

N Know Your Client (KYC)
Application Form (For Non-Individuals Only).

Application No. _____

Please fill this form in ENGLISH and in BLOCK LETTERS.

A. Identity Details (please see guidelines overleaf)

1. Name of Applicant (Please write complete name as per Certificate of Incorporation/Registration; leaving one b words. Please do not abbreviate the Name).

2a. Date of Incorporation _____ **2b. Place of Incorporation** _____

3. Registration No. (e.g. CIN) _____
Date of commencement of business DD/MM/YYYY _____

4. Status Please tick(✓)

- Private Ltd. Co. Public Ltd. Co. Body Corporate Partnership Trust/Charities/NGOs
 FI FII HUF FPI Category I FPI Category II FPI Category III AOP Bank
 Government Body Non-Government Organisation Defence Establishment Society
 Body of Individuals LLP Others Please specify

5. Permanent Account Number (PAN) (MANDATORY) _____ Please enclose a duly attested co

B. Address Details (please see guidelines overleaf)

1. Address for Correspondence

City / Town / Village _____ Pin Code _____

State _____ Country _____

2. Contact Details

Tel. (Off.) (ISD) (STD) _____ Tel. (Res.) (ISD) (STD) _____

Mobile (ISD) (STD) _____ Fax (ISD) (STD) _____

E-Mail Id. _____

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & ti the document attached.

- *Latest Telephone Bill (only Land Line) *Latest Electricity Bill
 *Latest Bank Account Statement Registered Lease / Sale Agreement of Office Premises
 Any other proof of address document (as listed overleaf) Please specify *Not more than 3 Months ol

4. Registered Office Address (If different from above) / Overseas Address-Mandatory for FIIs

Al
Si