Know Your Customer (KYC) Application Form | Individual



Important Instructions: A. Fields marked with '*' are mandatory fields. F. Please read section wise detailed guide B. Tick "wherever applicable. G. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end. H. List of two character ISO 3166 country codes is available at the end. C. Please fill the form in English and BLOCK letters. D. Please fill the date in DD-MM-YY format. I. CKYC 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 E434563 required to be updated. New Application Type* Update For office use only (Mandatory for KYC update request) (To be filled by financial institution) CKYC Number (KIN) Number 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) First Name Middle Name Last Name Prefix Name* (Same as ID proof) Maiden Name Father / Spouse Name' Mother Name M Date of Birth* F- Female T- Transgender M- Male Gender* PAN* Others Marital Status' Married Unmarried IN- Indian Citizenship* Others - Country Country Code Non Resident Indian Foreign National Person of Indian Origin Residential Status* Resident Individual 2. PROOF OF IDENTITY AND PERMANENT ADDRESS* (Please refer instruction B at the end) I Certified copy of Officially valid document (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 D D - M M - Y Y Y Y C-Driving Licence D-NREGA Job Card E-National Population Register Letter F-Proof of Possession of Aadhaar II E-KYC Authentication No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the custo No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the card. Signature /Thumb Impression across photo without covering the face III Offline verification of Aadhaar 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/CORRESPONDENCE 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 need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the cust III Offline verification of Aadhaar IV Deemed Proof of Address – Document Type code Address Line 1* Line 2

Pin/Post Code*

Line 3 District City/Town/Village*

ISO 3166 Country Code*

State/U.T Code*

4. Contact	Detail	ls (Al	l com	nmun	ication	ns wi	l be s	ent	to M	lobi	le n	umb	er/E	mail	-ID p	rov	ided)) (P	lea	se	refe	er ir	nstr	ucti	on C	at	the	enc	d)			
Tel. (Off)	-					Tel	(Res				-								Mob	ile			- [
Email ID																																
5. Remark	s (If ar	ıy)																														
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data with KRA Rules/ SEBI guid	and s																								iture							
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Documents Received		_		d Cop ent e-	ies docum	ent			C dat			ed fro	om L	JIDAI] Da	ita re	ceiv	ed f	rom	n Of	fline	e ve	rifica	ation		D	igita	I KY	C Pi	oces	SS
KYC docume	nts ver	ificati	on ca	arriec	d out b	y (Re	efer ir	stru	ıctior	ı E))									I	nst	itut	ion	det	ails							
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		CKY		KA KYC FOR	m	EDELWEISS
Know Your Client			_	17 E434563		MUTUAL FUND
Application Form (For	r Individuals only)	Application Type*				
(Please fill the form in English an Fields marked with '*' are mandator		,,	·	KYC Number*		
rielus markeu witii - are manuatoi	iy ilelus	KYC Type*	□Normal (PAN is mandatory) \square P	AN Exempt Investors (Refer	instruction K)
1. Identity Details (Please re	efer instruction A at the	end)				
PAN	Prefix	Please enclo	se a duly atte	sted copy of your PAN	N Card e Name	Last Name
Name* (same as ID proof)						
Maiden Name (If any*)						
Father / Spouse Name*						
·						
Mother Name*						Dist
Date of Birth*		Y Y Y				Photo
Gender*	☐ M- Male		☐ F- Fei	_	ransgender	
Marital Status*	☐ Married		☐ Unma	_		
Citizenship*	☐ IN- Indian		_	s – Country	Country Cod	de 📖
Residential Status*	Resident Individua	I	_	esident Indian		
Occupation Type*	☐ Foreign National☐ S-Service ☐ Pri	ate Sector		n of Indian Origin Sector ☐ Gov	vernment Sector	
Cooupation Type	O-Others Pro			mployed \square Reti		Student Signature/
	☐ B-Business			Categorised		
2. Proof of Identity (Pol)* (fo	or PAN exempt Investor	or if PAN card	d copy not pro	vided) (Please refer i	instruction C & K at the end)	
(Certified copy of any one of t	he following Proof of Ider	tity [Pol] needs	to be submitte	ed)		
☐ A- Passport Number				Pass	sport Expiry Date	D - M M - Y Y Y Y
☐ B- Voter ID Card						
☐ D- Driving Licence				Drivi	ng Licence Expiry Date	D - M M - Y Y Y Y
☐ E- Aadhaar Card						
☐ F- NREGA Job Card						
Z- Others (any docume	nt notified by the cent	ral governme	nt)		Identification Number	
3. Proof of Address (PoA)*						
3.1 Current / Permanent	/ Overseas Address De	ails (Please se	ee instruction	D at the end)		
Address Line 1*						
Line 2						
Line 3					City / Town / Village	7*
District*	Z	ip / Post Cod	e*			s per Indian Motor Vehicle Act, 1988
State/UT*		TT	Country			try Code as per ISO 3166
Address Type*	esidential / Business	 ☐ Res	sidential	☐ Business	☐ Registered O	ffice Unspecified
(Certified copy of any one	of the following Proof	of Address [P	oA] needs to	be submitted)	-	
Proof of Address*				Daga	anart Evniry Data	
☐ Passport Number ☐ Voter ID Card				Fa55	sport Expiry Date	
☐ Driving Licence			+	Drivio	ng Licence Expiry Date	
☐ Aadhaar Card				Dilvii	ing Licence Expiry Date	
□ NREGA Job Card						
Others (any document i	notified by the central	government)			Identification Number	
☐ 3.2 Correspondence / Lo	•	• ,		e end)		
					dresses, please fill 'Annexure A1', Sul	omit relevant documentary proof)
Line 1*	70,000,700					
Line 2	 					
Line 3					City / Town / Village	2*
District*	Z	ip / Post Cod	e*		State/UT Code as	per Indian Motor Vehicle Act, 1988
State/UT*			Country			try Code as per ISO 3166

