KNOW YOUR CLIENT (KYC) APPLICATION FORM - For Individuals

PLEASE fi	II THIS fo	orm in I	ENGLISH a	and in I	BLOCK L	ETTERS

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		ID	ENTITY DETA	AILS				
Name of the								PHOTOGRAPH
FATHER'S/ SPOU								_ x
Gender	☐ Male ☐	Female	Marital STAT	US	☐ Married	d □ Un	married	
Date of birth			Nationality					Please affix yo recent passpo
STATUS	□Resident	Individua	□NonRe	eside	ent □ Forei	gn Na	tional	size photograp
PAN			Unique ID I	No./	Aadhaar, if a	any:		and sign across it
Specify the pr	oof of Identit	y SUBMITT	ΓED					
			ADDI	RES	S DETAILS			
Corps. Add.	□Residence	□Office	Э		Permn. Add.	(If different fr	rom Corps. Add. or overseas	add. mandatory for Non-Resi. Applicant)
-							'	, , , , , ,
City		Pin			City			Pin
State		Country			State		Cou	untry
Resi No.(s)	0	ff. No.(s)			Resi No. (s)		Off. No	o. (s)
Fax No. (s)					Fax No. (s)		<u> </u>	
Mobile No.					Mobile No.			
Email					Email			
Specify the pr	oof of add. s	ubmitted	for Corps. A	dd.	Specify the p	roof of	add. submitte	ed for Permanent Add.
			OTH	HER	DETAILS			
Gross Annual	Income deta	ails (pleas	se specify) : I	Inco	me Range p	er anr	num	
			01/- to Rs. 5,0	0,00			,001/- to Rs.	* *
□Rs. 10,00,00	01/- to Rs. 25	,00,000/-	OR		□Ab	ove R	s. 25,00,001	/-
Net worth as	on Date :					(Ne	t worth should n	not be older than 1 year)
2. Occupation	(PLEASE tick	□Private	Sector □Pul	blic :	Sector □Gov	ernme	nt Service □ E	Business □Student
any one and g	give brief	□Profes	sional 🗆 A	gricı	ulturist □Ref	tired		Housewife ☐ Others
DETAILS)								
		□Politica	Illy Exposed P	erso	n (PEP) □ Re	latedto	a Politically E	xposed Person (PEP)
4. Any other in	nformation							
					RATION			
Name:				lace				ate:
	C	Client Sigr				,		
			FOR OF	-FIC	E USE ONL'	Y		
Gross Annual Income details (pulpto Rs. 1,00,000/- Property Rs. 1,00,000/- Rs. 1,00 Property Rs. 10,00,001/- to Rs. 25,00,000 Property Rs. 10,000 Property			nature of the	AUTI		atory	Seal/Stamp	of the intemediary
	s ot aocuments	Nar	ne		Signature			
	ed) Self Certifie	ed Des	signation		Date			
`	,		ngriation		Date			

		BANK A	ACCOUNT(S	S) DETA	ILS				
No.	Bank Name, Branch Ado	Account No.		A/c Typ	e MICR	No.	IFSC Co	Code	
1									
2									
	Please pro	ovide Cancelle	ed Cheque	leaf for	MICR & IF	SC Code			
		DEPOSITO	RY ACCOL	INT(S) D	ETAILS				
Sr. No.	Dp Name	Beneficiary	ficiary Name		ID No.	BO ID	Depository Name		me
1*								SDL/CDSL	
2						NSDL/CDSL			
*Share	es bought by you will be	transferred to	your DP A	c stated	by you a	t Sr. No. 1	1		
		TRAD	ING PREFE	RENCE	<u> </u>				
*Please	sign in the relevant boxes v					en should be s	truck	off by the clie	ent.
Ex. Seg	ment Cash	<u> </u>			F	& O		-	
BSE/NSI				X					
DOE/NO									
Specify In case of authoris	sh to receive Electronic Con your Email id,: of non-individuals, name, do sed to deal in securities her information	ntract Note - Pe	N, UID, signa	Email II	D: sidential ac	dress and ph	otogra		YES
			DECLARAT						
and b inforr be he	hereby declare that the coelief and I/we undertake mation is found to be false eld liable for it.	to inform you o or untrue or m	of any chan nisleading o	ges the r misrep	rein, imme resenting	ediately. In ca , I am/we are	ase ar awar	ny of the ab e that I/we	oove may
of the	confirm having read/been or e stock broker and the to further confirm having rea	ariff sheet.				·	•	·	
'Risk l I/We	Disclosure Document'. I/W have also been informed t er's designated website, i	e do hereby ag hat the standa	ree to be bou	ınd by sı	ıch provisio	ns as outline	d in the	ese docume	ents
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