

Client code allotted: _____



CHURIWALA SECURITIES PVT LTD

Central KYC Registry | Know Your Customer(KYC) Application | Individual & Non-Individual

CDSL DP Id: 12500

BSE Member Id: 209 | NSE Member Id: 06487 | MCX Member Id: Clearing

Member: | UCC ID:

SEBI REGN NO.: INZ000216630 | CIN: U67120MH1997PTC110866 DP SEBI REGN NO.: IN- DP- CDSL 24- 99 Broking SEBI REGN NO.: INZ000216630

CLIENT REGISTRATION KIT

REGISTRATION DATE	
NAME OF CLIENT	

Registered Office:

1007, The Chambers, 10th Floor
Kohinoor Square, Gadkari Chowk Dadar(W), MUMBAI, MAHARASHTRA, 400028, Phone: 022- 35116008

Compliance Officer: Alok Chauthmal Churiwala, Phone: 022- 35116008,

Email: churiwala_sec@yahoo.co.in CEO/MD: ALOK CHURIWALA, Phone: 022- 35116008,

Email: alokgbc@gmail.com

Corporate Office:

1007, The Chambers, 10th Floor
Kohinoor Square, Gadkari Chowk Dadar(W), N.C. Kelkar Road, MUMBAI 400028

www.c- sec.com

For any grievance / disputes please contact **CHURIWALA SECURITIES PVT LTD** at the above address/ Email/Phone. Grievance Email: **tbse@c- sec.com**

In case not satisfied with the response, please contact the concerned exchanges.

Exchange	Phone No.	Fax No.	Email Id	Website
Multi Commodity Exchange of India Ltd. (MCX)	(022) 6731 8888	(022) 6649 4151	grievance@mcxindia.com	www.mcxindia.com
National Stock Exchange of India Ltd. (NSE)	(022) 2659 8100	(022) 2659 8120	ignse@nse.co.in	www.nseindia.com
BSE Ltd. (BSE)	(022) 2272 1234	(022) 2272 1003	is@bseindia.com	www.bseindia.com
Central Depository Services (India) Ltd. (CDSL)	(022) 2272 3333	(022) 2301 2688	complaints@cdslindia.com	www.cdslindia.com

You can file your complaints online at <https://scores.sebi.gov.in> or alternately send your complaints to Office of Investor Assistance and Education of SEBI at Mumbai or Regional Offices:

For more information visit our website - <https://scores.sebi.gov.in/>

Filing of complaints on SCORES – Easy & quick

- Register on SCORES portal
- Mandatory details for filing complaints on SCORES: Name, PAN, Address, Mobile Number, Email ID
- Benefits
 - Effective communication
 - Speedy redressal of the grievances

SCORES website: <https://scores.sebi.gov.in/>

INDEX OF DOCUMENTS

S. No.	Name of the Document	Brief Significance of the Document	Page No	
1	Primary Details	Basic customer information - Personal information, Contact Details, Photograph, Identity Details	Mandatory	
MANDATORY & VOLUNTARY DOCUMENTS AS PRESCRIBED BY SEBI, EXCHANGES & Depositories				
2	Trading Account related details & Additional KYC Forms	Document captures the additional information (over and above what is provided in KRA form) about the constituent relevant to trading account and an instruction/check list.	Mandatory	1-3
3	Most Important Terms and Conditions (MITC)	Document brings into focus the critical aspects of the broker client relationship.	Voluntary	4
4	Running account authorization	Document of Authority by client to the Member to maintain a running ledger account	Voluntary	5-6
5	Brokerage & Letter for standing Instructions	Document brings into focus the critical aspects of the broker client relationship.	Mandatory	7
6	Demat Account related details & Additional KYC Forms	Document captures the additional information (over and above what is provided in KRA form) about the constituent relevant to Demat account and an instruction/check list.	Mandatory	8-10
7	Nomination Form	Document captures details of nominees in case of death of Beneficial owners (BOs).	Mandatory	11-14
8	Consent Letter for same Email Id & Mobile No., Consent for CKYC Download	Document captures the additional information for trading account and demat account of clients.	Voluntary	15 -16
9	Tariff sheet	Document detailing Demat charges levied on the clients.	Mandatory	17
10	DDPI	Documents for Demat account	Voluntary	18-20
11	DP SMS alert form, DIS Booklet & Right & obligation,	Documents for trading account & Demat account	Mandatory	21-28
12	Acknowledgement Receipt	Acknowledgement Receipt given by clients/Bos acknowledging receipt of copies of full KYC documents.	Voluntary	29
13	FATCA FORM	INDIVIDIAL / NON INDIVIDUAL FATCA FORM	Voluntary	30-31
14	DO & DON'T'S	DEMAT ACCOUNT DO & DON'T'S	Mandatory	32-34
15	Policy and process towards facility for Voluntary freezing of online access	Document brings into focus the critical aspects of the broker client relationship	Mandatory	35
16	Disclosure Information for Pro-Trading	Disclosure Information for Proprietary Trading/ Business (Pro Trading)	Mandatory	36

For Office use only
UCC Code allotted to the Client:

	Documents verified with Originals	Client Interviewed By	In-Person Verification done by
Name of the Employee			
Employee Code			
Designation of the employee			
Date			
Signature			

CHURIWALA SECURITIES PVT. LTD.

Trading Account Related Details for Individuals & Non-individuals

A. Bank Account Details

Bank Name:	MICR No.:	
Branch/Address:	IFSC Code:	
Type of Account: Current/Savings/Others	Account No.	

B. Depository Account Details : NSDL/CDSL

DP Name	DP ID
Beneficiary Name	Beneficiary ID (BO ID)

C. TRADING PREFERENCES :

Please sign in the relevant boxes where you wish to trade. Please strike off the segment not chosen by you.

Exchanges	NSE, BSE & MSEI				MCX, NCDEX, BSE & NSE
All Segments	Cash / Mutual Fund	F&O	Currency	Debt	Commodity Derivatives

If you do not wish to trade in any of segments / Mutual Fund, please mention here _____.

D. Past Actions

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years:

E. Dealings Through Authorized person (AP) and Other Stock Brokers

If client is dealing through the Remiser/ Authorized Participant (AP), provide the following details:

Name	SEBI/Exchange No.
Address:	
Phone/Fax	Website

Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers/sub- brokers, provide details of all)

Name of Stock Broker	
Name of Authorized Person	
Client Code	Exchange
Details of disputes/dues pending from/to such stock broker/Authorized Person	

F. Other Details

Gross Annual Income:(Please tick)	Below Rs.1 Lakh	1- 5 Lakhs	5–10 Lakhs	10–25 Lac	> 25 Lakhs	
Networth In Rs.	as on (date)					
Occupation (Please tick)	Professional	Student	Govt. Service	Business	Private Service sector	House wife
	Agriculturist	Retired	Public sector	Forex Dealer	Others (Please specify)	
Please tick, if applicable	Politically Exposed Person		Related to Politically Exposed Person			
Any other information						

AUTHORISATION FOR ELECTRONIC CONTRACT NOTE

To,
The Officer-in-charge,
Churiwala Sec.Pvt. Ltd.
Dadar (w) Mumbai - 28

Date:

Dear Sir/ Madam,

Sub.: Authorization for Electronic Contract Note (ECN) & other documents

With reference to Client Registration documents executed between us, I/We hereby authorized you to do the following:

I/We have been/shall be dealing through you as my/our broker on the Capital Markets and/or Future and Option Segments. As my / our broker i.e. agent I / We direct and authorize you to carry out trading / dealings on my/our behalf as per instructions given below.

I/We understand that, I/we have the option to receive the contract notes, bills, margin calls, Client Margin information, Statement of Accounts/Ledger and Security Balance Confirmation in physical form or electronic form. In pursuance of the same, I/we hereby opt for receipt of contract notes, bills, margin calls, Client Margin Information, Statement of Accounts/Ledger and Security Balance Confirmation in electronic form. I/ We understand that for the above purpose, you are required to take from the client "an appropriate email account" for you to send electronic contract notes. Accordingly, please take below mentioned email account/mobile No. on your record for sending the contract notes and other documents to me / us.

E-mail Id	
Mobile No.	

I / We agree not to hold you responsible for late / non – receipt of contract notes, bills, margins calls, Client Margin information, Statement of Accounts / Ledger and Security Balance Confirmation sent in electronic form and any other communication for any reason including but not limited to failure of email server, loss of connectivity, email in transit, etc. I / we agree that the log reports of your dispatching software shall be a proof of dispatch of contract notes, bills, margin calls, Client margin information, Statement of Accounts, Ledger and Security Balance Confirmation to me / us.

I/We also agree that non-receipt of bounced mail notification by you shall amount to delivery at my email account(s)/email id(s). In case of bounce mail, physical copy of the document will be provided to me.

I/We understand that I/we am/are required to intimate any change in the email id/email account mentioned hereinabove needs to be communicated by me/us through a physical letter to you, provided however that if I/we am/are an internet client then in that event the request for change in email id/email account can be made by me/us through a secured access using client specific user id and password. Please treat this authorization as written ratification of my/our verbal directions/ authorizations given and carried out by you earlier. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above.

Client Code	Name of the Client	Signature of Client

[Note: To be signed by client himself / herself and not by his / her attorney / authorized person, etc.]

In case above mentioned Mobile no. or E-mail ID is already updated with another Trading Account with us, then please provide below mentioned details:

Client Code	Relation	Client Code	Relation	Client Code	Relation

Most Important Terms and Conditions (MITC)

(For non-custodial settled trading accounts)

1. Your trading account has a “Unique Client Code” (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/ mobile trading login credentials with anyone else.
2. You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
3. The stock broker’s Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
4. All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
5. The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
6. You will get a contract note from the stock broker within 24 hours of the trade.
7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
8. The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, Networth, etc.) with the stock broker as and when requested for. Kindly also keep your email Id and mobile phone details with the stock broker always updated.
9. In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
10. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.

