Know Your Customer (KYC) Application Form | Individual



Important Instructions:

Line 3 District'

- 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.
- 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.

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. For office use only Application Type' New Update (Mandatory for KYC update request) (To be filled by financial institution) KYC Number Account Type* Aadhaar OTP based E-KYC (in non-face to face mode) Normal 1. Personal Details (Please refer instruction A at the end) Middle Name Prefix First Name Last Name Name* (Same as ID proof) Maiden Name Father / Spouse Name* Mother Name Date of Birth* D D M F- Female T- Transgender M- Male Gender* FORM 60 furnished PAN* Marital Status* Unmarried Married Others Citizenshin' 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) Passport Expiry Date DD - MM - YYYY A-Passport Number PHOTO* B-Voter ID Card Driving Licence Expiry Date DD - MM - YYYYY 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 custome No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the cust 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 Pin/Post Code* State/U.T Code* ISO 3166 Country Code* District' 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 custome II E-KYC Authentication No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the custo III Offline verification of Aadhaar No need to attach. Aadhaar card. If submitted. Aadhaar Number to be masked by the custome IV Deemed Proof of Address - Document Type code Address Line 1* Line 2

Pin/Post Code*

City/Town/Village*

ISO 3166 Country Code*

State/U.T Code*

	Details (All communications will be sent to Mobile number/El	nail-ID provided including for validation purpose) (Please refer instruction C at the end)
Tel. (Off)	- Tel. (Res)	Mobile*
Email ID*		
	to validation, hence provide the valid information in legible manner	
5. Remarks	s (If any)	
6. Applicant De	eclaration	
undertake to infor or untrue or misle I hereby declare t any statute of leg time I hereby consent number/email add I am providing the data with KRA a guidelines. Date: D D M	that the details furnished above are true and correct to the myou of any changes therein, immediately. In case any of the ading or misrepresenting. I am aware that I may be held liable for that I am not making this application for the purpose contravent is lation or any notifications/directions issued by any government to receiving information from Central KYC Registry through tress and to download the information from CKYCR econsent to MF/RTA/SEBI registered intermediary to share the indirect that to other participating intermediaries as made and the control of the con	above information is found to be false or it. iton of any Act, Rules, Regulations or otal or statutory authority from time to SMS/Email on the above registered is KYC data / applicable Aadhaar XML mandated by PMLA Act/Rules/SEBI Signature/Thumb Impression of Applicant
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	C documents verification carried out by	Institution details
Date:		
		Name
Emp. Name		Name Code
Emp. Code		
Emp. Code Emp. Designation		
Emp. Code	[Employee Signature]	
Emp. Code Emp. Designation Emp. Branch		Code
Emp. Code Emp. Designation Emp. Branch	[Employee Signature]	Code [Institution Stamp]
Emp. Code Emp. Designation Emp. Branch	[Employee Signature] Person Verification (IPV) carried out by	Code [Institution Stamp]
Emp. Code Emp. Designation Emp. Branch In- Date:	[Employee Signature] Person Verification (IPV) carried out by	Code [Institution Stamp]

Know Your Client (KYC)

Application Form (For Individuals Only) ARN-64917 E434563 Please fill the form in ENGLISH and in BLOCK letters Application Number: Fields marked * are mandatory Fields marked ⁺ are pertaining to CKYC and mandatory only if processing CKYC Application Type*: ☐ New KYC ☐ Modification KYC **KYC Mode*:** Please Tick (✓) ☐ Online KYC Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Offline EKYC Digilocker 1. Identity Details (please refer guidelines overleaf) PAN* Please enclose a duly attested copy of your PAN Card Name* (same as ID proof) Maiden Name[†] (if any) Fathers/Spouse's Name* Date of Birth* Gender* Male Female Transgender Marital Status* Married Single Nationality* Indian Other Residential Status* Resident Individual Non Resident Indian Please Tick (✓) ☐ Foreign National Person of Indian Origin (Passport mandatory for NRIs, PIOs and Foreign Nationals) Proof of Identity (POI) submitted for PAN exempted cases (Please tick) A — Aadhaar Card XXXX XXXX ______ B — Passport Number (Expiry Date) C — Voter ID Card D — Driving License (Expiry Date) E - NREGA Job Card F — NPR Z —Others (any document notified by Central Government) **Identification Number** 2. Address Details* (please refer guidelines overleaf) A. Correspondence/Local Address* Line 1* Line 2 Line3 City/Town/Village* District* Pin Code* State* Country* Address Type* Residential/Business Residential Registered Office Unspecified Business Applicant e-SIGN

