**KNOW YOUR CLIENT (KYC) APPLICATION FORM**

**Please fill this form in ENGLISH and in BLOCK LETTERS.**

**A. IDENTITY DETAILS**

PHOTOGRAPH

Please affix your recent passport size photograph

**1. Name of the Applicant :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and sign across it

**2. Father's/ Spouse Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. Gender :**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Male/Female)

**4. Marital Status :**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Single/Married)

**5. Date of Birth : \_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (DD/MM/YYYY)

**6. Nationality :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Status :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Resident Individual/ Non Resident/ Foreign National)

**8.** **PAN Number :**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. Unique Identification Number (UID)/ Aadhaar, if any :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. Specify the proof of Identity submitted :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. ADDRESS DETAILS**

**1. Address for correspondence**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City/town/village** : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Pin Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Country:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Contact Details:** **Tel. (Res.)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mobile No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Email ID:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. Permanent Address** (if different from above or overseas address, mandatory for Non-Resident Applicant) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City/town/village** : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Pin Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Country:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Specify the proof of address submitted for permanent address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. OTHER DETAILS**

**1. Gross Annual Income Details : Income Range per annum** :

a) Below Rs 1 Lac b) 1-5 Lac c) 5-10 Lac d) 10-25 Lac e) >25 Lac

 **or**

**Net-worth as on** (date)…………………. (------------------------------) (Net worth should not be older than 1 year)

**2. Occupation (please tick any one and give brief details) :**

a) Private Sector b) Public Sector c) Government Service d) Business e) Professional f) Agriculturist g) Retired h)Housewife i)Student j) Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Please tick, if applicable :**

a) Politically Exposed Person (PEP) b) Related to a Politically Exposed Person (PEP)

4. **Any other information**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**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.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** DATE : \_\_\_\_\_\_\_\_\_\_\_\_\_ **(DD/MM/YYYY)**

**Signature of the Applicant**

**FOR OFFICE USE ONLY**

(Originals verified) True copies of documents received

(Self-Attested) Self Certified Document copies received

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** DATE : \_\_\_\_\_\_\_\_\_\_\_\_\_ **(DD/MM/YYYY)**

**Signature of the Authorised Signatory**

**Seal/Stamp of the intermediary**