X

Signature of Client(s)

CHURIWALA SECURITIES PVT.LTD.
RUNNINGACCOUNTAUTHORISATION

To,
Churiwala Securities Pvt.Ltd,
1007,The Chambers, 10TH Flr.
Kohinoor Square, N.C.Kelkar
Road ,Dadar (W),
Mumbai – 400 028

Dear Sir,

I/We am/are dealing through you as a client in Cash/Derivative in BSE/NSE/SLBM and in order to facilitate ease of operation and upfront requirement of margin for trade as per SEBI & Exchange Circular:

I/We authorize Churiwala Securities Private Limited through this Authorization letters as under:

1. I/We hereby give my/our consent to maintain a running balance in my account and retain credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) of any segment(s) of any or all the Exchange(s)/Clearing corporation unless/I/We instruct /revoke you otherwise.
2. I/We have read the circular and request you to settle my fund and securities account as below:(choose one option)
 - Monthly
 - Quarterly
3. As per SEBI Circular No. SEBI/HO/MIRSD/DOP/P/CIR/2022/101 dated July 27,2022 and NSE FAQ vide Ref: NSE/INSP/53820 dated September 23, 2022, the settlement of running account of funds of the client shall be done by the trading member after considering the End of the day (EOD) obligation of funds as on the date of settlement across all the Exchange on first Friday/ Saturday of the Quarter for all the clients i.e. the running account of funds shall be settled on first Friday/ Saturday. If first Friday is a trading holiday, then such settlement shall happen on the previous trading day. For clients, who have opted for Monthly settlement, running account shall be settled on first Friday/ Saturday of each month. If first Friday is a trading holiday, then such settlement shall happen on the previous trading day.
4. As per SEBI Circular No. SEBI/HO/MIRSD/MIRSD-PoD1/P/CIR/2025/1 dated January 06, 2025 regarding Settlement of Account of Clients who have not traded in the last 30 days. For the clients having credit balance, who have not done any transaction in the 30 calendar days since the last transaction and any amount of such client's funds is lying with member for more than such 30 calendar days, the entire credit balance of client shall be returned to the client by TM, on the upcoming settlement dates of monthly running account settlement cycle (irrespective of settlement cycle preferred by the client) as stipulated by stock exchanges. However, if the client trades after 30 calendar days and before aforesaid upcoming settlement dates of monthly running account settlement cycle, the settlement of account of client shall continue to be done by the Trading member as per the preference of quarterly/ monthly as indicated by the client for running account settlement.
5. In cash of my/our outstanding trade position on First Friday of the Month/Quarter on which settlement of running account of funds is scheduled, a Churiwala Securities Pvt.Ltd. may retain funds in the manner specified below:

Client Sign X

- I. Entire pay-in obligation of funds outstanding at the end of day (EOD) on date of settlement, across all segment.
- II. 50% of end of the day (EOD) margin requirement as cash margin, excluding the margin on consolidated crystallized obligation/MTM.
- III. Apart from above, 225% of EOD margin (which include additional 125% margin) reduced by 50% cash margin and the value of securities (after applying appropriate haircut) accepted as collateral from the client by way of 'margin pledge' created in the Depository system for the purpose of

margin (after applying appropriate haircut). The margin on consolidated crystallized obligation/MTM. The margin liability may also include the margin collected as per the risk management policy.

- 6. I/We confirm you that I/We shall to your notice, any dispute arising from the statement of account or settlement so made, in writing preferably within 7 working days from the date of receipt of funds or statement of account or statement related to it, as the case may be at registered office.
- 7. I/We confirm that the above mentioned authorization shall continue until it is revoke by me/us. I/We confirm having read the above circular and this running account authorization.

Client Code _____

BO ID _____

X
Signature of Client _____

CHURIWALA SECURITIES PVT.LTD.

A. Brokerages (TRADING)

Segment			Minimum Rs.	Percentage
Capital market	Trading	1 st side		
		2 nd side		
	Delivery			
	Trade to trade			
F & O	Futures	1 st side		
		2 nd side (same day)		
		2 nd side (any day)		
	Delivery			
	Options	1 st side		
		2 nd side (same day)		
2 nd side (any day)				
Currency	Futures	1 st side		
		2 nd side (same day)		
		2 nd side (any day)		
	Options	1 st side		
		2 nd side (same day)		
		2 nd side (any day)		

B: Statutory Levies:

Type	Basis	Rate
GST	On brokerage	At actual
Security Transaction tax	On turnover	At actual
Stamp duty	On turnover	At actual
SEBI fees	On turnover	At actual

C: Other charges:

Cheque return charges	At actual
Penalty/charges levied by Exchange/SEBI	At actual

X
Signature of Client(s)

CHURIWALA SECURITIES PVT LTD

Depository Participant – Id: 12012500

DP SEBI Reg. No.:IN-DP-CDSL-24-99

CDSL

Additional KYC Form for Opening Demat Account (Common)



(To be filled by the Depository Participant)

Application No.		Date	
DP Internal Reference No.			
DP ID	1 2 0 1 2 5 0 0	Client ID	

(To be filled by the applicant in block letters in English)

I / We request you to open a Demat Account in my / our name as per the following details: -

Sole/First Holder	UCC	Exchange	PAN	
	Email		UID	
			Mobile	
Second Holder	UCC	Exchange	PAN	
	Email		UID	
			Mobile	
Third Holder	UCC	Exchange	PAN	
	Email		UID	
			Mobile	
Guardian name (in case of minor)			PAN	
			UID	
Relationship with applicant				

Name	
<p>In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.</p>	

Type of Account in case of Individual (Please tick whichever is applicable)

Status	Sub – Status	
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Minor	<input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Individual Margin Trading <input type="checkbox"/> Others
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non – Repatriable <input type="checkbox"/> NRI – Depository Receipts	
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts	

Type of Account in case of Non Individual (Please tick whichever is applicable)

Status		Sub – Status	
<input type="checkbox"/> Body Corporate <input type="checkbox"/> Banks <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> OCB <input type="checkbox"/> FII <input type="checkbox"/> CM <input type="checkbox"/> FI <input type="checkbox"/> Clearing House <input type="checkbox"/> Other (Specify)		To be filled by the DP	
SEBI Registration No. (if applicable)		SEBI Registration Date	
RBI Registration No. (if applicable)		RBI Approval Date	
Nationality	<input type="checkbox"/> Indian	<input type="checkbox"/> Others (Specify)	

X Client Sign

Bank Details (Dividend Bank Details)

Do you wish to receive dividend / interest directly in to your bank account given below through ECS?						<input type="checkbox"/> Yes <input type="checkbox"/> No			
Bank Code (9 digit MICR code)									
Bank Name									
Branch									
Bank Address									
City		State		PN					
Account number									
Account type	<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Cash Credit								

Other Details:

Gross Annual Income : (Please tick)	<input type="checkbox"/> Below Rs.1 Lakh	<input type="checkbox"/> 1- 5 Lakhs	<input type="checkbox"/> 5-10 Lakhs	<input type="checkbox"/> 10-25 Lac	<input type="checkbox"/> > 25 Lakhs	
Net worth In Rs.	as on (date)					
Occupation (Please tick)	<input type="checkbox"/> Professional	<input type="checkbox"/> Student	<input type="checkbox"/> Govt. Service	<input type="checkbox"/> Business	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> House Wife
	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Private sector	<input type="checkbox"/> Public sector	<input type="checkbox"/> Others (specify)	
Please tick, if applicable		Politically Exposed Person		Related to Politically Exposed Person		
Any other information						

Additional Details

Account Statement	<input type="checkbox"/> As per SEBI Regulations <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly				
I / We instruct the DP to receive each and every credit in my / our account in accordance with regulation 42 (B) of SEBI (D&P) regulation.					<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We request you to send Electronic Transaction-cum-Holding Statement at the email ID _____					<input type="checkbox"/> Yes <input type="checkbox"/> No
I / We would like to share the email ID with the RTA					<input type="checkbox"/> Yes <input type="checkbox"/> No
I/We would like to receive the Annual Report <input type="checkbox"/> Both Physical and Electronic <input type="checkbox"/> Electronic <input type="checkbox"/> Physical (Tick the applicable box. If not marked the default option would be in Physical)					
I/We would like to opt for <input type="checkbox"/> Full service BO account <input type="checkbox"/> BSDA account					

SMS Alert Facility	<input type="checkbox"/> Yes MOBILE NO. +91 Refer to Terms & Conditions given as Annexure	<input type="checkbox"/> No
Email Alert Facility	<input type="checkbox"/> Yes Email Id: Refer to Terms & Conditions given as Annexure	<input type="checkbox"/> No
<i>easi</i>	<input type="checkbox"/> Yes. If yes, please contact your DP for details [Facility through CDSL's website: www.cdslindia.com wherein a BO can view his ISIN balances, transactions and value of the portfolio online.]	<input type="checkbox"/> No

	Name	Relationship
Above Mobile number belongs to		
Above Email number belongs to		

Mode of Operation for Execution of Transactions (Transfer, Pledge & Freeze)	Consent for Communication to be received by First account holder/All account holder
<input type="checkbox"/> Jointly <input type="checkbox"/> Anyone of the Holder	<input type="checkbox"/> 1 st Holder (Default, if not marked) <input type="checkbox"/> All Holders

Holder	Email ID
Second Holder	
Third Holder	

For NRIs

Foreign Address											
City					State						
Country					PIN						
RBI Ref no.					RBI Approval date						

Clearing Members Details (To be filled by CMs only)

Name of the Stock Exchange											
Name of the CC / CH											
Trading Id											
Clearing Member ID											

I/We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Holder or Guardian (in case of Minor)	Second Joint Holder	Third Joint Holder
Name			
Designation			
Signatures			

(Signatures should be preferably in black ink)

Additional information for OCBs

Foreign Address											
City					State						
Country					PIN						
Telephone No.					Fax						
E-mail ID											
Indian Address											
City					State						
Country					PIN						
Telephone No.					Fax						
E-mail ID											
Currency											
RBI Reference No.					RBI Approval Date						

Client Sign X

CHURIWALA SECURITIES PVT LTD

(DP ID 12012500)