B. Permanent residence address of applicant, if different fro	om above A / Overse	eas Address* (Mandato	ory for NRI Applicant)
Line 1*			
Line 2			
Line3			
City/ Town/Village* Dis	trict*	Din Code	*
State* Co.		Pin Code	
Address Type* Residential/Business Residential	Business	Registered Office	
Proof of Address* (attested copy of any 1 POA for correspondence and perma			Orispecified
	nent address each to be subm	nitted)	
A — Aadhaar Card XXXX XXXX		(Expiry Date)	
C — Voter ID Card			
D — Driving License		(Expiry Date)	
E —NREGA Job Card			
F — NPR Letter			
Z—Others	(any document n	otified by Central Government)	
Identification Number	、 ,	,	
3. Contact Details			
Email ID			
Mobile No			
Tel (off)	Tel (Res)		
4. Applicant Declaration			
I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I under-	Applicant e-SIGN	Appli	cant Wet Signature
take 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/We are aware that I/We may			
be held liable for it.			
I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.			
DATE: (DD-MM-YYYY)			
PLACE:			
5. For Office Use Only			
In-Person Verification (IPV) carried out by*		Intermediary Details	*
IPV Date	Self certified	document copies receiv	ved (OVD)
	True Copies o	of documents received ((Attested)
Emp. Code	AMC / Intermedia	ary Name :	
Emp. Designation			
Employee Signature and Stamp		Institution Name and Stamp	



SUPPLEMENTARY KNOW YOUR CLIENT (KYC), Aadhaar Updation, FATCA & CRS - SELF CERTIFICATION FORM FOR INDIVIDUALS

Mandatory for all Applicant(s) including Joint-holder(s), Guardian (if applicable) and Power of Attorney (if any). [Please consult your professional tax advisor on your tax residency and related FATCA & CRS guidance]

ARN-64917 E434563

A. FATCA & CRS INFORMAT	ION (SELF CER	RTIFICATIO	N)									
PAN					F	olio No.						
Name												
Type of Address given at KRA	Resid	lential [Busine	SS	Residential / Business		Registered (Office				
Nationality				Gender			Date of birth	D	D M	M	ΥΥ	YYY
Mobile	Aobile					С	ountry of Birth					
Father's name	Father's name (mandatory if PAN not provided)											
Spouse's name												
Documents required (if PAN not p	rovided)	Passport	Elec	tion ID Card	Govt. ID Card	Driving Licens	se UID	Al Card		IREGA (Card	Others
Identification number of the docu	ment provided											
Is the applicant/ guardian's Coun	rv of Birth / Citize	enship / Nati	ionality / Tax I	Residency other	than India? Yes	No						
If yes, please indicate all countrie	•		•	•	_							
S No Cou	ntry of Tax Reside	ntry of Tax Residency#			Tax Payer Identification Number ^			ication Typ	oe [TIN o	r other, p	lease s	pecify]
1												
2												
3												
#To also include USA, where the i	ndividual is a citiza	an/ dreen car	rd holder of LIG	SA								
^ In case Tax Identification Numb		-										
B. ADDITIONAL KYC INFORI	MATION											
Occupation Details [Please tick	(✓)]	Serv	rice Pri	ivate Sector	Public Sector Gov	ernment Service	Student	Prof	essional	H	ousewi	fe
		Busi	ness F	Retired	Agriculture Propriet	orship 0th	ers		(olease sp	ecify)	
Gross Annual Income (Rs.) [Ple	ase tick (√)]		ness F w 1 Lac	Retired/		orship Oth		-25 Lacs -			ecify)	Crore
Gross Annual Income (Rs.) [Ple	ase tick (√)]							>25 Lacs -				Crore
Gross Annual Income (Rs.) [Ple		Belov				10 - 25 La		>25 Lacs -			>1	
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Net-worth (Mandatory for N Politically Exposed Person (PEP)	on-Individuals) Status*	Rs I am	w 1 Lac	1 - 5 Lacs	s 5 - 10 Lacs	10 - 25 Lar OR as on Not Ap	cs >	<u> </u>	- 1 Crore	(No	>1	than 1 year)
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