

**Know Your Customer (KYC) Application Form | Individual**

**Important Instructions:**



- A. Fields marked with "\*" are mandatory fields.
- B. Tick " wherever applicable.
- C. Please fill the form in English and BLOCK letters.
- D. Please fill the date in DD-MM-YY format.
- E. For particular section update, please tick ( ) in the box section number and strike off the sections not required to be updated.
- F. 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.
- H. List of two character ISO 3166 country codes is available at the end.
- I. KYC number of applicant is mandatory for update application.
- J. The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode

ARN-64917 E434563

**For office use only** (To be filled by financial institution)

Application Type\*  New  Update

KYC Number  (Mandatory for KYC update request)

Account Type\*  Normal  Minor  Aadhaar OTP based E-KYC (in non-face to face mode)

**1. Personal Details (Please refer instruction A at the end)**

Name\* (Same as ID proof)

Prefix  First Name  Middle Name  Last Name

Maiden Name

Father / Spouse Name\*

Mother Name

Date of Birth\*  DD -  MM -  YY  YY

Gender\*  M- Male  F- Female  T- Transgender

PAN\*

Marital Status\*  Married  Unmarried  Others

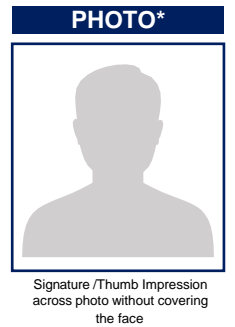
Citizenship\*  IN- Indian  Others – Country  Country Code

Residential Status\*  Resident Individual  Non Resident Indian  Foreign National  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)

- A-Passport Number  Passport Expiry Date  DD -  MM -  YY  YY
- B-Voter ID Card
- C-Driving Licence  Driving Licence Expiry Date  DD -  MM -  YY  YY
- D-NREGA Job Card
- E-National Population Register Letter
- F-Proof of Possession of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*



**Address** [For other than resident Individual, please mention Overseas Address]

Line 1\*

Line 2

Line 3  City/Town/Village\*

District\*  Pin/Post Code\*  State/U.T Code\*  SO 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 *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- II  E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- III  Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*
- IV  Deemed Proof of Address – Document Type code

**Address**

Line 1\*

Line 2

Line 3  Pin/Post Code\*  State code  ISO 3166 Country Code\*

**4. Contact Details** (All communications will be sent to Mobile number/Email-ID provided including for validation purpose) (Please refer instruction C at the end)

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

\*mandatory and subject to validation, hence provide the valid information in legible manner

**5. Remarks (If any)**

**6. Applicant Declaration**

- I hereby declare that the details furnished above are true and correct to the best of my knowledge/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 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..
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I also providing consent to MF/AMC/KRA to share this KYC data / applicable Aadhaar XML data with CKYCR, download the information from CKYCR and share the data to other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.

[Signature/Thumb Impression]

Date:   -   -

Place:

Signature/Thumb Impression of Applicant

**7. Attestation / For Office Use only**

- Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  Digital KYC Process  
 Equivalent e-document  Video Based KYC

**KYC documents verification carried out by**

Date:   -   -      
Emp. Name   
Emp. Code   
Emp. Designation   
Emp. Branch

[Employee Signature]

**Institution details**

Name   
Code

[Institution Stamp]

**In-Person Verification (IPV) carried out by**

Date:   -   -      
Emp. Name   
Emp. Code   
Emp. Designation   
Emp. Branch

[Employee Signature]

**Institution details**

[Institution Stamp]

# Supplementary CKYC Form

## Know Your Client (KYC) Application Form

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



### For Individuals Only

(Please fill the form in English and in BLOCK Letters)

Fields marked with \* are mandatory fields

KYC Type:  Normal (PAN is mandatory)

PAN Exempt Investors

ARN-64917 E434563

### 1. Identity Details (Please refer 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)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Occupation Type\*  S-Service  Private Sector  Public Sector  Government Sector  
 O-Others  Professional  Self Employed  Retired  Housewife  Student  
 B-Business  X-Not Categorized

### 2. FATCA/CRS Information (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 above option is ticked)

Country of Jurisdiction of Residence\*  Country Code of Jurisdiction of Residence  as per ISO 3166

Tax Identification Number or equivalent (If issued by jurisdiction)\*

Place / City of Birth\*  Country of Birth\*  Country Code  as per ISO 3166

Address 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

### 3. Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

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

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative

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)

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

A- Passport Number  Passport Expiry Date --

B- Voter ID Card

C- PAN Card

D- Driving Licence  Driving Licence Expiry Date --

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government)  Identification Number

### 4. Remarks (If any)

### 5. 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 declare that I am not making this application for the purpose of 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.

Date: -- Place:

Signature / Thumb Impression of Applicant



**FRANKLIN  
TEMPLETON**

# FATCA & CRS Annexure for Individual Accounts

(Including Sole Proprietor) (Refer to instructions)  
(Please consult your professional tax advisor for further guidance on your tax residency, if required)

## First / Sole Applicant / Guardian

ARN-64917 E434563

Name

Gender  M  F  O PAN  Occupation Type  Service  Business  Others

Father's Name

Cust ID / Folio No.

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 KYC  Residential or Business  Residential  Business  Registered Office

Permissible documents are  Passport  Election ID Card  PAN Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  Place of Birth

Country of Birth

Nationality

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

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

Country <sup>#</sup>	Tax Identification Number <sup>%</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup>To also include USA, where the individual is a citizen / green card holder of The USA

<sup>%</sup>In case Tax Identification Number is not available, kindly provide its functional equivalent \$

## Second applicant

Name

Gender  M  F  O PAN  Occupation Type  Service  Business  Others

Father's Name

Cust ID / Folio No.

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 KYC  Residential or Business  Residential  Business  Registered Office

Permissible documents are  Passport  Election ID Card  PAN Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  Place of Birth

Country of Birth

Nationality

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

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

Country <sup>#</sup>	Tax Identification Number <sup>%</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup>To also include USA, where the individual is a citizen / green card holder of The USA

<sup>%</sup>In case Tax Identification Number is not available, kindly provide its functional equivalent \$

### Third applicant

Name																											
Gender	M	F	O	PAN													Occupation Type	Service	Business	Others							
Father's Name																											
Cust ID / Folio No.																											
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 KYC	<input checked="" type="checkbox"/>	Residential or Business	<input checked="" type="checkbox"/>	Residential	<input checked="" type="checkbox"/>	Business	<input checked="" type="checkbox"/>	Registered Office																			
Permissible documents are	<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others																										
Date of Birth							Place of Birth																				
Country of Birth																											
Nationality																											
Are you a tax resident of any country other than India?	Yes	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>																							

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

Country <sup>#</sup>	Tax Identification Number <sup>%</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup>To also include USA, where the individual is a citizen / green card holder of The USA

<sup>%</sup>In case Tax Identification Number is not available, kindly provide its functional equivalent \$

### Certification

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

#### Signatures

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First / Sole Applicant / Guardian

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Second Applicant

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Third Applicant

Date	d	d	m	m	y	y	y	y
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Place																											
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### FATCA & CRS Terms & Conditions

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Incometax Rules, 1962, which Rules require Indian financial institutions 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 Franklin Templeton Asset Management (India) Pvt. Limited 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.