1007/10 Kohinoor Square, Central Tower, N.C.Kelkar Road, Dadar (W) , Mum- 400028

Phone :022- 35116007/ 35116008

NOMINATION FORM

Depository Participant Name / Address

Application no		Date																	
----------------	--	------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please fill all the details in Block Letters in English

DP ID	1	2	0	1	2	5	0	0	CLIENT ID										
-------	---	---	---	---	---	---	---	---	-----------	--	--	--	--	--	--	--	--	--	--

Account holder's details	
Name of the First/Sole Holder	
Name of the second holder	
Name of the third holder	

Annexure - A

Nomination Form for Demat Accounts

I / We hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our demise, as trustee and on behalf of my / our legal heir(s) *

Nomination Details								
	Mandatory Details						Additional Details ****	
	Name of nominee	Share of nominee (%)**	Relation ship	Postal Address	Mobile number & E-mail	Identity Number ***	D.o.B. of nominee	Guardian
Nominee 1								
Nominee 2								
Nominee 3								
Nominee 4								
Nominee 5								
Nominee 6								
Nominee 7								
Nominee 8								
Nominee 9								
Nominee 10								

*Joint Accounts:

Event	Transmission of Account
Demise of one or more joint holder(s)	Surviving holder(s) through name deletion The surviving holder(s) shall inherit the assets as owners.
Demise of all joint holders simultaneously – having nominee	Nominee
Demise of all joint holders simultaneously – not having nominee	Legal heir(s) of the youngest holder

** If % is not specified, then the assets shall be distributed equally among all the nominees. Any odd lot after division/ fraction of %, shall be transferred to the first nominee mentioned in the nomination form. (see table in 'Transmission aspects').

*** Provide only number: PAN or Driving License or Aadhaar (last 4 digits). Copy of the document is not required. However, in case of NRI / OCI / PIO, Passport number is acceptable.

**** to be furnished only in following conditions / circumstances:

- Date of Birth (DoB): please provide, only if the nominee is minor.
- Guardian: It is optional for you to provide, if the nominee is minor.

1) I / We want the details of my / our nominee to be printed in the statement of holding or statement of account, provided to me / us by the DP as follows; (please tick, as appropriate)

- Name of nominee(s)
- Nomination: Yes / No

2) I hereby authorize _____ (nominee number ____) to operate my account on my behalf, in case of my incapacitation in terms of paragraph 3.5 of the circular. He / She is authorized to encash my assets up to _____ % of assets in the account or Rs. _____.

(Optional) (strike off portions that are not relevant) This nomination shall supersede any prior nomination made by me / us, if any.

3) Signature(s) – As per the mode of holding in demat account(s)

Name(s) of holder(s)	Signature(s) of holder / thumb impression	Signature of two witnesses*	Name of Witness & Address (wherever applicable)*
Sole / First Holder (Mr./Ms.)	X		
Second Holder (Mr./Ms.)	X		
Third Holder (Mr./Ms.)			

* Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

Rights, Entitlement and Obligation of the investor and nominee:

- If you are opening a new demat account, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 of this circular.
- You can make nomination or change nominee any number of times without any restriction.

- You are entitled to receive acknowledgement from the DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account.
- In case all your nominees do not claim the assets from the DP, then the residual unclaimed asset shall continue to be with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account, in case of your physical incapacitation, at any point of time and not just during opening of account. This mandate can be changed any time you choose.
- The signatories for this nomination form shall be as per mode of holding in the demat account(s) i.e.
 - 'Either or Survivor' Accounts - any one of the holder can sign
 - 'First holder' Accounts - only First holder can sign
 - 'Jointly' Accounts - all holders have to sign

Transmission aspects

- DPs shall transmit the account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nominee is not required to provide affidavits, indemnities, undertakings, attestations or notarization.
- In case of a joint account, for transmission to the surviving joint holder(s) by name deletion, the surviving joint holder(s) shall have the option to update residential address(es), mobile number(s), email address(es), bank account detail(s), annual income and nominee(s), either along with transmission or at a later date. The regulated entity cannot seek KYC documents at the time of transmission, unless it was sought earlier but not provided by the holder.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the DP.

In case of multiple nominees, the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% Share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	% share	Nominee	% initial share	% of A's share to be apportioned	Total % share
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	100%	-	40%	60%	100%

Declaration for opting-out of nomination

Annexure-B

Depository Participant Name / Address

Application no		Date								
----------------	--	------	--	--	--	--	--	--	--	--

Please fill all the details in Block Letters in English

DP ID	1	2	0	1	2	5	0	0	CLIENT ID							
-------	---	---	---	---	---	---	---	---	-----------	--	--	--	--	--	--	--

Account holder's details	
Name of the First/Sole Holder	
Name of the second holder	
Name of the third holder	

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio/demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents/information for claiming of assets held in my/our MF Folio / demat account, which may also include documents issued by Court or other such competent authority, based on the value of asset held in the MF Folio/demat account.

Name and Signature of Holder(s)*

1.X _____ 2.X _____ 3X _____

*Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature.

Consent letter for same email id & mobile number

To,

CHURIWALA SECURITIES PVT LTD

1007, Kohinoor Square, The Chambers, N.C.Kelkar Road, Dadar (w), Mum- 28

BO ID	1	2	0	1	2	5	0	0									
--------------	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--

Client Code	
--------------------	--

Sole / First Holders Name	
Second Holders Name	
Third Holders Name	

1) First Holder Email ID _____

Email ID Belonging to: Self Spouse Dependent Children Dependent Parents

The Mobile number is registered in the Name of: _____

Mob no Belonging to: Self Spouse Dependent Children Dependent Parents

Mobile Number on which massages are to be sent First Holder																	
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2) Second Holder Email ID _____

Email ID Belonging to: Self Spouse Dependent Children Dependent Parents

The Mobile number is registered in the Name of: _____

Mob No. Belonging to: Self Spouse Dependent Children Dependent Parents

Mobile Number on which massages are to be sent Second Holder																	
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3) Third Holder Email ID _____

Email ID Belonging to: Self Spous Dependent Childre Dependent Parents

The Mobile number is registered in the Name of: _____

Mob No. belonging to: Self Spouse Dependent Children Dependent Parents

Mobile Number on which massages are to be sent Second Holder																	
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Please write only **ONE** valid email ID on which communication, if any is to be sent)

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature			

Date:

Place:

To,
CHURIWALA SECURITIES PVT LTD
DADAR (W) Mumbai – 400 028

Consent Form

Dear Sir/Madam

I/ We 1) _____ S/o / D/o / W/o

2) _____ S/o / D/o / W/o

3) _____ S/o D/o W/o

Give my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry.

I/ We understand that my KYC Record includes my KYC Records /Personal information such as my name, address, date of birth, PAN number etc.

	Sole / First Holder	Second Holder	Third Holder
Name			
Signature			

First Holder UCC code : _____

DP ID : _____

CHURIWALA SECURITIES PVT LTD

DP ID 12012500

Regd office : 1007, The Chambers , 10th Floor, Kohinoor Square R.G.Gadkari Chowk, Dadar (w),
Mumbai – 400 028

DEMAT DEBIT AND PLEDGE INSTRUCTIONS (DDPI)

TO ALL TO WHOM THESE PRESENTS SHALL COME I/WE MR./MRS./M/S.

(First Holder) _____,

(Jointly with Second Holder) _____,

(Third Holder) _____,

Having his/her/its residence/registered office/place of business at

Whereas I/ we hold Beneficial Owner Account Number 12012500 _____ with Central Depository Services (India) Limited (CDSL), through **Churiwala Securities Pvt. Ltd** a SEBI registered Depository Participant (hereinafter referred to as “DP”) bearing registration no. **IN-DP-CDSL-24-99** having its registered office address at , 1007, The Chambers, 10th Floor, Kohinoor Square, R.G.Gadkari Chowk, Dadar (W) Mumbai – 400 028.

And Whereas I/ we am/ are desirous to buy and sell /deal in securities through **Churiwala Securities Pvt. Ltd**, a SEBI Registered Stock Broker (hereinafter referred to as the “Stock Broker”) bearing SEBI Registration No. **INZ000216630** having its registered office address at 1007, The Chambers, 10th Floor, Kohinoor Square, R.G.Gadkari Chowk, Dadar (W) Mumbai – 400 028.

I/We, the Account Holder/ Joint Account Holders do hereby give the following Instructions to **Churiwala Securities Pvt. Ltd** as follows:

S.No.	Purpose	Signature of Client *
1.	Transfer of securities held in my/our beneficial owner accounts towards Stock Exchange related deliveries / settlement obligations arising out of trades done by me/us on the Stock Exchange through the same stock broker	First Holder _____ Second Holder _____ Third Holder _____
2.	Pledging / re-pledging of securities in favour of trading member (TM) / clearing member (CM)/Clearing Corporation for the purpose of meeting margin requirements in connection with my/our trades done by me/us on the Stock Exchanges.	First Holder _____ Second Holder _____ Third Holder _____

(1) V
(Sole/First Holder)

(2) V
(Second Joint)

(3) V
(Third Joint)

3.	Mutual Fund transactions being executed on Stock Exchange order entry platforms	First Holder _____ Second Holder _____ Third Holder _____
4.	Tendering shares in open offers/Buy back through Stock Exchange platforms	First Holder _____ Second Holder _____ Third Holder _____

I/We hereby covenant, ratify and confirm that all acts done by this DDPI has been made done and executed in good faith and shall for all purpose be valid and binding on me/us. I/ we undertake to indemnify the Stock Broker/DP against all actions proceedings claims, costs, expenses and liabilities of every description arising from the exercise or the purported exercise in good faith, of any powers conferred by this DDPI.

I/We further agree and confirm that the powers and authorities conferred by this DDPI shall continue until it is revoked in writing by me/us and that the said revocation shall be effective from the date on which the revocation notice is received by any person authorised in this regard by the Stock Broker in its office at, 1007, The Chambers, 10th Floor, Kohinoor Square, R.G.Gadkari Chowk, Dadar (W) Mumbai – 400 028.

