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.



									E PA	# BARTE
For office use only	Application Type*	□New	Updat	te						
(To be filled by financial instit						(Mandate	ory for	KYC update	request)	
	Account Type*	☐ Normal	I Simpl	lified (for lo	ow risk c	ustomers)		Small		
☐ 1. PERSONAL DETA	ILS (Please refer instructio	on A at the end))							
		First Name			Middle Na	ame			Last Name	
☐ Name* (Same as ID proo	f)									
Maiden Name (If any*)										
Father / Spouse Name*										
Mother Name*										
Date of Birth*	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	YY							PH	ото
Gender*	☐ M- Male		☐ F- Female	е	☐ T-Traı	nsgender				
Marital Status*	☐ Married		Unmarrie	d	Other	s				
Citizenship*	☐ IN- Indian		☐ Others (I	SO 3166	Country	Code)			
Residential Status*	☐ Resident Individual		☐ Non Resi	dent India	n					
	☐ Foreign National		Person of	f Indian Or	rigin					
Occupation Type*			☐ Public Se	ctor 🗌	Governn	nent Sector)			
		essional	Self Empl	loyed \square	Retired	Housew	vife	Student)		
	_ x rect datageneda									
☐ 2. TICK IF APPLICA	BLE RESIDENCE FO	R TAX PURF	POSES IN JU	RISDICTI	ON(S) O	UTSIDE INI	DIA (Ple	ease refer inst	truction B at	the end)
ADDITIONAL DETAILS RE	EQUIRED* (Mandatory only	y if section 2 is	ticked)							
ISO 3166 Country Code of	f Jurisdiction of Residence	ce*								
Tax Identification Number	or equivalent (If issued by	jurisdiction)*								
Place / City of Birth*			ISO 3166 C	ountry Co	de of Bir	th*				
☐ 3. PROOF OF IDENT	ITY (Pol)* (Please refer in	nstruction C at t	the end)							
(Certified copy of any one of the	he following Proof of Identity	[Pol] needs to l	be submitted)							
☐ A- Passport Number				Pa	ssport E	xpiry Date		D D — M	М — У У	YY
☐ B- Voter ID Card										
☐ C- PAN Card										
☐ D- Driving Licence				Dr	iving Lice	ence Expiry	Date	D D — M	M - Y Y	YY
☐ E- UID (Aadhaar)					J	. ,	L			
☐ F- NREGA Job Card										
Z- Others (any documer	nt notified by the central gove	ernment)			Iden	tification Nu	mber			
							L			
4 PROOF OF APPE	DESS (DoA)*									
_		SE DETAILS	(Please see in	etruction D	at the and	1)				
_					at the cilu	')				
	-	_		_	einoee		Pogisto	rod Office		nanaaifiad
		_					vedisiei	eu Oilice	⊔U	nspecified
□.	te of Birth* Inder* M. Male F- Female T-Transgender Intel Status* Married Unmarried Others Izenship* IN- Indian Others (ISO 3166 Country Code) Isidential Status* Resident Individual Person of Indian Origin Isidential Status* Resident Individual Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Isidential Status* Resident Individual Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* S-Service (Professional Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Person of Indian Origin Person of Indian Origin Person of Indian Origin Icupation Type* Service (Professional Person of Indian Origin Person of Indian									
□s		unt - Docum	ent Type cod							
Address										
Line 1										
Line 3						City / Towr	า / Villa	ge*		
District*	Din	/ Post Code*		-	State / LL			-	Country Cor	de*

