EY PARTNER / AGENT INF								
RN/RIA Code/Stock Broker/ rtfolio Manager Registration Number (PMRN)	ORMATION (Inve ARN/RIA/Po Manager's/ Stoo Name	ortfolio ck Broker's	under Direct Plan must Sub Agent's ARN	mention "Direct" in AF Bank Branch Code	N column.) (Refer Internal Code for Sub-Agent/ Employee	nstruction 1) Employee Unique Identification Number (EUIN)	FOR OFFICE USE ONLY (TIME STAMP)	CAMS bar cod
RARN-64917						E434563		
UIN Declaration (only where E We hereby confirm that the EL f the above distributor/sub bro				this transaction is ex	ecuted without an	y interaction or advice by	the employee/relationship ma	nager/sales pers
		rung no uuri		, n anj, protiada s	y the employee, re			
First/ Sole Applic	ant/ Guardian/ Po	AHolder		Second App	licant		Third Applicant	
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April 2023

ADDITIONAL KYC DE										
Occupation details for	1 st Applicant	2 nd Applicant	3 rd Applicant	Guardian	Politically Exposed Person (PEP) det	tails:	ls a PEP	Related to PEP	Not Applicable	
Private Sector Service					1 st Applicant					
Public Sector Service					2 nd Applicant					
Government Service					3 rd Applicant					
Business					Guardian					
Professional					Authorised Signatories					
Agriculturist					Promoters					
Retired										
Housewife					Partners					
Student					Karta					
Proprietorship					Whole-time Directors					
Others (Please specify Non-Individual Inves	/	the year anihity	e mentioned oo	rvices	Trustee Foreign Exchange / Money Changer S	ervices		Gambling / Lottery		
Non-maiviaual mves	nois invoiveu/ pro	winning any or the	e menuoneu se	1 11655	Money Lending / Pawning	[None of th	e above		
Gross Annual Income	Range (in Rs.) 1 st /	Applicant 2 nd Appl	icant 3 rd Applica	nt Guardian	Gross Annual Income Range (in Rs	s.) 1 st Applie	cant 2 nd Appl	icant 3 rd Applica	nt Guardian	
Below 1 lac					10-25 lac					
1-5 lac					25 lac- 1 cr					
5-10 lac					> 1 cr					
OR Networth in Rs. (I for Non Individual) (no than 1 year)							as on DD I	MM YYY	Y	
			o 18a for KYC (KRA)	. Refer instruction	No 18b for KYC Identification Number issue	ed by CKYCR				
Name of PoA Mr.		DETAILS								
PAN#/ PEKRN#										
KYC Number				KY	C # [Please tick (\checkmark)] (Mandatory)	Proof	f Attached			
# Please attach Proof B	efer instruction No 16	for PAN/PEKRN and N	lo 18a for KYC (KRA		n No 18b for KYC Identification Number issu	ued hy CKYCF	2			
				•	ification) (Refer instruction 4)	,				
The below informat	ion is required fo	all applicant(s)	/ guardian	,,	ed Office (for address mentioned	in form/e	xistina addre	ess annearing i	n Folio)	
nuuross rypc.				-	·		-		•	
Category	First	Applicant/Guard	ian in case of N	linor	Second Applicant/ Guardian			Third Applicant		
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Is the applicant(s)/ Nationality/Tax Res Please indicate all o purposes and the a	idency other than countries in which	India? you are resident	for tax		uardian in case of Minor Si Yes 🗌 No	E Ve	olicant/ Guar es 🗌 No		Third Applicant	
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	First	-		Ainor	Second Applicant/ Guardian			Third Applicant		
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April 2023

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