However, such revocation shall not be applicable for any outstanding settlement obligation of funds/ securities arising out of the trades carried prior to receiving request for revocation of this DDPI

List of the Stock Broker Designated Demat Account:

SR.NO.	NAME OF THE ACCOUNTHOLDER	DEMAT A/C NO.	CM BP ID	CM ID	DP NAME	PURPOSE
1	CHURIWALA SECURITIE PVT. LTD POOL ACCOUNT	120125000000811	12012500	209	CHURIWALA SECURITIES PVT.LTD.	CDSL POOL ACCOUNT (BSE)
2	CHURIWALA SECURITIES PVT LTD.	1201250000024541	12012500	209	CHURIWLA SECURITIES PVT. LTD.	CUSPA ACCOUNT
3	CHURIWALA SECURITIES PVT LTD	IN300020-10023740	IN602093	209	PUNJAB NATIONAL BANK	NSDL POOL ACCOUNT (BSE)
4	CHURIWALA SECURITIES PVT LTD.C M P A	1201250000023550	12012500	209	CHURIWALA SECURITIES PVT LTD	CLIENT MARGIN PLEDGE ACCOUNT (CMPA)

List of the Stock Broker Designated Demat Account:

SR.NO.	NAME OF THE ACCOUNTHOLDER	DEMAT A/C NO.	CM BP ID	CM ID	DP NAME	PURPOSE
5	CHURIWALA SECURITIES PRIVATE LIMITED	IN300749- 11209691	IN594020	M50203	BOI SERVICES LIMITED	NSDL POOL ACCOUNT(NSE)
6	CHURIWALA SECURITIES PRIVATE LIMITED	1201250000025218	12012500	M50203	CHURIWALA SECURITIES PRIVATE LIMITED	CDSL POOL ACCOUNT (NSE)

Dated this _____ day of _____ 20 _____

SIGNED AND DELIVERED BY the within named Beneficial Owner(s)

	First Holder	Second Joint Holder	Third Joint Holder
Name			
Signature			

Applicable only in case of HUF –

For HUF (Name of Co-parceners)	Signature of Co-parceners
1.	
2.	
3.	
4.	

In the presence of	Witness 1	Witness 2
Name & Address		
Signature		

Terms And Conditions-cum-Registration / Modification Form for receiving SMS Alerts from CDSL

[SMS Alerts will be sent by CDSL to BOs for all debits]

Definitions:

In these Terms and Conditions the terms shall have following meaning unless indicated otherwise:

1. "Depository" means Central Depository Services (India) Limited a company incorporated in India under the Companies Act 1956 and having its registered office at 17th Floor, P.J. Towers, Dalal Street, Fort, Mumbai 400001 and all its branch offices and includes its successors and assigns.
2. 'DP' means Depository Participant of CDSL. The term covers all types of DPs who are allowed to open demat accounts for investors.
3. 'BO' means an entity that has opened a demat account with the depository. The term covers all types of demat accounts, which can be opened with a depository as specified by the depository from time to time.
4. SMS means "Short Messaging Service"
5. "Alerts" means a customized SMS sent to the BO over the said mobile phone number.
6. "Service Provider" means a cellular service provider(s) with whom the depository has entered / will be entering into an arrangement for providing the SMS alerts to the BO.
7. "Service" means the service of providing SMS alerts to the BO on best effort basis as per these terms and conditions.

Availability:

1. The service will be provided to the BO at his / her request and at the discretion of the depository. The service will be available to those accountholders who have provided their mobile numbers to the depository through their DP. The services may be discontinued for a specific period / indefinite period, with or without issuing any prior notice for the purpose of security reasons or system maintenance or for such other reasons as may be warranted. The depository may also discontinue the service at any time without giving prior notice for any reason whatsoever.
2. The service is currently available to the BOs who are residing in India.
3. The alerts will be provided to the BOs only if they remain within the range of the service provider's service area or within the range forming part of the roaming network of the service provider.
4. In case of joint accounts and non-individual accounts the service will be available, only to one mobile number i.e. to the mobile number as submitted at the time of registration / modification.
5. The BO is responsible for promptly intimating to the depository in the prescribed manner any change in mobile number, or loss of handset, on which the BO wants to receive the alerts from the depository. In case of change in mobile number not intimated to the depository, the SMS alerts will continue to be sent to the last registered mobile phone number. The BO agrees to indemnify the depository for any loss or damage suffered by it on account of SMS alerts sent on such mobile number.

Receiving Alerts:

1. The depository shall send the alerts to the mobile phone number provided by the BO while registering for the service or to any such number replaced and informed by the BO from time to time. Upon such registration / change, the depository shall make every effort to update the change in mobile number within a reasonable period of time. The depository shall not be responsible for any event of delay or loss of message in this regard.
2. The BO acknowledges that the alerts will be received only if the mobile phone is in 'ON' and in a mode to receive the SMS. If the mobile phone is in 'Off' mode i.e. unable to receive the alerts then the BO may not get / get after delay any alerts sent during such period.

3. The BO also acknowledges that the readability, accuracy and timeliness of providing the service depend on many factors including the infrastructure, connectivity of the service provider. The depository shall not be responsible for any non-delivery, delayed delivery or distortion of the alert in any way whatsoever.
4. The BO further acknowledges that the service provided to him is an additional facility provided for his convenience and is susceptible to error, omission and/ or inaccuracy. In case the BO observes any error in the information provided in the alert, the BO shall inform the depository and/ or the DP immediately in writing and the depository will make best possible efforts to rectify the error as early as possible. The BO shall not hold the depository liable for any loss, damages, etc. that may be incurred/ suffered by the BO on account of opting to avail SMS alerts facility.
5. The BO authorizes the depository to send any message such as promotional, greeting or any other message that the depository may consider appropriate, to the BO. The BO agrees to an ongoing confirmation for use of name, email address and mobile number for marketing offers between CDSL and any other entity.
6. **The BO agrees to inform the depository and DP in writing of any unauthorized debit to his BO account/ unauthorized transfer of securities from his BO account, immediately, which may come to his knowledge on receiving SMS alerts. The BO may send an email to CDSL at complaints@cdslindia.com. The BO is advised not to inform the service provider about any such unauthorized debit to/ transfer of securities from his BO account by sending a SMS back to the service provider as there is no reverse communication between the service provider and the depository.**
7. The information sent as an alert on the mobile phone number shall be deemed to have been received by the BO and the depository shall not be under any obligation to confirm the authenticity of the person(s) receiving the alert.
8. The depository will make best efforts to provide the service. The BO cannot hold the depository liable for non-availability of the service in any manner whatsoever.
9. If the BO finds that the information such as mobile number etc., has been changed without proper authorization, the BO should immediately inform the DP in writing.

Fees:

Depository reserves the right to charge such fees from time to time as it deems fit for providing this service to the BO.

Disclaimer:

The depository shall make reasonable efforts to ensure that the BO's personal information is kept confidential. The depository does not warranty the confidentiality or security of the SMS alerts transmitted through a service provider. Further, the depository makes no warranty or representation of any kind in relation to the system and the network or their function or their performance or for any loss or damage whenever and howsoever suffered or incurred by the BO or by any person resulting from or in connection with availing of SMS alerts facility. The Depository gives no warranty with respect to the quality of the service provided by the service provider. The Depository will not be liable for any unauthorized use or access to the information and/ or SMS alert sent on the mobile phone number of the BO or for fraudulent, duplicate or erroneous use/ misuse of such information by any third person.

Liability and Indemnity:

The Depository shall not be liable for any breach of confidentiality by the service provider or by any third person due to unauthorized access to the information meant for the BO. In consideration of the depository providing the service, the BO agrees to indemnify and keep safe, harmless and indemnified the depository and its officials from any damages, claims, demands, proceedings, loss, cost, charges and expenses whatsoever which a depository may at any time incur, sustain, suffer or be put to as a consequence of or arising out of interference with or misuse, improper or fraudulent use of the service by the BO.

**CHURIWALA
SECURITIES
PVT LTD DP
ID 12012500**

OPTION FORM FOR ISSUE OF DIS BOOKLET

Date	D	D	M	M	Y	Y	Y	Y
------	---	---	---	---	---	---	---	---

DP ID					Client ID				
First Holder Name									
Second Holder Name									
Third Holder Name									

To,
Depository Participant Name Address

Dear Sir / Madam,

I / We hereby state that: [Select one of the options given below]

OPTION 1:

I / We require you to issue Delivery Instruction Slip (DIS) booklet to me / us immediately on opening of my / our CDSL account though I / we have issued a Power of Attorney (POA) / registered for eDIS / executed PMS agreement in favour of / with _____ (name of the attorney / Clearing

Yours faithfully

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

OR

OPTION 2:

I / We do not require the Delivery Instruction Slip (DIS) booklet for the time being, since I / We have issued a POA/ registered for eDIS / executed PMS agreement in favour of / with _____ (name of the attorney / CI booklet should be issued to me / us immediately on my / our request at any later date.

Yours faithfully

	First/Sole Holder	Second Joint Holder	Third Joint Holder
Name			
Signatures			

===== (Please Tear Here) =====

Acknowledgement Receipt

Received OPTION FORM FOR ISSUE / NON ISSUE OF DIS BOOKLET from :

DP ID				Client ID			
Name of the Sole / First Holder							
Name of Second Joint Holder							
Name of Third Joint Holder							

Depository Participant Seal and Signature

CHURIWALA SECURITIES PRIVATE LIMITED - (DP ID - 12500)

Rights and Obligations of Beneficial Owner and Depository Participant as prescribed by SEBI and Depositories

General Clause

1. The Beneficial Owner and the Depository participant (DP) shall be bound by the provisions of the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 2018, Rules and Regulations of Securities and Exchange Board of India (SEBI), Circulars / Notifications / Guidelines issued there under, Bye Laws and Business Rules/Operating Instructions issued by the Depositories and relevant notifications of Government Authorities as may be in force from time to time.
2. The DP shall open/activate demat account of a beneficial owner in the depository system only after receipt of complete Account opening form, KYC and supporting documents as specified by SEBI from time to time.