4.2 CORRESPO	ONDENCE	/ LOCAL	ADDRES	S DETA	ILS * (F	Please	see in	structi	ion E at	t the	end)											
☐ Same as Currer	nt / Perman	ent / Ove	rseas Add	ress de	tails (Ir	n case	of mul	tiple c	orrespo	onde	ence / I	ocal a	ddre	esses	s, plea	ase fill	'Annex	ure A1	l')			
Line 1*										_			_									
Line 2										+			_	0:4	/ T	()	/:U: - *					
Line 3 District*				Die	n / Pos	t Cod	0*			_	St.	ate /		-		wn / v	'illage*	3166	S Cou	ntry C	ode*	
District				FII	17 FUS	i Cou	с				Ot	atc /	0.1	000			100	0100	, 00u	iiay O	ouc	
4.3 ADDRESS I	IN THE JUF	RISDICTION	ON DETA	LS WH	ERE AF	PPLICA	ANT IS	RESI	DENT	OUT	SIDE	INDIA	FO	R TA	X PU	RPOS	ES* (Ap	plicab	le if se	ection 2	is tick	ed)
Same as Currer	nt / Perman	ent / Ove	rseas Add	ress de	tails				Same	as C	orresp	onder	nce /	/ Loc	al Ad	dress	details					
Line 1*													+	<u> </u>								
Line 2										+					/ Tova	m / Mi	llage*					
Line 3 State*									ZIP / P	ost	Code	*		Jily	/ 10W	/II / VI		3166	Cour	itry Co	de*	
otato											0000									, ,		
5. CONTACT	DETAILS (All commu	unications v	vill be se	ent on pr	ovided	Mobile	no. / [Email-ID) (PI	ease re	efer ins	struct	tion F	at the	e end)						
Tel. (Off)					Tel	. (Res	()								Мо	bile						
FAX					Em	nail ID																
□ 6 DETAILS O	E DEL ATE	n DEDG	ON (In c	es of a	ditional	rolator	l norco	ne nlo	aco fill '	Anno	vuro P	1' \ (nl	0200	rofo	r inetr	uction (C at the	and)				
6. DETAILS O		_	on of Relat			- ciale(, hei 201		Numbe								at tile (ind)				
Related Person Typ		_	dian of Mi				Assign		Tarribe	01						ntative)					
,		Prefix			irst Na							ddle N							Last	Name		
Name*		(If KVC n	umber and	nomo o	ro provis	lod bo	low dot	oilo of	nontion	6 05	o ontion	201)										
										0 ale	e optioi	iai)										
PROOF OF IDEI		OF RELAT	TED PERS	ON* (Pl	ease see	e instru	ction (F	l) at th	e end)													1
A- Passport N											Pass	port	Exp	iry [Date		D D	— M	IVI	YY	YY	
☐ B- Voter ID Ca	ard																					
C- PAN Card																						
☐ D- Driving Lice											Drivi	ng Li	cend	ce E	xpiry	Date	D D	— IVI	IVI -	YY	Y	
☐ E- UID (Aadha —	aar)																					
☐ F- NREGA Jol —																						
Z- Others (any			-	_												ımbeı						
S- Simplified I	Measures	Account	- Docui	ment T	ype co	de						lde	ntifi	catio	on Nu	umbei						
☐ 7. REMARKS	(If any)																					
8. APPLICAN	NT DECLA	ARATIO	N																			
I hereby declare that t	the details furnis	shed above a	re true and co	rrect to th	e best of	my kno	wledge a	nd belie	fand I u	nderta	ake to inf	orm you	of an	y char	nges							
therein, immediately. I for it.	In case any of the	ne above info	rmation is fou	nd to be f	alse or unt	rue or m	sleading	or misre	presentin	g, I an	n aware	that I ma	ay be	held li	able							
I hereby consent to re	eceiving informa	tion from Cer	ntral KYC Red	istry throu	ah SMS/E	mail on t	he above	reaister	ed numbe	er/ema	ail addres	ss.										
	M M - 3	/ Y Y	Υ	Pla													Signature	/ Thum	b Impre	ssion of	Applican	t
9. ATTESTAT	ION / FOF	ROFFIC	E USE C	NLY																		
Documents Rece	ived	Certified	Copies																			
	KYC VERIF	ICATION (CARRIED	OUT BY										11	NSTIT	UTION	DETAIL	S				
Date	D D	- M M	- Y Y	YY					Name	. [T								
Emp. Name									Code					+								
Emp. Code																						
Emp. Designation																						
Emp. Branch																						

Annexure B1

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Related Person

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 of the sections not required to be updated.