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4. Contact Details (All	communications wi	II be sent on provid	ed Mobile no. / Ema	ail-ID) (Please refer instruction F at the end)
Email ID				
Mobile		Tel. (Off)		
E EATCA/CBS Inform	ation (Tick if Applie		Posidones for Tay P	
5. FATCA/CRS Inform		•		Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)
Additional Details Re Country of Jurisdiction	_	Ty only if above of	olion (5) is licked)	Occupation Condenses Invited intings of Decidence
Tax Identification Nu	L	at (If issued by juri	ediction)*	Country Code of Jurisdiction of Residence as per ISO 3166
Place / City of Birth*	illiber of equivalent	it (ii issued by juii	Country of Birt	th* Country Code as per ISO 3166
Address			_ Country of Birt	th* Country Code as per ISO 3166
Line 1*				
Line 2				
Line 3				City / Town / Village*
District*		Zip / Post	Code*	State/UT Code as per Indian Motor Vehicle Act, 1988
State/UT*			Country*	Country Code as per ISO 3166
	Person (Ontional) (n	alagae refer instruct	•	
_			, ,	n case of additional related persons, please fill 'Annexure B1')
Related Person Related Person Type*	☐ Deletion o	of Related Person	Assignee	er of Related Person (if available*) Authorized Representative
Related Ferson Type	Prefix	First Na	•	Middle Name Last Name
Name*				
	`	er and name are provid		. ,
☐ Proof of Identity [P	ol] of Related Person	•	. ,	,
☐ A- Passport Number		oor or identity[Foi] in	eas to be submitted,	Passport Expiry Date
☐ B- Voter ID Card				T doopont Expiry Bate
C- PAN Card		 		
☐ D- Driving Licence				Driving Licence Evniny Date
☐ E- Aadhaar Card		 		Driving Licence Expiry Date DD - MM - Y Y Y Y
☐ F- NREGA Job Car				
Z- Others (any doc		the central govern	ment)	Identification Number
7. Remarks (If any)	different floatined by	the contrar govern		Identinoution (damper
7. Remarks (ii arry)				
		+++++		
8. Applicant Declarat	ion			
I hereby declare that the del	tails furnished above are tr			lief and I undertake to inform you of any changes
liable for it. I hereby declar	re that I am not making th	his application for the pu	rpose of contravention of	r misrepresenting, I am aware that I may be held of any Act, Rules, Regulations or any statute of [Signature / Thumb Impression]
legislation or any notification I hereby consent to receiving		-	•	ne. [oignature / munio impression] gistered number/email address.
Date: DD - M	M - Y Y Y Y	Place:		Signature / Thumb Impression of Applicant
9. Attestation / For O	ffice Use Only			
Documents Recei	ved Certified Cop	pies		
KYC Ve	erification Carried Out	t by (Refer Instruction	1)	Institution Details
Date	D D — M M —	YYYY		Name
Emp. Name				Code
Emp. Code				Emp. Branch
Emp. Designation				
		10.11 (0.5		
In-Person Ve	rification (IPV) Carrie	- VVVVV	icuon J)	Institution Details Name
Emp. Name				Code
•				Emp. Branch
Emp. Code Emp. Designation				Emp. Station
Lifip. Designation				
Lifip. Designation	[Employee Sign	nature]		

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FATCA, CRS AND ADDITIONAL KYC

Details and Declaration Form



Sponsor: Edelweiss Financial Services Limited | Trustee Company: Edelweiss Trusteeship Company Limited | Investment Manager: Edelweiss Asset Management Limited Edelweiss Mutual Fund, Edelweiss House, Off. C.S.T Road, Kalina, Mumbai - 400 098, Maharashtra.

For Investors using OLD Application Forms / Transaction Forms / Slips which do not contain new requirement on FATCA, CRS and KYC details. Non Individual Investors have to additionally submit separate FATCA Details and UBO forms.

SOL	E / F	IRST INVESTO	R DETAILS																			_		E ²		
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PAN						Folios	Nos.			Ì						İ										
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	SOL	E / FIRST INVES	TOR DETAIL	S																						
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	2nd	Investor Name										Т	T		T		Ī	PAN	١							
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	b.	Gross Annual	Income [Ple	ase tick	/] □ Bel	ow 1 Lac] 1-5 L	acs 🗌 5	5-10 La	acs []10-2	5 Lacs []>25 เ	acs	s - 1 Cı	ore []>1	Crore OR Net w	ortl/	n₹			Τ			
	c.	Others [Please	e tick ✔]	Politica	lly Expose	ed Person [[PEP]	F	Related	d to a	a Polit	ically E	posed	Pe	rson [PEP]		☐ Not Applicab	ole						,	
	3rd	Investor Name								Τ				T	T		T	PAN	ī							
	a.	Occupation De	etails [Please	e tick 🗸]	Priv	vate Secto	r Servi	ce 🗌	Public	Sect	or Ser	vice	Gov	ern	ment	Servi	ce	Business	[Pro	ofessi	onal				
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	b.	Gross Annual	Income [Ple	ase tick	/] □ Bel	ow 1 Lac] 1-5 L	acs 🗌 5	5-10 La	acs []10-2	5 Lacs []>25 เ	acs	s - 1 Cı	ore []>1	Crore OR Net w	ortl/	n₹			Τ			
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