

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____ PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph

Place for Intermediary Logo



Name & Signature of the Authorised Signatory(ies) Date [d] [d] / [m] [m] / [y] [y] [y] [y]

Know Your Client (KYC) : Application Form (For Individuals Only)

PART -2 OF KYC Account Opening Form (For Individuals Only)

Please fill in ENGLISH and in BLOCK LETTERS

C Other Details (please see guidelines overleaf)	
1 Gross Annual Income Details (Please tick (✓))	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> > 25 Lacs
OR	
Net-worth in Rs. _____	as on (date) <u> D D / M M / Y Y Y Y </u>
(*Net worth should not be older than 1 year)	
2 Occupation (Please tick (✓) any one and give brief details):	
<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired
<input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others (Please specify) _____
3 Please tick , if applicable	<input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person
For definition of PEP, please refer guideline overleaf	

SIGNATURE OF APPLICANT



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Please fill in ENGLISH and in BLOCK LETTERS

C Other Details	
1 Gross Annual Income Details (Please tick (✓))	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> 25 Lacs - 1Crore <input type="checkbox"/> > 1 Crore
2 Net-worth in Rs. _____	as on (date) <u> D D / M M / Y Y Y Y </u>
(*Net worth should not be older than 1 year)	
3 Is the entity involved/providing any of the following services	<input type="checkbox"/> YES <input type="checkbox"/> NO
For Foreign Exchange / Money Changer Services	<input type="checkbox"/> YES <input type="checkbox"/> NO
Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Money Lending / Pawning	<input type="checkbox"/> YES <input type="checkbox"/> NO

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

