

**Know Your Client (KYC)  
Application Form (For Individuals only)**

(Please fill the form in English and in BLOCK Letters)  
Fields marked with \*\* are mandatory fields

Application Type\*  New  Update  
 KYC Number\*   
 KYC Type\*  Normal (PAN is mandatory)  PAN Exempt Investors (Refer instruction K)

**1. Identity Details** (Please refer instruction A at the end)

PAN  Please enclose a duly attested copy of your PAN Card

Prefix	First Name	Middle Name	Last Name
Name* (same as ID proof)			
Maiden Name (If any*)			
Father / Spouse Name*			
Mother Name*			

Date of Birth\* DD - MM - YYYY

Gender\*  M- Male  F- Female  T-Transgender

Marital Status\*  Married  Unmarried  Others

Citizenship\*  IN- Indian  Others - Country \_\_\_\_\_ Country Code

Residential Status\*  Resident Individual  Non Resident Indian  
 Foreign National  Person of Indian Origin

Occupation Type\*  S-Service  Private Sector  Public Sector  Government Sector  
 O-Others  Professional  Self Employed  Retired  Housewife  Student  
 B-Business  X-Not Categorised

**Photo**

Signature/  
Thumb Impression

**2. Proof of Identity (Pol)\*** (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

(Certified copy of any one of the following Proof of Identity [Pol] needs to be submitted)

A- Passport Number  Passport Expiry Date DD - MM - YYYY

B- Voter ID Card

D- Driving Licence  Driving Licence Expiry Date DD - MM - YYYY

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government)  Identification Number

**3. Proof of Address (PoA)\***

3.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

**Address**

Line 1\*

Line 2\*

Line 3\*  City / Town / Village\*

District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988

State/UT\*  Country\*  Country Code  as per ISO 3166

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

**Proof of Address\***

Passport Number  Passport Expiry Date DD - MM - YYYY

Voter ID Card

Driving Licence  Driving Licence Expiry Date DD - MM - YYYY

Aadhaar Card

NREGA Job Card

Others (any document notified by the central government)  Identification Number

3.2 Correspondence / Local Address Details\* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary proof)

Line 1\*

Line 2\*

Line 3\*  City / Town / Village\*

District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988

State/UT\*  Country\*  Country Code  as per ISO 3166





Broker/Agent Code ARN		ARN -	
SUB-BROKER	XXXXXXX	EUIN	

**Name of the First Applicant :** \_\_\_\_\_

PAN Number : \_\_\_\_\_ KYC : \_\_\_\_\_ Date Of Birth : \_\_\_\_\_

Name of Guardian: \_\_\_\_\_ PAN: \_\_\_\_\_

**Contact Address:**

\_\_\_\_\_

City: \_\_\_\_\_ Pincode: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Tel.(Off): \_\_\_\_\_ Tel.(Res): \_\_\_\_\_ Email: \_\_\_\_\_

Fax(Off): \_\_\_\_\_ Fax(Res): \_\_\_\_\_ Mobile: \_\_\_\_\_

Mode of Holding: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Name of the Second Applicant :** \_\_\_\_\_

PAN Number : \_\_\_\_\_ KYC : \_\_\_\_\_ Date Of Birth : \_\_\_\_\_

**Name of the Third Applicant :** \_\_\_\_\_

PAN Number : \_\_\_\_\_ KYC : \_\_\_\_\_ Date Of Birth : \_\_\_\_\_

Other Details of Sole / 1st Applicant

Overseas Address(In case of NRI Investor):

City: \_\_\_\_\_ Pincode: \_\_\_\_\_ Country: \_\_\_\_\_

**Bank Mandate Details** Name of Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

A/C No.: \_\_\_\_\_ A/C Type: \_\_\_\_\_ IFSC Code: \_\_\_\_\_

**Bank Address:**

City: \_\_\_\_\_ Pincode: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

**Nomination Details** Nominee Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Guardian Name(If Nominee is Minor): \_\_\_\_\_

**Nominee Address:**

City: \_\_\_\_\_ Pincode: \_\_\_\_\_ State: \_\_\_\_\_

**Declaration and Signature** - I/We confirm that details provided by me/us are true and correct. The ARN holder has disclosed to me/us all the commission (In the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Fund From amongst which the schemes being recommended to me/us.

\_\_\_\_\_

1st applicant Signature : \_\_\_\_\_ 2nd applicant Signature : \_\_\_\_\_ 3rd applicant Signature : \_\_\_\_\_ Date : \_\_\_\_\_ Place : \_\_\_\_\_

---Place for Cancelled Cheque, for Single Page Scan---