CKYC & KRA KYC Form Filling Important Pointers

Know Your Client (KYC) Application Form (For Individuals only)	Application	□ Ne	ew												R	eL	.IA	.NC	е		MUT		۸L
(Please fill the form in English and in BLOCK Letters)	Type*	Up	odate	KYC	C Nur	nber'	*																
Fields marked with '*' are mandatory fields	KYC Type*	□No	ormal	(PAN is	s mano	datory)		PAN	N Exe	empt	Inve	stors	s ((Refe	er instr	uctior	n K)						
1.Identity Details (Please refer instruction A at the	end)																						
A PAN	Please enclose	a duly	atteste	ed cop	y of y	our P	AN C	ard															
Prefix	I First Name						Mida	dle N	Namo	2							Las	t Na	me				
Name* (same as ID proof)	T II OT TRUING			1	П		TVIIGO	T		T	Т	Т	1	Т		Т	T			Т	\top	\top	
		+		╫	\vdash	+	+	+	Н	+	+	+	╫	+	+	+	\vdash	Н		+	+	+	\dashv
Maiden Name (If any*)		+		╢	\vdash	+	+	╀	Н	+	+	+	╬	+	+	+	⊬	Н		+	+	+	\dashv
Father / Spouse Name*		\perp		4	Ш	_	_	_	Ш	_	_	_	╙	4	_	_	_	Ш		_	4	4	_
Mother Name*												\perp											
Date of Birth*	YYY															((2			Pho	oto		
Gender*			F- Fe	male			□ T	-Tra	nsge	nder													ī
Marital Status*			Unma	rried			□ 0	ther	s														
Citizenship*			Other	s – (Coun	try						Cou	ntry	/ Co	de [
Residential Status* Resident Individua	ıl		Non F			-	1						·										
☐ Foreign National			Perso	n of l	India	n Ori	gin											1					
Occupation Type* Private Sector			Public	Sec	tor		☐ G	ove	rnme	nt Se	ecto	. [_ F	Prof	essio	onal							
☐ X-Not Categorised			Self E	mplo	yed		R	etire	ed		Ηοι	ısew	ife		Stι	uden	nt						
2.Proof of Identity (Pol)* (for PAN exempt Investor	or if PAN card	сору	not pro	vide	d) (P	lease	e refe	r ins	truct	ion C	: & k	at t	he e	end))								
(Certified copy of any one of the following Proof of Identified	tity [Pol] needs	to be s	submitt	ed)																			
☐ A- Passport Number							Pas	sspo	rt Ex	piry	Date	•			D]-[M N		Υ	ΥY	Υ		
☐ B- Voter ID Card																							
☐ D- Driving Licence							Dri	ving	Lice	nce E	Ехрі	y Da	ate		D D]-[M N		Υ	ΥY	Υ		
☐ E- Aadhaar Card																							
☐ F- NREGA Job Card																							
Z- Others (A)[any document notified by the central government	ernment]							lo	denti	ficati	on N	lumb	er										
Others (B) [Refer instruction C (3)]								le	denti	ficati	on N	lumb	er										
3.Proof of Address (PoA)*																							
3.1 Current / Permanent / Overseas Address Det	ails (Please se	e instr	ruction	D at	the e	end)																	
Address	,					,																	
Line 1*			П		П								Т			П			Т			Т	
Line 2		\Box	$\dashv \dashv$	\top	\Box	\top	\top	\Box	6		П	\top	Ť	T	\top	П	\top	†	T	П	\exists	\forall	٦
Line 3										Cit	y / T	own	/ Vi	illag	e*								
	Zip / Post Code	e*							S	tate/l	JT	Code	е		as	per	India	n Mo	tor V	ehicle	Act	, 19	88
State/UT*		С	ountry	·										Co	ountr	у С	ode			as*pe	r ISO	316	6
Address Type* Residential / Business	Resi	dentia	al			Bus	sines	s] R	egis	tere	ed C	ffice				Ur	nspe	cifie	d	
(Certified copy of <u>any one</u> of the following Proof of	Address [PoA]	need	s to be	sub	mitte	d)						Ū											
Proof of Address*																		_					
☐ Passport Number							Pas	sspo	rt Ex	piry	Date	•			D	-[M N		Υ	ΥΥ	Υ		
☐ Voter ID Card																							
☐ Driving Licence							Dri	ving	Lice	nce E	Expi	y Da	ate		D D	-[M		Υ	ΥΥ	Υ		
☐ Aadhaar Card																							
☐ NREGA Job Card																							
Others (A)[any document notified by the central government	ment]							lder	ntifica	ation	Nun	ber						Ш					
Others B [Refer instruction D (3)]								lder	ntifica	ation	Nun	ber											
☐ 3.2 Correspondence / Local Address Details* (Ple	ease see instru	ction	E at th	e end	d)																		
☐ Same as Current / Permanent / Overseas Address	details (In c	ase of r	multiple (corresp	onden	ce / lo	cal add	Iresse	es, ple	ase fill	'Anne	xure A	۹1', S	Subm	it relev	vant d	locum	entar	y pro	of)			
Line 1*		П		\neg		\neg			\neg			\top	Т	\top			\neg	\top	Т			\neg	\neg
Line 2		$\dagger \dagger$	+	+	$\dagger \dagger$	+		\forall	+		H	+	\dagger	\dagger	\top	H	\dagger	$^{+}$	\dagger	\forall	\forall	\dagger	\dashv
Line 3		$\dagger \dagger$	\top	\top	\forall	\top		\forall	\top	Cit	y / T	own	/ Vi	illag	e*	H	\dagger	\dagger	\dagger	\Box	\forall	\dagger	\dashv
District	Zip / Post Code	e*			П				S	_ tate/l				Ţ	┐ '	per	India	n Mo	tor V	ehicle	Act	, 19	88
State/UT*		C	ountry											Co	_ ountr	у С	ode			as*pe	r ISO	316	6

