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



Place for
Intermediary Logo

Application No. :

Please fill in ENGLISH and in BLOCK LETTERS

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (Please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name).

[Grid for Name of Applicant]

2. Date of Incorporation [d d / m m / y y y y] Place of Incorporation [Grid]

3. Registration No. (e.g. CIN) [Grid] Date of commencement of business [d d / m m / y y y y]

4. Status Please tick (✓) Private Ltd. Co. Public Ltd. Co. Body Corporate Partnership Trust / Charities / NGOs FI FII HUF
 AOP Bank Government Body Non-Government Organisation Defence Establishment Body of Individuals Society LLP
Others (Please specify) _____

5. Permanent Account Number (PAN) (MANDATORY) [Grid] Please enclose a duly attested copy of your PAN Card

B. Address Details (please see guidelines overleaf)

1. Address for Correspondence

[Grid for Address for Correspondence]
City / Town / Village [Grid] Postal Code [Grid]
State [Grid] Country [Grid]

2. Contact Details

Tel. (Off.) (ISD) (STD) [Grid] Tel. (Res.) (ISD) (STD) [Grid]
Mobile (ISD) (STD) [Grid] Fax (ISD) (STD) [Grid]
E-Mail Id. [Grid]

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

*Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Bank Account Statement Registered Lease / Sale Agreement of Office Premises
 Any other proof of address document (as listed overleaf). (Please specify) _____

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted [d d / m m / y y y y]

4. Registered Address (If different from above)

[Grid for Registered Address]
City / Town / Village [Grid] Postal Code [Grid]
State [Grid] Country [Grid]

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

*Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Bank Account Statement Registered Lease / Sale Agreement of Office Premises
 Any other proof of address document (as listed overleaf). (Please specify) _____

*Not more than 3 Months old. Validity/Expiry date of proof of address submitted [d d / m m / y y y y]

C. Other Details (please see guidelines overleaf)

1. Name, PAN, DIN/Aadhaar Number, residential address and photographs of Promoters/Partners/Karta/Trustees/whole time directors (Please use the Annexure to fill in the details)

2. Any other information: _____

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we 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.

Place: [Grid]

Date: [Grid]

**NAME & SIGNATURE(S)
OF AUTHORISED
PERSON(S)**

[Grid for Name & Signature of Authorised Person(s)]

FOR OFFICE USE ONLY

AMC/Intermediary name OR code

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Seal/Stamp of the intermediary should contain
Staff Name
Designation
Name of the Organization
Signature
Date