For office use only (To be filled by financial institu	Application Type* New Update		
(10 be filled by fillaricial frishing	ulion) KTC Number	(Mandatory for KYC update request)	
☐ 1. DETAILS OF RELAT	ED PERSON (Please refer instruction G at the end)		
Addition of Related Person	Deletion of Related Person KY	C Number of Related Person (if available*)	
Related Person Type*	☐ Guardian of Minor ☐ Assignee	☐ Authorized Representative	
Name*	Prefix First Name	Middle Name Last Name	
	(If KYC number and name are provided, below details of	i section 1 are optional)	
PROOF OF IDENTITY (Pol	I) OF RELATED PERSON* (Please see instruction (H) at	the end)	
☐ A- Passport Number		Passport Expiry Date	
☐ B- Voter ID Card			
☐ C- PAN Card			
☐ D- Driving Licence		Driving Licence Expiry Date DD - MM - Y Y Y Y	
☐ E- UID (Aadhaar)			
☐ F- NREGA Job Card			
Z- Others (any document	nt notified by the central government)	Identification Number	
☐ S- Simplified Measures	s Account - Document Type code	Identification Number	
2. APPLICANT DECL	ARATION		
I hereby declare that the details furn	nished 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 liable for it.	f the above information is found to be false or untrue or misleading or mi	isrepresenting, I am aware that I may be held [Signature / Thumb Impression]	
Date : DD - MM -	Y Y Y Y Place :	Signature / Thumb Impression of Applicant	
	AD 055105 HOT 0111 V		
3. ATTESTATION / FO	OR OFFICE USE ONLY		
Documents Received	Certified Copies		
KYC VER	IFICATION CARRIED OUT BY	INSTITUTION DETAILS	
Date	D - M M - Y Y Y Y	Name	
Emp. Name		Code	
Emp. Code			7
Emp. Designation			
Emp. Branch			
		[Institution Stamp]	
	[Employee Signature]		

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

General Instructions:

8

- 1 Fields marked with '*' are mandatory fields.
- 2 Tick '√' wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- For particular section update, please tick (🗸) in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.

A Clarification / Guidelines on filling 'Personal Details' section

- 1 Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1 **Tax identification Number (TIN):** TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C Clarification / Guidelines on filling 'Proof of Identity [PoI]' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant's photograph issued by Central/State Government Departments, Statutory/Regulatory Authorities, Public Sector
	Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

- 1 PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3 In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Louc may be member	ica in point 4.1.
Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water
	bill).
02	Property or Municipal Tax receipt.
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if
	they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies,
	public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements
	with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

F Clarification / Guidelines on filling 'Contact details' section

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2 Do not add '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Related Person details' section

Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1 Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

List of two – digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code
Andaman & Nicobar	AN
Andhra Pradesh	AP
Arunachal Pradesh	AR
Assam	AS
Bihar	BR
Chandigarh	CH
Chattisgarh	CG
Dadra and Nagar Haveli	DN
Daman & Diu	DD
Delhi	DL
Goa	GA
Gujarat	GJ
Haryana	HR

State / U.T	Code
Himachal Pradesh	HP
Jammu & Kashmir	JK
Jharkhand	JH
Karnataka	KA
Kerala	KL
Lakshadweep	LD
Madhya Pradesh	MP
Maharashtra	MH
Manipur	MN
Meghalaya	ML
Mizoram	MZ
Nagaland	NL
Orissa	OR

State / U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarakhand	UA
West Bengal	WB
Other	XX

