Know Your Client (KYC)

Application Form (For Individuals Only)







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 CKYCalso		Application Number:			
		Application Type*: O New KYC		O New KYC	O Modification KYC
KYC Mode*: Please Tick		iometric 🗌	Online KYC	☐ Offine EKYC	☐ Digilocker
1. PERSONAL DETAILS (Please refer instruction A at the end)					
☐ Name* (Same as ID proof (If any*) Maiden Name Father / Spouse Name	Prefix				
Mother Name	D D — M M — Y Y Y Y				
Date of Birth*		_			РНОТО
PAN*		□ F F	-I-	T T	
Gender*	☐ M- Male	☐ F- Fem		T-Transgender	
Marital Status*	☐ Married	Unmar		Others ——	
Residential Status*	☐ Resident Individual☐ Foreign National		sident Indian of Indian Origin		
Nationality*		Others	-		
. rationality	_ maian	_ others	•		Signature / Thumb
2. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)					
(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted) Certified copy of OVD or equivalent d-documents of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)					
I	er				
☐ B- Voter ID Card					
□ C- PAN Card□ D- Driving Licence			Drivi	ng Licence Expiry Date	D D — M M — Y Y Y Y
☐ E-UID(Aadhaar)					
☐ F- NREGA Job Car					
G- Others(any docu	ment)		Identification Number		
☐ H- National Popula			Identification Number		
☐ I- Proof of Possession of Aadhar					
II E-KYC Authentication					
III Offline verification of Aadhar					
Address					
Line 1*					
				City / Town / Villa	ge*
					ISO 3166 Country Code*
State*		ntry* —			·
3. CURRENT ADDRESS DETAILS (Please refer instructions B at the end)					
			rovided)		
Same as above mentioned address (in such cases address details as below need not be provided) Certified copy of OVD or equivalent d-documents 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-PAN Card					
☐ D- Driving Licence			Deixi	an License Evning Date	
☐ E- UID (Aadhaar)			וואוזט	ig Licerice Expiry Date	<u> </u>
☐ F- NREGA Job Car					
	a ument notified by the central goverr	iment)			
☐ H- National Popula					
☐ I- Proof of Posses:		_	Identification Number _		
<u> </u>	tion				
_	n of Aadhar		_		

Classified as Internal Address Line 1* Line 2 City / Town / Village* Line 3 State / U.T Code*______ ISO 3166 Country Code*_ ____ Pin / Post Code*____ District* __ Country* -4. CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction B at the end) ☐ Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1') I 🗌 A- Passport Number ☐ B- Voter ID Card ☐ C- PAN Card ☐ D- Driving Licence Driving Licence Expiry Date ☐ E- UID (Aadhaar) ☐ F- NREGA Job Card G- Others(any document notified by the central government) Identification Number ☐ H- National Population Register Letter Identification Number ___ ☐ I- Proof of Possession of Aadhar __ II

E-KYC Authentication III
Offline verification of Aadhar ____ Address Line 1* Line 2 City / Town / Village*_ Line 3 ISO 3166 Country Code* District*_ Pin / Post Code*_ _ State / U.T Code*_ Country* 5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction C at the end) Tel. (Res) Mobile Tel. (Off) FAX Email ID REMARKS (If any) 6. Applicant Declaration Applicant e-SIGN **Applicant Wet Signature** I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under -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 hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. --- DATE: _____(DD-MM-YYYY) 7. For Office Use Only Digital KYC Process E-KYC data received from UIDAI Documents Received Data received from Offline verification **Certified Copies** Equivalent e-documents Video based KYC In-Person Verification (IPV) carried out by* Intermediary Details* $\mathsf{D} - \mathsf{M} \; \mathsf{M} - \mathsf{Y} \; \mathsf{Y} \; \mathsf{Y} \; \mathsf{Y}$ Self certified document copies received (OVD) Date Emp. Name True Copies of documents received (Attested) Emp. Code AMC / Intermediary Name: Emp. Designation Emp. Branch