



3. PROOF OF IDENTITY (PoI) (Please refer instruction **C** at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>		
<input type="checkbox"/> C- PAN Card	<input type="text"/>		
<input type="checkbox"/> D- Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar)	<input type="text"/>		
<input type="checkbox"/> F- NREGA Job Card	<input type="text"/>		
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="text"/>	Identification Number	<input type="text"/>

4. PROOF OF ADDRESS (PoA)

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)	Please specify	
	<input type="checkbox"/> Voter Identity Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/> Others	<input type="text"/>	
Address*					
Line 1	<input type="text"/>				
Line 2	<input type="text"/>				
Line 3	<input type="text"/>				State / U.T. Code
City/Town/Village	<input type="text"/>	Pin/Post Code	<input type="text"/>	ISO 3166 Country Code	<input type="text"/>
State	<input type="text"/>	District	<input type="text"/>		

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction **E** at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

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

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction **F** at the end)

Tel. (Off.)	<input type="text"/>	-	<input type="text"/>	Mob.:	<input type="text"/>	Fax	<input type="text"/>
Tel. (Res.)	<input type="text"/>	-	<input type="text"/>	Email	<input type="text"/>		

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction **G** at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

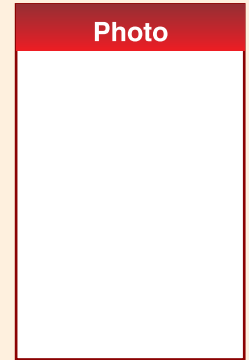
Related Person Type Guardian of Minor Nominee Assignee Authorized Representative Beneficial Owner Beneficiary

Name* (Same as ID proof)



2nd APPLICANT PERSONAL DETAILS (Please refer instruction A at the end)

	(Prefix)	(First Name)	(Middle Name)	(Last Name)
Name* (Same as ID proof) नाव	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any)	<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	Marital Status* <input type="checkbox"/> Married <input type="checkbox"/> Unmarried
Nationality*	<input type="checkbox"/> IN-Indian	<input type="checkbox"/> Other (ISO 3166 Country Code)		
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		
Other Facility*	<input type="checkbox"/> SMS Facility	<input type="checkbox"/> Personalise Facility	<input type="checkbox"/> Email	
	<input type="checkbox"/> Cheque Book	<input type="checkbox"/> Mobile Bkg.	<input type="checkbox"/> Net Bkg.	
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector			
	<input type="checkbox"/> Co-operative sector <input type="checkbox"/> Government sector			
2. Others	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)			
3. Business	<input type="checkbox"/> B-Business (If Tick on Business) Place of incorporation _____			
	Date of Commencement of Business _____ Country of Incorporation _____			



Signature / Thumb Impression

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA
(Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*	<input type="text"/>	Place / City of Birth*	<input type="text"/>
Tax Identification Number or equivalent (If issued by jurisdiction)*	<input type="text"/>	ISO 3166 Country Code of Birth*	<input type="text"/>

3. PROOF OF IDENTITY (PoI) (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>		
<input type="checkbox"/> C- PAN Card	<input type="text"/>		
<input type="checkbox"/> D- Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
<input type="checkbox"/> E- UID (Aadhaar)	<input type="text"/>		
<input type="checkbox"/> F- NREGA Job Card	<input type="text"/>		
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="text"/>	Identification Number	<input type="text"/>



4. PROOF OF ADDRESS (PoA)

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **D** at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar) Please specify

Voter Identity Card NREGA Job Card Others

Address*

Line 1

Line 2

Line 3 State / U.T. Code

City/Town/Village Pin/Post Code ISO 3166 Country Code

State District

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction **E** at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Address*

Line 1

Line 2

Line 3 State / U.T. Code

City/Town/Village Pin/Post Code ISO 3166 Country Code

State District

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction **F** at the end)

Tel. (Off.) - Mob.: Fax

Tel. (Res.) - Email

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction **G** at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type Guardian of Minor Nominee Assignee Authorized Representative Beneficial Owner Beneficiary

Name* (Same as ID proof)



10. ATTESTATION / FOR OFFICE USE ONLY

Documents Received* Self-certified True Copies Notary

Risk Category High Medium Low

IN PERSON VERIFICATION CARRIED OUT BY

Identity Verification Done Date :

Emp. Name*

Emp. Code*

Emp. Designation*

Emp. Branch*

(Br. Manager Signature) Stamp

IN PERSON VERIFICATION CARRIED OUT BY

Name

Code

Organisation Name*

Organisation Code*

(Branch Address) Stamp

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

General Instructions:

- Fields marked with "*" are mandatory fields.
- Tick '✓' wherever applicable.
- Self-Certification of documents is mandatory.
- Please fill the form in English and in BLOCK Letters.
- Please fill all dates in DD-MM-YYYY format.
- Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country codes respectively list of which is available at the end.
- KYC number of applicant is mandatory for updation of KYC details.
- For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.
- In case of 'Small Account Type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling 'Personal Details' section

- Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

- Jurisdiction(s) of Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
- Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/Insurance number, citizen/personal identification/services code/number, and resident registration number)

C Clarification / Guidelines on filling 'Proof of Address [PoA]' section

- If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- Mention identification / reference number if 'Z-Others (any document notified by the central government)' is ticked.

D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

- PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- State / U.T. Code and Pin / Post Code will not be mandatory for Overseas addresses.

E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

F Clarification / Guidelines on filling 'Contact details' section

- Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- Do not add '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Related Person details' section

- Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details – Proof of Identity [PoI] of Related Person' section

- In case of nominees, proof of identity is not required.
- Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked