

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*	<input checked="" type="checkbox"/> New <input type="checkbox"/> Updated
(To Be Filled By Financial Institution)	KYC Number	_____ (Mandatory For KYC Update Request)
	Account Type*	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Minor <input type="checkbox"/> Aadhaar OTP based E-KYC(non-face to face mode)

1. Personal Details

Name*			
Maiden Name (If any*)			
Father/Spouse Name*			
Mother Name*			
Date of Birth*			
Gender*		Marital Status*	<input checked="" type="checkbox"/>
Citizenship*			
Residential Status*			
Occupation Type*			
Place/City of Birth*			
Country of Birth*			

2. Proof of Identity

PAN*		
Proof	Proof No	Proof ExpiryDate
<input type="checkbox"/> Passport		
<input type="checkbox"/> VoterID		
<input type="checkbox"/> Driving Licence		
<input checked="" type="checkbox"/> Proof Of Possession Of Aadhaar		

3. Proof of Address

Address Type*			
Proof of Address*			
Correspondence Address			
Address Line 1*			
Address Line 2			
Address Line 3			
City/Town/Village*		State*	
Country*		PIN Code*	

Permanent Address			
Address Line 1*			
Address Line 2			
Address Line 3			
City/Town/Village		state*	
Country*		PIN Code*	


4. Contact Details

Tel.(Off.)		Tel.(Res.)	
Mobile No.*		Fax	
Email ID*			


5. Remarks(If any)

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6. Applicant Declaration

<ul style="list-style-type: none"> I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it. 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 only 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/We hereby consent to receiving information from KRA through SMS/Email on the above registered number/Email address I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our 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. 	
Date: Place:	
Checked the Sanction list available on UN Website and FATF Circular issued by the SEBI and after checking the list and circulars the KYC is APPROVED.	

7. Attestation/For Office use only

Document Received	3 (SIGNATURE VERIFIED AS PER OUR RECORD)			
<input checked="" type="checkbox"/> Certified Copies <input type="checkbox"/> EKYC data received from UIDAI <input type="checkbox"/> Data Received from offline verification <input type="checkbox"/> Digital KYC Process <input type="checkbox"/> Equivalent e-document				
Intermediary/Institution Details		In-person verification(IPV), Documents verified with original & Client interviewed by		
Name	SHAH INVESTOR'S HOME LTD.	Employee/SB/AP name		
		Branch Name		
		Code	Designation	
SIHL Stamp		Signature		
CKYC Institution Code	IN0037	Date		
NDML KRA MI ID	P0293			
CVL KRA POS Code	1200000943			

Annual Income : <input type="checkbox"/> < 1 Lac <input type="checkbox"/> 1 Lac To 5 Lac <input type="checkbox"/> 5 Lac To 10 Lac <input type="checkbox"/> 10 Lac To 25 Lac <input type="checkbox"/> 25 Lac To 1 Crore <input type="checkbox"/> > 1 Crore
Annual Income Date :