## KNOW YOUR CLIENT (KYC) APPLICATION FORM – FOR INDIVIDUALS (Please fill this form in ENGLISH and in BLOCK LETTERS)

<b>A. IDENTITY DE</b> 1 Name of the <i>A</i>								-	
1. Name of the Applicant:								Please affix your recent passport size photograph and sign across it	
b. a. Nation b. Statu b. Statu b. PAN b. Uniq	onality: us: Resident Indi : ue Identification	vidual / Non Resident / Fo	reign Nat				and sign c		
		bmitted:							
B. ADDRESS DETAILS  Address for correspondence				Permanent Address (if different from correspondence address OR Overseas address ( mandatory ) for Non-Resident Applicant)					
	age:	Pin Code:				Pin Code: untry:			
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Signature of Applicant				Date: d d m m y y y					
		FOR (	OFFICE U	SE ONLY					
(Self-Atteste	ed) Self Certified	Document copies receive	d	True copies	s of docume	nts received (Ori	ginals verific	ed)	
IPV Details	Signature	In person verification of	lone by	Relationsh	nip with the	Intermediary / De	esignation	Date o IPV	
Signature of the	Authorized Sign		e of the la	ntermediary		 Spal/Star	mp of the int		
Date d d	m m y	y y y	o or uit ii	nomiculary		Ocal/Otal	ייף טו נוו <del>ט</del> וווני	omiculary	