KYC Number of Related Person (if available\*)

Related Person Type*	<input type="checkbox"/> Guardian of Minor	<input type="checkbox"/> Assignee	<input type="checkbox"/> Authorized Representative	
Name*	Prefix	First Name	Middle Name	Last Name
	(If KYC number and name are provided, below details of section 6 are optional)			

PROOF OF IDENTITY [PoI] OF RELATED PERSON\* (Please see instruction (H) at the end)

<input type="checkbox"/> A- Passport Number						Passport Expiry Date							
<input type="checkbox"/> B- Voter ID Card													
<input type="checkbox"/> C- PAN Card													
<input type="checkbox"/> D- Driving Licence						Driving Licence Expiry Date							
<input type="checkbox"/> E- UID (Aadhaar)													
<input type="checkbox"/> F- NREGA Job Card													
<input type="checkbox"/> Z- Others (any document notified by the central government)						Identification Number							
<input type="checkbox"/> S- Simplified Measures Account - Document Type code								Identification Number					

7. REMARKS (If any)


8. APPLICANT DECLARATION

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. 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 consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD - MM - YYYY Place :

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received  Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date					
Emp. Name					
Emp. Code					
Emp. Designation					
Emp. Branch					

[Employee Signature]

INSTITUTION DETAILS

Name															
Code															

[Institution Stamp]



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- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

**For office use only**      Application Type\*     New     Update  
*(To be filled by financial institution)*    KYC Number        *(Mandatory for KYC update request)*

1. CORRESPONDENCE / LOCAL ADDRESS DETAILS (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details

Line 1\*   

Line 2   

Line 3          City / Town / Village\*   

District\*          Pin / Post Code\*          State / U.T Code\*          ISO 3166 Country Code\*   

2. CONTACT DETAILS (All communications will be sent on provided Mobile no./ Email-ID) (Please refer instruction F at the end)

Tel. (Off)        Tel. (Res)        Mobile   

FAX        Email ID   

3. APPLICANT DECLARATION

- 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. 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.

[Signature / Thumb Impression]

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Signature / Thumb Impression of Applicant

Date :      -   -

Place :



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For office use only Application Type\* [ ] New [ ] Update
(To be filled by financial institution) KYC Number [ ] (Mandatory for KYC update request)

1. DETAILS OF RELATED PERSON (Please refer instruction G at the end)

[ ] Addition of Related Person [ ] Deletion of Related Person KYC Number of Related Person (if available\*) [ ]
Related Person Type\* [ ] Guardian of Minor [ ] Assignee [ ] Authorized Representative
Name\* Prefix First Name Middle Name Last Name
(If KYC number and name are provided, below details of section 1 are optional)

PROOF OF IDENTITY (PoI) OF RELATED PERSON\* (Please see instruction (H) at the end)

[ ] A- Passport Number [ ] Passport Expiry Date [ ]
[ ] B- Voter ID Card [ ]
[ ] C- PAN Card [ ]
[ ] D- Driving Licence [ ] Driving Licence Expiry Date [ ]
[ ] E- UID (Aadhaar) [ ]
[ ] F- NREGA Job Card [ ]
[ ] Z- Others (any document notified by the central government) [ ] Identification Number [ ]
[ ] S- Simplified Measures Account - Document Type code [ ] Identification Number [ ]

2. APPLICANT DECLARATION

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Date : [ ] Place : [ ]
[Signature / Thumb Impression]
Signature / Thumb Impression of Applicant

3. ATTESTATION / FOR OFFICE USE ONLY

Documents Received [ ] Certified Copies
KYC VERIFICATION CARRIED OUT BY INSTITUTE DETAILS
Date [ ] Name [ ]
Emp. Name [ ] Code [ ]
Emp. Code [ ]
Emp. Designation [ ]
Emp. Branch [ ]
[Employee Signature] [Institution Stamp]



# FATCA & CRS Annexure - Individual Accounts

(Including Sole Proprietor)

(Please consult your professional tax advisor for further guidance on your tax residency, if required) (Refer instructions)  
Systematix ARN: 64917 EUIN: E-029678

## FATCA & CRS Information (Self Certification)

Name

Gender  M  F  O PAN          Occupation Type  Service  Business  Others

Father's Name

Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes

Type of address given at KRA (✓)  Residential  Business  Registered Office

Documents required, if PAN not provided (✓)  Passport  Election ID Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  City of Birth

Country of Birth  Nationality

Are you a tax resident of any country other than India? (✓)  Yes  No

### If 'No' please proceed for the signature of declaration

If 'YES', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card holder / Tax Resident in the respective countries

Country of Tax Residency <sup>1</sup>	Tax Identification Number <sup>1,2</sup>	Identification Type (TIN or Others, please specify)	If TIN is not available, please tick (✓) the reason A, B or C [as defined below]
			→ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
			→ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>

Reason A → The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.  
Reason B → No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected.  
Reason C → others; please state the reason thereof.

<sup>1</sup> To also include USA, where the individual is a citizen / green card holder of The USA  
<sup>2</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent<sup>3</sup>

## Declaration

I hereby confirm that the information provided herein above is true, correct and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required by any intermediary or by domestic or overseas regulators/ tax authorities.

### Authorised Signatory

Date

Place

## 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 to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit 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 anyproceeds 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 Invesco Asset Management (India) or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.