

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

IN-DP-20-2015 NSDL IN301485, SEBI Regn. No.; INZ000004234 NSE & BSE

Important Instructions:

- A) Fields marked with '✓' are mandatory fields.
 B) Tick ' ' wherever applicable
 C) Please fill the form in English and in BLOCK letters.
 D) Please fill the date in DD-MM-YYYY format.
 E) For particular section update, please (✓) in the box section number and strick off the sections not required to be update

- F) Please read section wise detailed guidelines / instructions at the end.
 G) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
 H) List of two character ISO 3166 country codes is available at the end.
 I) KYC number of applicant is mandatory for update application.
 J) The "OTP" based "E-KYC" check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode



For office use only

Application Type* ☐ New ☐ Update

KYC Mode -

(To be filled by financial institution)

KYC Number

(Mandatory for KYC update request)

Account Type*

☐ Normal

☐ Minor

☐ Aadhar OTP based E-KYC (in non-face to face mode)

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"/>			
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			
PAN*	<input type="text"/>		<input type="checkbox"/> Form 60 furnished	

PHOTO *

Please affix your recent passport size photograph and Sign across it
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Gross Annual Income Details

Income Range per Annum (please tick any one)

- ☐ Below Rs. 1 Lac ☐ Rs. 1 - 5 Lac ☐ Rs. 5 - 10 Lac ☐ Rs. 10 - 25 Lac ☐ Rs. 25 - 50 Lacs
☐ Rs. 50 Lacs - 1 Crore ☐ More than Rs. 1 Crore.

Net Worth (Net worth should not be older then 1 year): Amount/ as on (date).....

2. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)

i (Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number Passport Expiry Date
☐ B- Voter ID Card
☐ C- Driving Licence Driving Licence Expiry Date
☐ D- NREGA job Card
☐ E- National Population Register Letter
☐ F- Proof of Possession of Aadhar

ii ☐ E-KYC Authentication

iii ☐ Offline verification of Aadhar

Address

Line 1*
 Line 2
 Line 3 City / Town / Village*
 District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

☐ **3. CURRENT ADDRESS DETAILS** (Please refer instruction B at the end)

☐ Same as above mentioned address (In such cases address details as below need not be provided)

i (Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

☐ A- Passport Number

Passport Expiry Date

☐ B- Voter ID Card

☐ C- Driving Licence

Driving Licence Expiry Date

☐ D- NREGA job Card

☐ E- National Population Register Letter

☐ F- Proof of Possession of Aadhar

ii ☐ E-KYC Authentication

iii ☐ Offline verification of Aadhar

iv ☐ Deemed Proof Of Address Document Type Code

Address Line 1*

Line 2

Line 3 City / Town / Village*

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

☐ **4. FATCA-CRS Declaration & Supplementary KYC Information**

* Is Country for tax Residency other than India Yes ☐ No ☐

* Self Declaration - Are you US Person Yes ☐ No ☐

* Place of Birth

* Specify Country residence for tax purpose

* Specify Tax Identification Number / Other (SSN/CIN/Others)

I/We agree that as may be required by domestic regulatory, you may also be required to report, reportable details to CBDT or such other Income Tax Authorities as maybe applicable in India or close/suspend my/our Account. I/We agree to submit a new from within 30 days if any information/ certification on this from becomes incorrect.

☐ **5. 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

Email ID

☐ **6. REMARKS (If any)**

☐ **7. APPLICANT DECLARATION & CONSENT FOR SHARING THE AADHAAR DATA AND DOCUMENTS WITH KRA FOR VALIDATION PURPOSES.**

I hereby declare that the KYC details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

I hereby consent to receiving information from Central KYC Registry and KRA through SMS/Email on the above registered number/email address.

I am aware of other modes of KYC which are available and I have chosen Aadhaar based method voluntarily. My Aadhaar record can be used by KRA and Central KYC Registry for the specific purpose of validating/maintaining /sharing my KYC record and as an audit evidence. I will have an option to request for deletion of my Aadhaar record.

I am also aware that for aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details I hereby consent to sharing my masked Aadhaar card with readable QR code or my Aadhaar XML / Digilocker XML file, along with passcode and as applicable, with KRA and other intermediaries with whom I have a business relationship for KYC purposes only.

I hereby consent to KIFS Trade Capital Private Limited to download and utilize my personal data from CKYC / KRA for verification and data update purposes.

Date : Place :

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Signature / Thumb Impression of Applicant

☐ **8. ATTESTATION AND IN PERSON VERIFICATION (IPV) DETAIL / FOR OFFICE USE ONLY**

Documents Received ☐ Certified Copies (Self Attested) ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification ☐ Digital KYC Process ☐ Equivalent e-document

KYC VERIFICATION CARRIED OUT BY

Date

Emp. Person Name

Emp. Code

Emp. Designation

Emp. Branch

[Sign of person who has done]

INSTITUTION DETAILS

Name **KIFS TRADE CAPITAL PRIVATE LIMITED**

Code **I N 0 1 4 4 / NDML MIID - P1192**



KIFS

CIN NO : U65923GJ2012PTC115683

KIFS TRADE CAPITAL PRIVATE LIMITED

Regd.Offi.: Office Nos. PO6-01A, 01B & 01C, 6th Floor, WTC Tower-A, Block No. 51, Road 5 E, Zone 5, Gift City, Gandhinagar – 382355, Gujarat, India. Head Offi.: KIFS Corporate House, 4th Floor Iscon-Ambli Road, Beside Hotel Planet Landmark, Nr. Ashok Vatika BRTS, Ambli, Ahmedabad-380054. Ph.: +91 79 - 69240000 to 09