Beneficial Owner information

3. The DP shall maintain all the details of the beneficial owner(s) as mentioned in the account opening form, supporting documents submitted by them and/or any other information pertaining to the beneficial owner confidentially and shall not disclose the same to any person except as required by any statutory, legal or regulatory authority in this regard.
4. The Beneficial Owner shall immediately notify the DP in writing, if there is any change in details provided in the account opening form as submitted to the DP at the time of opening the demat account or furnished to the DP from time to time.

Fees/Charges/Tariff

5. The Beneficial Owner shall pay such charges to the DP for the purpose of holding and transfer of securities in dematerialized form and for availing depository services as may be agreed to from time to time between the DP and the Beneficial Owner as set out in the Tariff Sheet provided by the DP. It may be informed to the Beneficial Owner that "no charges are payable for opening of demat accounts"
6. In case of Basic Services Demat Accounts, the DP shall adhere to the charge structure as laid down under the relevant SEBI and/or Depository circulars/directions/notifications issued from time to time.
7. The DP shall not increase any charges/tariff agreed upon unless it has given a notice in writing of not less than thirty days to the Beneficial Owner regarding the same.

Dematerialization

8. The Beneficial Owner shall have the right to get the securities, which have been admitted on the Depositories, dematerialized in the form and manner laid down under the Bye Laws, Business Rules and Operating Instructions of the depositories.

Separate Accounts

9. The DP shall open separate accounts in the name of each of the beneficial owners and securities of each beneficial owner shall be segregated and shall not be mixed up with the securities of other beneficial owners and/or DP's own securities held in dematerialized form.

10. The DP shall not facilitate the Beneficial Owner to create or permit any pledge and /or hypothecation or any other interest or encumbrance over all or any of such securities submitted for dematerialization and/or held in demat account except in the form and manner prescribed in the Depositories Act, 1996, SEBI (Depositories and Participants) Regulations, 2018 and Bye-Laws/Operating Instructions/Business Rules of the Depositories.

Transfer of Securities

11. The DP shall effect transfer to and from the demat accounts of the Beneficial Owner only on the basis of an order, instruction, direction or mandate duly authorized by the Beneficial Owner and the DP shall maintain the original documents and the audit trail of such authorizations.
12. The Beneficial Owner reserves the right to give standing instructions with regard to the crediting of securities in his demat account and the DP shall act according to such instructions.
13. The stock broker / stock broker and depository participant shall not directly / indirectly compel the clients to execute Power of Attorney (PoA) or Demat Debit and Pledge Instruction (DDPI) or deny services to the client if the client refuses to execute PoA or DDPI.

Statement of account

14. The DP shall provide statements of accounts to the beneficial owner in such form and manner and at such time as agreed with the Beneficial Owner and as specified by SEBI/depository in this regard.
15. However, if there is no transaction in the demat account, or if the balance has become Nil during the year, the DP shall send one physical statement of holding annually to such BOs and shall resume sending the transaction statement as and when there is a transaction in the account.
16. The DP may provide the services of issuing the statement of demat accounts in an electronic mode if the Beneficial Owner so desires. The DP will furnish to the Beneficial Owner the statement of demat accounts under its digital signature, as governed under the Information Technology Act, 2000. However if the DP does not have the facility of providing the statement of demat account in the electronic mode, then the Participant shall be obliged to forward the statement of demat accounts in physical form.
17. In case of Basic Services Demat Accounts, the DP shall send the transaction statements as mandated by SEBI and/or Depository from time to time.

Manner of Closure of Demat account

18. The DP shall have the right to close the demat account of the Beneficial Owner, for any reasons whatsoever, provided the DP has given a notice in writing of not less than thirty days to the Beneficial Owner as well as to the Depository. Similarly, the Beneficial Owner shall have the right to close his/her demat account held with the DP provided no charges are payable by him/her to the DP. In such an event, the Beneficial Owner shall specify whether the balances in their demat account should be transferred to another demat account of the Beneficial Owner held with another DP or to rematerialize the security balances held.

19. Based on the instructions of the Beneficial Owner, the DP shall initiate the procedure for transferring such security balances or rematerialize such security balances within a period of thirty days as per procedure specified from time to time by the depository. Provided further, closure of demat account shall not affect the rights, liabilities and obligations of either the Beneficial Owner or the DP and shall continue to bind the parties to their satisfactory completion.

Default in payment of charges

20. In event of Beneficial Owner committing a default in the payment of any amount provided in Clause 5 & 6 within a period of thirty days from the date of demand, without prejudice to the right of the DP to close the demat account of the Beneficial Owner, the DP may charge interest at a rate as specified by the Depository from time to time for the period of such default.
21. In case the Beneficial Owner has failed to make the payment of any of the amounts as provided in Clause 5&6 specified above, the DP after giving two days notice to the Beneficial Owner shall have the right to stop processing of instructions of the Beneficial Owner till such time he makes the payment along with interest, if any.

Liability of the Depository

22. As per Section 16 of Depositories Act, 1996,
1. Without prejudice to the provisions of any other law for the time being in force, any loss caused to the beneficial owner due to the negligence of the depository or the participant, the depository shall indemnify such beneficial owner.
 2. Where the loss due to the negligence of the participant under Clause (1) above, is indemnified by the depository, the depository shall have the right to recover the same from such participant.

Freezing/ Defreezing of accounts

23. The Beneficial Owner may exercise the right to freeze/defreeze his/her demat account maintained with the DP in accordance with the procedure and subject to the restrictions laid down under the Bye Laws and Business Rules/Operating Instructions.
24. The DP or the Depository shall have the right to freeze/defreeze the accounts of the Beneficial Owners on receipt of instructions received from any regulator or court or any statutory authority.
25. The Joint holders are aware that in case of any Statutory Order for freezing any one joint holder, the demat account will be frozen and the other joint holders will have to obtain a specific Order for unfreezing their percentage of joint ownership by submitting the relevant documentary proof to the Order issuing authority.

Redressal of Investor grievance

26. The DP shall redress all grievances of the Beneficial Owner against the DP within a period of thirty days from the date of receipt of the complaint.

Authorized representative

Internal

27. If the Beneficial Owner is a body corporate or a legal entity, it shall, along with the account opening form, furnish to the DP, a list of officials authorized by it, who shall represent and interact on its behalf with the Participant. Any change in such list including additions, deletions or alterations thereto shall be forthwith communicated to the Participant.

Law and Jurisdiction

28. In addition to the specific rights set out in this document, the DP and the Beneficial owner shall be entitled to exercise any other rights which the DP or the Beneficial Owner may have under the Rules, Bye Laws and Regulations of the respective Depository in which the demat account is opened and circulars/notices issued there under or Rules and Regulations of SEBI.

29. The provisions of this document shall always be subject to Government notification, any rules, regulations, guidelines and circulars/ notices issued by SEBI and Rules, Regulations and Bye-laws of the relevant Depository, where the Beneficial Owner maintains his/ her account, that may be in force from time to time.

30. The Beneficial Owner and the DP shall abide by the arbitration and conciliation procedure prescribed under the Bye-laws of the depository and that such procedure shall be applicable to any disputes between the DP and the Beneficial Owner.

31. Words and expressions which are used in this document but which are not defined herein shall unless the context otherwise requires, have the same meanings as assigned thereto in the Rules, Bye-laws and Regulations and circulars/notices issued there under by the depository and /or SEBI

32. Any changes in the rights and obligations which are specified by SEBI/Depositories shall also be brought to the notice of the clients at once.

33. If the rights and obligations of the parties hereto are altered by virtue of change in Rules and regulations of SEBI or Bye-laws, Rules and Regulations of the relevant Depository, where the Beneficial Owner maintains his/her account, such changes shall be deemed to have been incorporated herein in modification of the rights and obligations of the parties mentioned in this document.

Client Signature X

CHURIWALA SECURITIES PVT.LTD.

Acknowledgment Receipt

Dear Sir/ Madam,

Ref: Trading Client Code _____ BO A/c code: 12012500 _____

We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. We have given/sent him a copy of all the KYC documents. We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

Kindly acknowledge the receipt of following documents.

1. Copy of entire Client Registration Form (KYC)
2. Copy of entire Client Registration Documents.

Thanking you,

Your's faithfully,

For Churiwala Securities Pvt. Ltd.

(Compliance Officer/ Authorized signatory)

Date:

Received the above documents

Client Signature: X

Client Name:

CHURIWALA SECURITIS PVT LTD

Add: 1007, Kohinoor Square, N.C.Kelkar Road, Dadar (W), Mumbai – 400 028

CSPL		FATCA-CRS Declaration & Supplementary KYC Information Declaration Form for Individuals <i>Please seek appropriate advice from your tax professional on your tax residency, related FATCA & CRS guidance</i>							
PAN / PEKRN*									
Name									
Address Type [for KYC address]		<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business		Nationality		<input type="checkbox"/> Indian <input type="checkbox"/> US <input type="checkbox"/> Others <i>(please specify)</i>			
Place of Birth				Country of Birth					
Gross Annual Income Details in INR		<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs - 1 Cr <input type="checkbox"/> > 1 Crore		Occupation Details [Please tick any one (v)]		<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others [Please specify] _____			
Net Worth in INR. In Lacs & Date [Optional]		_____ dd-mmm-yyyy		Any other information [if applicable]		[Please specify]			
Politically Exposed Person [PEP]		<input type="checkbox"/> Yes <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable							

Are you a tax resident (i.e. are you assessed for Tax) in any other country other than India? Yes No

If 'Yes', please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

S. No.	Country of Tax Residency	Tax Identification Number (TIN) or Functional Equivalent	Identification Type [TIN or other, please specify]	If TIN is not available, please tick the reason A, B or C [as defined below] <input checked="" type="checkbox"/>
1				→ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
2				→ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>

- Reason A → The country where the Account Holder is liable to pay tax does not issue TIN to its residents.
- Reason B → No TIN required [Select this reason only if the authorities of the respective country of tax residence do not required the TIN to be collected]
- Reason C → Others – Please specify the reasons _____