List of ISO 3166 two- digit Country Code

April Description Part	Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Mand blands	Afghanistan		Dominican Republic		Libva		Saint Pierre and Miguelon	PM
Manager 1								VC
Algorithment								WS
Assemble								SM
Section								ST
Image			•					
April	Andorra		Eritrea			MK	Saudi Arabia	SA
Antiques and Barbuda A G Farrie Indians' (Mahinna) PK Malaysia My Stera Legenders No Formatiques and Barbuda A G Farrie Indians' FP Malifers PJ Malifers MY Stera Legenders A R Pill Malifers PJ Malifers MY Stera Legenders A R Pill Malifers PJ Malifers MY Stera Legenders A R Pill Malifers MY Stera Legenders MY	Angola	AO	Estonia	EE	Madagascar		Senegal	SN
Integrate and advanded AG Far or Islands PO Madicines MV Sirrar Leone Sirr	Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Integrate and advanded AG Far or Islands PO Madicines MV Sirrar Leone Sirr	Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Age Pipe P				FO				SL
Namela AM Finland FI Mate MT Sint Mararen (Dutch part) S Visuba AV French Gulana FR Marshall Blands MT Slovenia S Sustria AV French Gulana FR Membrane MR Slovenia S Sustria AV French Gulana GP Martinique MR Slovenis Blands S Salabrados BS Gabbon Gabon GA Mayorite V South Africa Z Salabrados BB Gerega GE Micronesia, Federated States of FM South Africa S Salabrados BB Germany DE Moltova, Pupulsio of MD Spatia E Beligion BE Girental GL Montova MM South Sadan S Seletic BE Girental GL Montova MM South Sadan S Seletic BE Girental GL Montova <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>SG</td>								SG
Name								SX
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AT French Polymeia PF Mauritania MR Solomon islands Stewbrailian AZ French Southern Ferritories TF Mauritania MU Somalia Stabharns BS Gabon GA Miryotte Yf South Africa Zabharns GA Miryotte Yf South Africa Zabharns Zabharns GA Miryotte Yf South Africa Zabharns								
Name								SI
Sahamans								SB
Sahrain								SO
Sampladesh	Bahamas	BS	Gabon	GA		YT	South Africa	ZA
Sampledesh	Bahrain	ВН	Gambia	GM	Mexico	MX		GS
Barbados	Bangladesh	BD	Georgia	GF	Micronesia, Federated States of	FM		SS
Selection								ES
Selegium								LK
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Sonaire Sona	Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Sonaire destatus and saba SQ	Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	СН
	Bonaire, Sint Eustatius and Saba	BO		GT		NA	Syrian Arab Republic	SY
Setswan								TW
Souver Lisland BV Guines-Bissau GW Netherlands NL Tanzania, United Republic of Brazil BR Guyana GY New Caledonia NC Thalland The Care of C								TJ
Brazil BR Guyana GY New Zeledonia NC Thailand The Strict The Stri								TZ
British Indian Ocean Territory IO								
Brunel Darussalam BN Heard Island and McDonald Islands BN Kolly See (Vation City State) VA Niger NE Tokelau TRebutina Fao BF Honduras BF H			•					
Bulgaria BG			11010					TL
Berkhan Faso BF Honduras HN Nigeria NG Tonga T Tonga Burundi BI Hong Kong HK Niue NU Trinidad and Tobago T Tonga Cabo Verde CV Hungary HU Norfolk Island NF Tunisia T T T T Tunisia T T T T Tunisia T T T T T T T T T T T T T T T T T T T	Brunei Darussalam		Heard Island and McDonald Islands		Nicaragua			TG
Burundi BI Hong Kong HK Niue NU Trinidad and Tobago T Cabo Verde CV Hungary HU Norfolk Island NF Tunisia T T Cabo Verde CV Hungary HU Norfolk Island NF Turkey T T Cameroon CM India IN Northern Mariana Islands MP Turkey T T Cameroon CM India IN Norway NO Turks and Calcos Islands T T Cameroon CM India IN Norway NO Turks and Calcos Islands T T Cameroon CM India IN Norway NO Turks and Calcos Islands T T Cameroon CM India IN Norway NO Turks and Calcos Islands T T Cameroon CM Turks and Calcos Islands T T Cameroon CM Turks and Calcos Islands T T Cameroon CM Turks and Calcos Islands T T T Cameroon CM Turks and Calcos Islands T T T Cameroon CM Turks and Calcos Islands T T T Cameroon CM Turks and Calcos Islands T T T Cameroon CM Turks and Calcos Islands T T Cameroon CM Turks Turks T Turks	Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Cabo Verde CV Hungary HU Norfolk Island NF Tunksia T Tachmodia KH Iceland IS Northern Mariana Islands MP Turkey T T Cameroon CM India IN Norway NO Turkmenistan T Canada CA Indonesia ID Oman OM Turks and Calcos Islands T Cambadia KY Iran, Islamic Republic of IR Pakistan PK Tuvalu T T Central African Republic CF Iraq IQ Palau PW Uganda Uchanda IE Palestine, State of PS Ukraine Chad T D Ireland IE Palestine, State of PS Ukraine U Ustraine U Uchile Chile CK Island CK Island II Papua New Guinea PA United Arab Emirates A China CN Israel IL Papua New Guinea PG United Kingdom G Christmas Island CX Italy IT Paraguay PY United States Cocos (Keeling) Islands CC Jamaica JM Peru PE United States Minor Outlying Islands U Comoros KM Jersey JE Piticairn PN Uzbekistan Congo CG Jordan JD Poland PL Vanuatu V Congo, the Democratic Republic of CD Kazakhstan KE Polanda JO Poland PL Vanuatu V Congo, the Democratic Republic of CD Kazakhstan KE Puerto Rico PR Viet Nam V Coota Rica CR Kiribati GR Kribati KI Qatar QA Virgin Islands, British V Cota Rica CR Kiribati CK Kenya KE Puerto Rico PR Viet Nam V Cota Rica CR Kiribati KI Qatar QA Virgin Islands, British V Cota Rica CR Kiribati KW Romania RO Wallis and Futuna P Cota Cota Create Cover	Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
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