Contact Details (All	ommunications will be sent on provided Mobile no.	Email-ID) (Please refer instruction F at the end)
Email ID		
Mobile	Tel. (Off)	Tel. (Res) — — — — — — — — — — — — — — — — — — —
i.FATCA/CRS Informa	ion (Tick if Applicable) Residence for 1	x Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)
Additional Details Requ	red* (Mandatory only if above option (5) is ticked)	
Country of Jurisdiction of	f Residence*	Country Code of Jurisdiction of Residence as per ISO 3166
Tax Identification Numb	er or equivalent (If issued by jurisdiction)*	
Place / City of Birth*	Country of	Birth* Country Code as per ISO 3166
Address		
ine 1*		
ine 2		On AT COMM 4
Line 3	7in / Deat	City / Town / Village*
State/UT* Country	Zip / Post	Code* State/UT Code as per Indian Motor Vehicle Act , 1
Soundry	Country Code	as*per ISO 3166
5.Details of Related Pe	son (Optional) (please refer instruction G at the er) (in case of additional related persons, please fill 'Annexure B1')
		nber of Related Person (if available*)
elated Person Type*	☐ Guardian of Minor ☐ Assigned	Authorized Representative
2.0	Prefix First Name	Middle Name Last Name
ame*		_
7 B((1)	(If KYC number and name are provided, below details	· ,
	of Related Person* (Please see instruction (H) at the following Proof, of Identity[Poll, peeds to be subm	,
<i>⊆eππed copy of <u>any one</u></i> ☑A- Passport Number	of the following Proof of Identity[PoI] needs to be subm	Passport Expiry Date
B- Voter ID Card		1 dooport Expiry Date
C- PAN Card		
		District France France Date
D- Driving Licence		Driving Licence Expiry Date
E- Aadhaar Card		
F- NREGA Job Card		
Z- Others (any docur	ent notified by the central government)	
.Remarks (If any)		
S.Applicant Declaration		
I hereby declare that the deta therein, immediately. In case liable for it. I hereby declare	s furnished above are true and correct to the best of my knowledge a any of the above information is found to be false or untrue or mislead that I am not making this application for the purpose of contraver directions issued by any governmental or statutory authority from tim-	ng or misrepresenting, I am aware that I may be held on of any Act, Rules, Regulations or any statute of
I hereby consent to receiving	nformation from Central KYC Registry through SMS/Email on the abo	e registered number/email address.
Date: DD — M M	Place:	Signature / Thumb Impression of Applicant
A	e Use Only	
Attestation / For Offi	d Certified Copies	
Documents Receiv	a Continue Copies	
Documents Receiv	· ·	Institution Details
Documents Receiv	erification (IPV) Carried Out by (Refer Instruction J)	Institution Details Name
Documents Receive KYC In-Person V	· ·	Name
Comments Receive KYC In-Person Volate Emp. Name	· ·	Name Code
KYC In-Person V	· ·	Name

CKYC-Individual Form / 30th Dec 2016 / Ver 1.0

Important Form Filling Instruction

- When providing PAN Card as an ID proof mention the name as it is mentioned in the PAN Card Mandatory
- Passport size viewable photo with signature across Mandatory
- Mother's Name is to be mentioned Mandatory
- PAN Card as an ID proof is mandatory. In case PAN is not available refer instruction number A for more details Mandatory
- Proof of Identity is required if the attested PAN Card copy not provided For more details please refer instruction number C & K Mandatory
- 6 POA valid Document / Proof list is mentioned in the instruction page For more details please refer instruction number D
- City / Town / Village is to be mentioned (Residential & Overseas Address if applicable) Mandatory
- State / UT Code / ZIP / Post Code all information is to be mentioned (not required for Overseas Address) Mandatory
- In order to receive CKYC acknowledgment communication please provide your 10 digit Mobile number & email ID
 Good to have
- FATCA / CRS information is required for investors residing outside India. For more details please refer instruction number B Mandatory
- KYC In Person Verification (IPV) is to be carried out for all Investors. For more details please refer instruction number J Mandatory

Note: For more details request you to refer the instruction page in the CKYC & KRA KYC Form. In case of any unavoidable overwriting in the form please counter sign for authentication.