I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. I hereby authorize you [CSPL/Fund/AMC] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries/or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions given below and hereby accept the same

Declaration

Date:
Place:

Signature:

X

Acknowledgement

We [CSPL, on behalf of participating Mutual Funds] acknowledge the receipt of FATCA/CRS declaration form duly filled and signed from Mr. / Ms. / M/s. _____ PAN _____ on dd-mmm-yyyy

Date:

Signature with Name, Emp. ID & Seal

Details of FATCA & CRS information For Non-Individuals/Legal Entity

Name of the entity																																
Type of Address given at KRA	<input type="checkbox"/>	Residential or Business	<input type="checkbox"/>	Residential	<input type="checkbox"/>	Business	<input type="checkbox"/>	Registered Office	<input type="checkbox"/>																							
PAN	<input type="text"/>																Date of incorporation	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City of incorporation																																
Country of incorporation																																

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India YES NO
(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated TAX ID number below)

Country	Tax Identification Number [%]	Identification Type (TIN or Other, please specify)

[%] In cas Tax Identification Number is not available, kindly provide its functional equivalent⁵
 I case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

I case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention entity's exemption code here _____
 Please refer to para 3(vii) Exemption code for U.S. persons under Part D of FATCA Instructions & Definitions

FATCA & CRS Declaration

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

PART A *(to be filled by Financial Institution or Direct Reporting NFEs)*

Global Intermediary Identification Number (GIIN)

1. We are a, Financial institution³ or Direct reporting NFE⁴
 (Please tick as appropriate)

Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below

Name of sponsoring entity _____

GIIN not available (please tick as applicable) **Applied for**

If the entity is a financial institution, Not required to apply for - please specify 2 digits sub-category¹⁰ Not
 obtained - Non-participating FI

PART B *(please fill any one as appropriate "to be filled by NFEs other than direct reporting NFEs")*

1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) No <input type="checkbox"/>	Yes <input type="checkbox"/> <i>(If yes, please specify any one stock exchange on which the stock is regularly traded)</i> Name of stock exchange _____
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) No <input type="checkbox"/>	Yes <input type="checkbox"/> <i>(If yes, please specify the name of listed company and one stock exchange on which the stock is regularly traded)</i> Name of listed company _____ Nature of relation: subsidiary of the listed company OR controlled by a listed company Name of stock exchange _____

DEMAT ACCOUNT DO & DON'T'S

1. Verify your transaction statement carefully for all debits and credits in your account. In case of any unauthorized debit or credit, inform your DP or CDSL.
2. Intimate any change of address or change in bank account details to your DP immediately.
3. While accepting the delivery instruction slip (DIS) book from your DP, ensure that your BO ID is pre- stamped on all the pages along with the serial numbers.
4. Keep your dis book safely and do not sign or issue blank or incomplete dis slips.
5. Strike out the empty space, if any, in the dis, before submitting to DP.
6. For market transactions, submit the dis ahead of the deadline time. Dis can be issued with a future execution date.
7. The DEMAT account has a nomination facility and it is advisable to appoint a nominee to facilitate your heirs in obtaining the securities in your DEMAT account, on completion of the necessary procedures.
8. To open and operate your DEMAT account, copy of pan card of all account holders is to be submitted to the DP along with original pan card, for verification.
9. Register for CDSL's smart (SMS alerts related to transactions) facility. If any unauthorized debit is noticed, the BO should immediately inform CDSL & the main DP, in writing an email may be sent to CDSL at complaints@cdslindia.com .
10. Register for CDSL's internet based facility "easi" to monitor your DEMAT account yourself. Contact your DP or visit CDSL's website: www.cdslindia.com for details.
11. In order to receive all the credits coming to your DEMAT account automatically, you can give a one- time, standing instruction to your DP.
12. Before granting power of attorney to anyone, to operate your DEMAT account, carefully examine the scope and implications of powers being granted.
13. Signatures can be in English or Hindi or any of the other languages contained in the 8th schedule of the constitution of India. Thumb impressions & signatures other than the above mentioned languages must be attested by a magistrate or a notary public or a special executive Magistrate / special executive officer under his / her official seal.
14. Signatures should be preferably in black ink.
15. Details of the names, address, telephone number(s), etc., of the magistrate / notary public / special executive magistrate / special executive officer are to be provided in case of attestation done by them.
16. In case of additional signatures (for accounts other than individuals), separate annexures should be attached to the account opening form.
17. In case of applications containing a power of attorney, the relevant power of attorney or the self- certified copy thereof, name of the POA, signature of the POA, must be lodged along with the application.
18. All correspondence / queries shall be addressed to the sole / first applicant only.
19. Strike off whichever is not applicable.

Guidelines Note- Do's & Don'ts For Trading On The Exchange(s) For Investors

Before you begin to trade

1. Ensure that you deal with and through only SEBI registered intermediaries. You may check their SEBI registration certificate number from the list available on the stock exchanges www.nseindia.com / www.bseindia.com / www.mcx-sx.com and SEBI website www.sebi.gov.in.
2. Ensure that you fill the KYC form completely and strike off the blank fields in the KYC form.
3. Ensure that you have read all the mandatory documents viz. Rights and obligations, risk disclosure document, policy and procedure document of the stock broker.
4. Ensure to read, understand and then sign the voluntary clauses, if any, agreed between you and the stock broker. Note that the clauses as agreed between you and the stock broker cannot be changed without your consent.
5. Get a clear idea about all brokerage, commissions, fees and other charges levied by the broker on you for trading and the relevant provisions / guidelines specified by SEBI / stock exchanges.
6. Obtain a copy of all the documents executed by you from the stock broker free of charge.
7. In case you wish to execute power of attorney (POA) in favor of the stock broker, authorizing it to operate your bank and DEMAT account, please refer to the guidelines issued by SEBI / exchanges in this regard.

Transactions and settlements

1. The stock broker may issue electronic contract notes (ECN) if specifically authorized by you in writing. You should provide your email ID to the stock broker for the same. Don't opt for ECN if you are not familiar with computers.
2. Don't share your internet trading account's password with anyone.
3. Don't make any payment in cash to the stock broker.
4. Make the payments by account payee cheque in favor of the stock broker. Don't issue cheque in the name of sub-broker / authorised person. Ensure that you have a documentary proof of your payment / deposit of securities with the stock broker, stating date, scrip, quantity, towards which bank / DEMAT account such money or securities deposited and from which bank / DEMAT account.
5. Note that facility of trade verification is available on stock exchanges' websites, where details of trade as mentioned in the contract note may be verified. Where trade details on the website do not tally with the details mentioned in the contract note, immediately get in touch with the investors grievance cell of the relevant stock exchange.
6. In case you have given specific authorization for maintaining running account, payout of funds or delivery of securities (as the case may be), may not be made to you within one working day from the receipt of payout from the exchange. Thus, the stock broker shall maintain running account for you subject to the following conditions:
 - i. Such authorization from you shall be dated, signed by you only and contains the clause that you may revoke the same at any time.
 - ii. The actual settlement of funds and securities shall be done by the stock broker, at least once in a calendar quarter or month, depending on your preference. While settling the account, the stock broker shall send to you a 'statement of accounts' containing an extract from the client ledger for funds and an extract from the register of securities displaying all the receipts / deliveries of funds and securities. The statement shall also explain the retention of funds and securities and the details of the pledged shares, if any.
 - iii. On the date of settlement, the stock broker may retain the requisite securities / funds towards outstanding obligations and may also retain the funds expected to be required to meet derivatives margin obligations for next 5 trading days, calculated in the manner specified by the exchanges. In respect of cash market transactions, the stock broker may retain entire pay-in obligation of funds and securities due from clients as on date of settlement and for next day's business, he may retain funds / securities / margin to the extent of value of transactions executed on the day of such settlement in the cash market.
 - iv. You need to bring any dispute arising from the statement of account or settlement so made to the notice of the stock broker in writing preferably within 7 (seven) working days from the date of receipt of funds / securities or statement, as the case may be. In case of dispute, refer the matter in writing to the investor's grievance cell of the relevant stock exchanges without delay.
7. In case you have not opted for maintaining running account and pay-out of funds / securities is not received on the next working day of the receipt of payout from the exchanges, please refer the matter to the stock broker. In case there is dispute, ensure that you lodge a complaint in writing immediately with the investor's grievance cell of the relevant stock exchange.
8. Please register your mobile number and email id with the stock broker, to receive trade confirmation alerts / details of the transactions through SMS or email, by the end of the trading day, from the stock exchanges.

In case of termination of trading membership

1. In case, a stock broker surrenders his membership, is expelled from membership or declared a defaulter; stock exchanges give a public notice inviting claims relating to only the "transactions executed on the trading system" of stock exchange, from the investors. Ensure that you lodge a claim with the relevant stock exchanges within the stipulated period and with the supporting documents.
2. Familiarize yourself with the protection accorded to the money and/or securities you may deposit with your stock broker, particularly in the event of a default or the stock broker's insolvency or bankruptcy and the extent to which you may recover such money and/or securities may be governed by the bye-laws and regulations of the relevant stock exchange where the trade was executed and the scheme of the investors' protection fund in force from time to time.

Disputes / complaints

1. Please note that the details of the arbitration proceedings, penal action against the brokers and investor complaints against the stock brokers are displayed on the website of the relevant stock exchange.
2. In case your issue / problem / grievance is not being sorted out by concerned stock broker / sub- broker / authorised person then you may take up the matter with the concerned stock exchange. If you are not satisfied with the resolution of your complaint then you can escalate the matter to SEBI.

Note that all the stock broker / sub- brokers / authorised person have been mandated by SEBI to designate an e- mail id of the grievance redressal division / compliance officer exclusively for the purpose of registering complaints.

To,
Churiwala Securities Pvt Ltd
1007, Kohin oor Square, N.C.Kelka r Road,
Da da r , M um ba i - 4 0 0 0 2 8

Trading Code –
Demat Account No.

Mode of Operation for execution of Transactions/ Transfer, Pledge and Freeze)

- 1) Sole Holder
- 2) Jointly
- 3) Any one of the Holder

Consent for communication to be received by first account holder / all account holder (Tick the applicable box.)

