

## 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

<b>For office use only</b> (To be filled by financial institution)	Application Type*	<input type="checkbox"/> New	<input type="checkbox"/> Update	
	KYC Number	(Mandatory for KYC update request)		
	Account Type*	<input type="checkbox"/> Normal	<input type="checkbox"/> Minor	<input type="checkbox"/> Aadhaar OTP based E-KYC (in non-face to face mode)

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

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<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"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T- Transgender	
PAN*	<input type="text"/>		<input type="checkbox"/> FORM 60 furnished	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others – Country _____	Country Code <input type="text"/>	
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Foreign National	<input type="checkbox"/> 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
- B-Voter ID Card
- C-Driving Licence  Driving Licence Expiry Date
- 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



Signature /Thumb Impression across photo without covering the face

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

Line 1*	<input type="text"/>		
Line 2	<input type="text"/>		
Line 3	<input type="text"/>		City/Town/Village* <input type="text"/>
District*	Pin/Post Code* <input type="text"/>	State/U.T Code* <input type="text"/>	ISO 3166 Country Code* <input type="text"/>

### 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*	<input type="text"/>		
Line 2	<input type="text"/>		
Line 3	<input type="text"/>		City/Town/Village* <input type="text"/>
District*	Pin/Post Code* <input type="text"/>	State/U.T Code* <input type="text"/>	ISO 3166 Country Code* <input type="text"/>



**Know Your Client (KYC)**  
**Application Form (For Individuals Only)**



**CDSL VENTURES LIMITED**

...Exploring New Horizons

Intermediary  
Logo

Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

Application Type\*:  New KYC  Modification KYC

**KYC Mode\*:** Please Tick (✓)

Normal  EKYC OTP  EKYC Biometric  Online KYC  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\*  Single  Married

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 \_\_\_\_\_

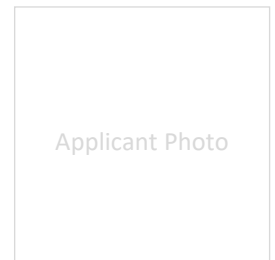
D — Driving License \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

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  Business  Registered Office  Unspecified

Applicant e-SIGN

**B. Permanent residence address of applicant, if different from above A / Overseas Address\* (Mandatory for NRI Applicant)**

Line 1\* \_\_\_\_\_  
 Line 2 \_\_\_\_\_  
 Line3 \_\_\_\_\_  
 City/  
 Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_  
 State\* \_\_\_\_\_ Country\* \_\_\_\_\_  
 Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

**Proof of Address\*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

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 Letter      \_\_\_\_\_  
 Z—Others      \_\_\_\_\_ (any document notified 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 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/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: _____	Applicant e-SIGN	Applicant Wet Signature

**5. For Office Use Only**

In-Person Verification (IPV) carried out by*	Intermediary Details*
IPV Date      ____ - ____ - ____ Emp. Name      _____ Emp. Code      _____ Emp. Designation      _____	<input type="checkbox"/> Self certified document copies received (OVD) <input type="checkbox"/> True Copies of documents received (Attested) AMC / Intermediary Name : _____
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]

## A. FATCA & CRS INFORMATION (SELF CERTIFICATION)

PAN											Folio No.							
Name																		
Type of Address given at KRA	<input type="checkbox"/> Residential		<input type="checkbox"/> Business		<input type="checkbox"/> Residential / Business				<input type="checkbox"/> Registered Office									
Nationality					Gender					Date of birth	D	D	M	M	Y	Y	Y	Y
Mobile					Place of Birth					Country of Birth								
Father's name	(mandatory if PAN not provided)																	
Spouse's name																		
Documents required (if PAN not provided)	<input type="checkbox"/> Passport		<input type="checkbox"/> Election ID Card		<input type="checkbox"/> Govt. ID Card		<input type="checkbox"/> Driving License		<input type="checkbox"/> UIDAI Card		<input type="checkbox"/> NREGA Card		<input type="checkbox"/> Others					
Identification number of the document provided																		

Is the applicant/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency 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.

S No	Country of Tax Residency#	Tax Payer Identification Number ^	Identification Type [TIN or other, please specify]
1			
2			
3			

#To also include USA, where the individual is a citizen/ green card holder of USA.

^ In case Tax Identification Number is not available, kindly provide its functional equivalent.

## B. ADDITIONAL KYC INFORMATION

Occupation Details [Please tick (✓)]	<input type="checkbox"/> Service <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others _____ (please specify)					
Gross Annual Income (Rs.) [Please tick (✓)]	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1 - 5 Lacs <input type="checkbox"/> 5 - 10 Lacs <input type="checkbox"/> 10 - 25 Lacs <input type="checkbox"/> >25 Lacs - 1 Crore <input type="checkbox"/> >1 Crore					

OR

Net-worth (Mandatory for Non-Individuals)	Rs. _____ as on	DD	MM	YYYY	(Not older than 1 year)
Politically Exposed Person (PEP) Status*	<input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable				

\*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

## C. AADHAAR DETAILS (Ensure all details are as per Aadhaar Card) Not mandatory for NRIs

Aadhaar Number* (Please enclose copy of front & back side)	Date of Birth	PIN Code	Mobile No.	Enrolment Proof#
	D D M M Y Y Y Y			<input type="checkbox"/>

# If Aadhaar number is applied for, please enclose proof of enrolment.

## D. Declaration:

I have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform HDFC Asset Management Company Limited/HDFC Mutual Fund/ Trustees for any modification to this information promptly. I further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'.

I hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me to the Mutual Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me.

### Consent for authentication and sharing of Aadhaar data:

I/We hereby provide my consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (iii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I/We hereby provide my/our consent for sharing/ disclose of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios with my PAN.

Date:

Place:

Signature