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# KNOW YOUR CLIENT (KYC) Application Form - For Non Individuals

NEW  CHANGE REQUEST (Please tick ✓ the appropriate) Acknowledgement No. \_\_\_\_\_

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

**A**

## IDENTITY DETAILS (please see guidelines overleaf)

1. Name of the Applicant (Please write complete name as per Certificate of Incorporation/Registration; leaving one box blank between 2 words. Please do not abbreviate the Name.)
2. Date of Incorporation  /  /   Place of Incorporation
3. Registration No. (e.g. CIN)  Date of commencement of business  /  /
4. Status Please tick (✓)  Private Ltd. Co.  Public Ltd. Co.  Body Corporate  Partnership  Trust/Charities/NGOs  HUF  FI  FII  
 FPI Category I  FPI Category II  FPI Category III  AOP  Bank  Government Body  Non-Government Organization  
 Defence Establishment  Body of Individuals  Society  LLP  Others (Please Specify) \_\_\_\_\_
5. Permanent Account Number (PAN) (MANDATORY)  Please enclose a duly attested copy of your PAN Card

**B**

## ADDRESS DETAILS

1. Address for Correspondence
2. Contact Details  

Tel.(Off.)	<input style="width: 100%; height: 15px; border: 1px solid black; margin-bottom: 5px;" type="text"/>	Fax	<input style="width: 100%; height: 15px; border: 1px solid black; margin-bottom: 5px;" type="text"/>
Tel.(Res.)	<input style="width: 100%; height: 15px; border: 1px solid black; margin-bottom: 5px;" type="text"/>	Mobile No.	<input style="width: 100%; height: 15px; border: 1px solid black; margin-bottom: 5px;" type="text"/>
E-mail Id	<input style="width: 100%; height: 15px; border: 1px solid black; margin-bottom: 5px;" type="text"/>		
3. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against 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 old. Validity/Expiry date of proof of address submitted  /  /
4. Registered Address (If different from above)
5. Proof of Address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against 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 old. Validity/Expiry date of proof of address submitted  /  /

**C**

## Other Details (please see guidelines overleaf)

1. Name, PAN, DIN/Aadhaar Number, residential address and photographs of Promoters/Partners/Karta/Trustees/Whole Time Directors  
(Please use the Annexure to fill in the details)
2. Any other information: \_\_\_\_\_

### 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 am/wé are aware that I/we may be held liable for it.

Place:

Date:

### NAME & SIGNATURE(S)

#### OF AUTHORISED

#### PERSON(S)

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### FOR OFFICE USE ONLY

AMC/Intermediary name OR code

(Originals Verified) Self Certified Document copies received  
 (Attested) True copies of document received

Seal/Stamp of the Intermediary should contain

Staff Name

Designation

Name of the Organization

Signature

Date

## Details of Promoters / Partners / Kartas / Trustees and Whole Time Directors forming part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant \_\_\_\_\_

### PAN of the Applicant

Name & Signature of the Authorised Signatory(ies)

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