- 1) All holder Email ID
- 2) Second holder
- 3) Third holder

1) First Holder Name :	Signature X
2) Second Holder Name :	Signature X
3) Third Holder Name :	Signature X

PMLA INFORMATION FOR INVESTOR

The Prevention of Money Laundering Act (PMLA) came into effect from 1st July 2005. Necessary Notifications/Rules under the said Act were published in the Gazette of India on 1st July, 2005 by the Department of Revenue, Ministry of Finance, and Government of India. The PMLA has been further amended vide notification dated March 6, 2009 and inter alia provides that violating the prohibitions on manipulative and deceptive devices, insider trading and substantial acquisition of securities or control as prescribed in Section 12 A read with Section 24 of the Securities and Exchange Board of India Act, 1992 (SEBI Act) will now be treated as a scheduled offence under schedule B of the PMLA.

As per the provisions of the PMLA, every banking company, financial institution (which includes chit fund company, a co-operative bank, a housing finance institution and a non-banking financial company) and intermediary (which includes a stock-broker, sub-broker, share transfer agent, banker to an issue, trustee to a trust deed, registrar to an issue, merchant banker, underwriter, portfolio manager, investment adviser and any other intermediary associated with securities market and registered under Section 12 of the SEBI Act), shall have to maintain a record of all the transactions; the nature and value of which has been prescribed in the Rules under the PMLA.

Such transactions include:

1. All cash transactions of the value of more than Rs 10 lakh or its equivalent in foreign currency.
2. All series of cash transactions integrally connected to each other which have been valued below Rs 10 lakh or its equivalent in foreign currency where such series of transactions take place within one calendar month.
3. All suspicious transactions whether or not made in cash and including, inter-alia, credits or debits into from any non-monetary account such as Demat account, security account maintained by the registered intermediary.
4. It may, however, be clarified that for the purpose of suspicious transactions reporting, apart from 'transactions integrally connected', 'transactions remotely connected or related' shall also be considered.
5. In case there is a variance in CDD/AML standards prescribed by SEBI and the regulators of the host country, branches/overseas subsidiaries of intermediaries are required to adopt the more stringent requirements of the two.
6. It is an obligation of the entities to whom this Act is applicable, to report certain kind of transactions routed through them to FINANCIAL INTELLIGENCE UNIT, a department specially set up to administer this Act under the Ministry of Finance.
7. The transactions which are supposed to be reported are cash transactions above rupees ten lakhs or series of cash transactions below ten lakhs but aggregating to above ten lakhs in a month or its equivalent in any foreign currency and the transactions which may not be in cash but suspicious in nature.
8. Any such above types of transaction, though not executed but attempted and failed are also required to be reported.
9. The suspicious transaction can be related to the transaction under the circumstances such as;
 - a. Clients whose identity verification seems difficult or clients that appear not to cooperate
 - b. Asset management services for clients where the source of the funds is not clear or not in keeping with clients apparent standing/business activity;
 - c. Clients based in high risk jurisdictions;
 - d. Substantial increases in business without apparent cause;
 - e. Clients transferring large sums of money to or from overseas locations with instructions for payment in cash;
 - f. Attempted transfer of investment proceeds to apparently unrelated third parties;
 - g. Unusual transactions by CSCs and businesses undertaken by offshore banks/financial services, businesses reported to be in the nature of export-import of small items.
10. Clients of Special Categories may include:
 - a. NRI/HNI/Trust/Charities/NGO/Organizations receiving donations
 - b. Companies having close family shareholdings or beneficial Ownership
 - c. Politically Exposed Persons
 - d. Companies offering foreign exchange offerings
 - e. Clients in high risk countries
 - f. Non face to face clients
 - g. Clients with dubious reputation as per public information available
11. No trading or Demat account can be opened in the name of entity whose name is listed on the banned entity list being maintained at United Nation's website at <http://www.un.org/sc/committees/1267/consolist.shtml>
12. While opening the new accounts all the prescribed procedures of KYC and Client Identifications should strictly be followed in the context of ensuring the compliance under this act.
13. All the records of transactions and client identifications must be preserved in a manner which can be promptly retrieved and reported to the authorities in the specified format.
14. These are the highlights of the requirements under the Act. Clients/Sub-brokers/Authorised Persons/Remisiers are advised to refer to the SEBI's master circular at <http://www.sebi.gov.in/circulars/2010/cirisdaml2010.pdf> for detailed information and understanding and also to visit the website of FIU - IND at <http://fiuindia.gov.in>
15. The clients are advised to co-operate with us by providing the additional information/documents, if asked for during the course of your dealings with us to ensure the compliance requirements under this Act.

CHURIWALA SECURITIES PVT LTD

Regd Office : 1007, Kohin oor Squa re, N.C.Kelka r Roa d,
Da da r, Mu mba i -400 028

**DISCLOSURE IN TERMS OF SEBI CIRCULAR NO SEBI/MRD/SE/ CIR -42 2003 DATED
NOVEMBER 19 , 2003**

CHURIWALA SECURITIES PVT LTD besides doing client based business also does its
own Investment and/ or trading “ Proprietary Trading Disclosure noted.”

Client Sign X

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

B. Proof of Identity (POI): List of documents admissible as Proof of Identity:

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): List of documents admissible as Proof of Address: (*Documents having an expiry date should be valid on the date of submission.)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale

Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

(*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, Mfs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual



Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only

Application Type* New Update

(To be filled by financial institution) KYC Number (Mandatory for KYC update request)

Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction **A** at the end)

	Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<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	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>)		
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		
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)	
	<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)	
	<input type="checkbox"/> B-Business			
	<input type="checkbox"/> X- Not Categorised			

PHOTO

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*

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* ISO 3166 Country Code of Birth*

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"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code	<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)		
	<input type="checkbox"/> Voter Identity Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/> Others	<input type="text"/>	
	<input type="checkbox"/> Simplified Measures Account - Document Type code	<input type="text"/>			

Address

Line 1*	<input type="text"/>		
Line 2	<input type="text"/>		
	Pin / Post Code*	State / U.T Code*	ISO 3166 Country Code*

Line 3
District*

--	--

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

General Instructions:

- 1 Fields marked with '*' are mandatory fields.
- 2 Tick '☐' wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 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 code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick (☐) in the box available before the section number and strike off the sections not required to be updated.
- 9 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

- 1 **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.
- 2 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

- 1 **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 Identity [Pol]' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

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

- 1 PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

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

- 1 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.
- 2 In case of multiple correspondence / local addresses, Please fill '**Annexure A1**'

F Clarification / Guidelines on filling 'Contact details' section

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

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

- 1 Provide KYC number of related person if available.

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

- 1 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

List of two – digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 two- digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor or, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

B. Proof of Identity(POI): List of documents admissible as Proof of Identity:

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

C. Proof of Address (POA): List of documents admissible as Proof of Address:

- (*Documents having an expiry date should be valid on the date of submission.)
1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of

- Residence/Driving License/Flat Maintenance bill/Insurance Copy.
2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
7. For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN

(*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIIs, MFs, VCFs, FVCI, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

F. In case of Non-Individuals, additional documents to be obtained from Non-individuals, over & above the POI & POA, as mentioned below:

Types of entity	Documentary requirements
Corporate	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD(to be submitted every year) • Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations • Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly • Copies of the Memorandum and Articles of Association and certificate of incorporation • Copy of the Board Resolution for investment in securities market • Authorised signatories list with specimen signatures
Partnership firm	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered partnership firms only) • Copy of partnership deed • Authorised signatories list with specimen signatures • Photograph, POI, POA, PAN of Partners
Trust	<ul style="list-style-type: none"> • Copy of the balance sheets for the last 2 financial years (to be submitted every year) • Certificate of registration (for registered trust only).Copy of Trust deed • List of trustees certified by managing trustees/CA • Photograph, POI, POA, PAN of Trustees
HUF	<ul style="list-style-type: none"> • PAN of HUF • Deed of declaration of HUF/List of coparceners • Bank pass-book/bank statement in the name of HUF • Photograph, POI, POA, PAN of Karta
Unincorporated Association or a body of individuals	<ul style="list-style-type: none"> • Proof of Existence/Constitution document • Resolution of the managing body & Power of Attorney granted to transact business on its behalf • Authorized signatories list with specimen signatures
Banks/Institutional Investors	<ul style="list-style-type: none"> • Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years • Authorized signatories list with specimen signatures
Foreign Institutional Investors (FII)	<ul style="list-style-type: none"> • Copy of SEBI registration certificate • Authorized signatories list with specimen signatures
Army/Government Bodies	<ul style="list-style-type: none"> • Self-certification on letterhead • Authorized signatories list with specimen signatures

Registered Society	<ul style="list-style-type: none">• Copy of Registration Certificate under Societies Registration Act• List of Managing Committee members• Committee resolution for persons authorised to act as authorised signatories with specimen signatures• True copy of Society Rules and Bye Laws certified by the Chairman/Secretary
---------------------------	--

Please Submit the KYC Documents on A4 Size Paper Only.

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

Name & Signature of the Authorised Signatory(ies)

Date d d / m m / y y y y

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CVL



Place for Intermediary Logo

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity



Important Instructions:

- A) Fields marked with '**' are mandatory.
- B) Please fill the form in English and in BLOCK letters.
- C) List of two character ISO 3166 country codes is available at the end.
- D) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- E) KYC number of entity is mandatory for update application.

For office use only (To be filled by financial institution)

Application Type* New Update

KYC Number (Mandatory for KYC update request)

Account Holder Type* US Reportable Other Reportable (Please refer instruction A at the end)

Nature of Business / Entity Constitution Type* (Please refer instruction B at the end)

1. ENTITY DETAILS (Please refer instruction C at the end)

Name*

Date of Incorporation* DD - MM - YYYY Date of Commencement of Business* DD - MM - YYYY

Place of Incorporation* Country of Incorporation* Country of Residence as per Tax laws*

Identification Type Tax Identification Number (TIN) TIN Issuing Country

PAN

Number of controlling person(s) resident outside India for tax purposes
 (Please provide details of each Controlling Person resident outside India for Tax purposes separately in 'Annexure C2')

2. PROOF OF IDENTITY (PoI)* (Please refer instruction D at the end)

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

Certificate of Incorporation / Formation Registration Certificate

Resolution of Board / Managing Committee Memorandum and Article of Association / Partnership Deed / Trust Deed

Officially valid document(s) in respect of person authorised to transact

3. PROOF OF ADDRESS (PoA)* (Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted) (Please see instruction E at the end)

3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS*

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Certificate of Incorporation / Formation Registration Certificate

Line 1*

Line 2

Line 3 City / Town / Village*

State / U.T Code* Pin / Post Code* ISO 3166 Country Code*

3.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS *

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A2')

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Certificate of Incorporation / Formation Registration Certificate

Line 1*

Line 2

Line 3 City / Town / Village*

State / U.T Code* Pin / Post Code* ISO 3166 Country Code*

3.3 ADDRESS IN THE JURISDICTION WHERE ENTITY IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES*

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Certificate of Incorporation / Formation Registration Certificate

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

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

Tel. (Off) - Tel. (Res) - Mobile

FAX - Email ID

5. DETAILS OF RELATED PERSON* (In case of additional related persons, please fill 'Annexure B2') (Please refer instruction G at the end)



Addition of Related Person Deletion of Related Person Update Related Person details

KYC Number of Related Person (if available*)

If KYC number is available, only 'Related Person Type' and 'Name' is mandatory.

Related Person Type* Director Promoter Karta Trustee Partner
 Authorised Signatory Court Appointed Official Beneficiary

5.1 PERSONAL DETAILS (Please refer instruction **G.I** at the end)

Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)			
Maiden Name (If any*)			
Father / Spouse Name*			
Mother Name*			
Date of Birth* D D - M M - Y Y Y Y	Gender* <input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender	Nationality* <input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/>)	
Marital Status* <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others	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		
Occupation Type* <input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <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) <input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorised			

5.2 TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction **G.II** at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 5.2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)*

Place / City of Birth* ISO 3166 Country Code of Birth*

5.3 PROOF OF IDENTITY (PoI)* (Please refer instruction **G.III** 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	D D - M M - Y Y Y Y
<input type="checkbox"/> B- Voter ID Card	<input type="text"/>	Driving Licence Expiry Date	D D - M M - Y Y Y Y
<input type="checkbox"/> C- PAN Card	<input type="text"/>		
<input type="checkbox"/> D- Driving Licence	<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"/>

5.4 PROOF OF ADDRESS (PoA)* (Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

5.4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction **G.IV** at the end)

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) <input type="checkbox"/> Voter Identity Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others <input type="text"/>
Address Line 1* Line 2 Line 3	City / Town / Village* <input type="text"/>
State / U.T Code* <input type="text"/>	Pin / Post Code* <input type="text"/>
	ISO 3166 Country Code* <input type="text"/>

6 REMARKS (If any)

<input type="text"/>
<input type="text"/>
<input type="text"/>

7. APPLICANT 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/we am/are aware that I/we may be held liable for it.
- My/Our personal KYC details may be shared with Central KYC Registry.
- I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : - - Place :

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

8. 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

[Employee Signature]

INSTITUTION DETAILS

Name

Code

[Institution Stamp]



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

General Instructions:

- 1 Fields marked with "*" are mandatory.
- 2 Tick '✓' wherever applicable.
- 3 Please fill the form in English and in BLOCK letters.
- 4 Please fill all dates in DD-MM-YYYY format.
- 5 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 code respectively list of which is available at the end.
- 6 KYC number of applicant is mandatory for update application.
- 7 For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

A Clarification / Guidelines for filling 'Account Holder' type section

US Reportable

- F1 - Owner-Documented FI with specified US owner(s)
- F2 - Passive Non-Financial Entity with substantial US owner(s)
- F3 - Non-Participating FFI
- F4 - Specified US Person
- F5 - Direct Reporting NFFE
- XX - Not Applicable

Other Reportable

- C1 - Passive Non-Financial Entity with one or more controlling person that is a Reportable Person
- C2 - Other Reportable Person
- C3 - Passive Non-Financial Entity that is a CRS Reportable
- XX - Not Applicable

B Clarification / Guidelines for filling 'Nature of Business / Entity Constitution' type section

Entity Constitution Type:

- A - Sole Proprietorship
- B - Partnership Firm
- C - HUF
- D - Private Limited Company
- E - Public Limited Company
- F - Society
- G - Association of Persons (AOP) / Body of Individuals (BOI)
- H - Trust
- I - Liquidator
- J - Limited Liability Partnership
- K - Artificial Juridical Person
- Z - Others
- X - Not Categorized

C Clarification / Guidelines for filling 'Entity Details' section

Identification Type:

- T-TIN
- C- Company Identification Number
- G- US GIIN
- E- Global Entity Identification Number (EIN)
- O- Other

D Clarification / Guidelines for filling 'Proof of Identity [Pol]' section

- 1 One certified copy of any one of the mentioned Proof of Identity [Pol] needs to be submitted.

E Clarification / Guidelines for filling 'Proof of Address [PoA]' section

- 1 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 2 In case of multiple correspondence / local addresses, please fill 'Annexure A2'

F Clarification / Guidelines for filling 'Contact Details' section

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

G Clarification / Guidelines for filling 'Related Person Details' section

I Personal Details

- 1 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.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

II Resident outside India for tax purposes

- 1 Jurisdiction(s) of Residence: It may be mentioned that since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
- 2 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 ("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)

III Proof of Identity [Pol]

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

IV Proof of Address [PoA]

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

H Clarification / Guidelines for filling 'Details of Controlling Person' section

I Personal Details

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

II Proof of Identity [Pol]

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

III Proof of Address [PoA]

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

List of two- digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 two- digit Country Code

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion IRéunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		



Important Instructions:

- A) Fields marked with "*" are mandatory.
- B) Please fill the form in English and in BLOCK letters.
- C) List of two character ISO 3166 country codes is available at the end.
- D) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- E) KYC number of entity is mandatory for update application.

For office use only Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. DETAILS OF RELATED PERSON* (Please refer instruction G at the end)

Addition of Related Person Deletion of Related Person Update Related Person details
 KYC Number of Related Person (if available*) If KYC number is available, only 'Related Person Type' and 'Name' is mandatory
 Related Person Type* Director Promoter Karta Trustee Partner
 Authorised Signatory Court Appointed Official Beneficiary

1.1 PERSONAL DETAILS(Please refer instruction G.I at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<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 <input type="checkbox"/> Others	Nationality*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/>)	
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	
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector)	<input type="checkbox"/> Government Sector)	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)	
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed	<input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorised		

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

ADDITIONAL DETAILS REQUIRED* (If applicant is resident outside India for tax purposes)
 ISO 3166 Country Code of Jurisdiction of Residence* Tax Identification Number or equivalent (If issued by jurisdiction)*
 Place / City of Birth* ISO 3166 Country Code of Birth*

1.3 PROOF OF IDENTITY (PoI)*(Please refer instruction G.III at the end)

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

A- Passport Number Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

1.4 PROOF OF ADDRESS (PoA)*(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

1.4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction G.IV at the end)

Address Type* Residential / Business Residential Business Registered Office Unspecified
 Proof of Address* Passport Driving Licence UID (Aadhaar)
 Voter Identity Card NREGA Job Card Others

Line 1*

Line 2

Line 3

State / U.T Code* Pin / Post Code* City / Town / Village* ISO 3166 Country Code*

Annexure C2

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity | Controlling Person



Important Instructions:

- A) Fields marked with "*" are mandatory.
- B) Please fill the form in English and in BLOCK letters.
- C) List of two character ISO 3166 country codes is available at the end.
- D) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- E) KYC number of entity is mandatory for update application.

For office use only Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. DETAILS OF CONTROLLING PERSON* (Please refer instruction H at the end)

- Addition of Controlling Person
- Deletion of Controlling Person
- Update Controlling Person details

KYC Number of Controlling Person (if available*)

Type of control*

- In case of Legal Person Ownership Other Means Senior Managing Officials
- In case of Trust Settlor Trustee Protector Beneficiary Other
- In case of Other Legal arrangement Settlor-Equivalent Trustee-Equivalent Protector-Equivalent Beneficiary -Equivalent Other-Equivalent

1.1 PERSONAL DETAILS(Please refer instruction H.I at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<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 <input type="checkbox"/> Others			
Nationality*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> <input type="text"/>)			
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			
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <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) <input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorised			
ISO 3166 Country Code of Jurisdiction of Residence*	<input type="text"/>	Tax Identification Number or equivalent (If issued by jurisdiction)*		<input type="text"/>
Place / City of Birth*	<input type="text"/>	ISO 3166 Country Code of Birth*		<input type="text"/>

1.2 PROOF OF IDENTITY (PoI)* (Please refer instruction H.II 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"/>

1.3 PROOF OF ADDRESS (PoA)*(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

1.3.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction H.III at the end)

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)			
Address	<input type="checkbox"/> Voter Identity Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others <input type="text"/> please specify			
Line 1*	<input type="text"/>			
Line 2	<input type="text"/>			
Line 3	<input type="text"/>			
State / U.T Code*	<input type="text"/>	Pin / Post Code*	<input type="text"/>	ISO 3166 Country Code*

2. 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"/>	Tel. (Res)	<input type="text"/>	Mobile	<input type="text"/>
FAX	<input type="text"/>	Email ID	<input type="text"/>		

3. APPLICANT 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/we am/are aware that I/we may be held liable for it.
- My/Our personal KYC details may be shared with Central KYC Registry.
- I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

[Signature / Thumb Impression]

Signature / Thumb Impression of Applicant

Date : - - Place :

4. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Self-Certified True Copies Notary

Risk Category High Medium Low

IN PERSON VERIFICATION CARRIED OUT BY

INSTITUTION DETAILS

Identity Verification Done Date - -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

Name

Code

[Employee Signature]

[Institution Stamp]