NOW YOUR CLIENT (KYC) APPLICATION FORM PLEASE FILL ALL THE DETAILS IN CAPITAL LETTERS & BLACK INK ONLY FOR INDIVIDUALS				
Integ	rated since 1974	Application Type*	□ New □ Update KYC Number □ □ (Mandatory)	
Investm	nents Simplified	Account Type*	□ Normal □ Simplified (for low risk customers)	
1. IDENTITY DETAILS (Name of the Applicant* Mr. / Mrs. / Ms. (Same as per id pro		LS)	PHOTOGRAPH	
Maiden Name (if any*)				
Father / Spouse Name ³ Mr. / Mrs.	•		Please affix your recent Passport size Colour Photograph	
Mother Name* Mrs.				
PAN	attested copy of your PA	Date of Birth*		
		´		
AADHAAR No. L	ase enclose a self attest	ed copy of your AADHAA	R) Signature of the Applicant	
Gender*	☐ M- Male	☐ F- Female	e □ T-Transgender	
Marital Status*	☐ Married	☐ Unmarrie	d □ Others	
Citizenship*	☐ IN- Indian	☐ Others {Is	SO 3166 Country Code []	
Residential Status*	☐ Resident Indiv	idual 🗆 Non Resi	dent Indian □ Foreign National □ Person of Indian Origin	
Occupation Type*	☐ 0-0thers	(□ Private Sector (□ Professional □ X- Not Categorise	☐ Public Sector ☐ Government Sector) ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student) ed	
2. PROOF OF IDENTI	TY (Pol)* (Certific	ed copy of any one o	f the following Proof of Identity [Pol] needs to be submitted)	
□ A- Passport Number □ B- Voter ID Card □ D- Driving Licence □ E- UID (Aadhaar) □ Z- Others (any documen □ S- Simplified Measures A	Account - Document 1	Type code	Passport Expiry Date C- PAN Card Driving Licence Expiry Date F- NREGA Job Card Triving Licence Expiry Date	
3. ADDRESS DETAILS (· · · · · · · · · · · · · · · · · · ·		e following Proof of Address [PoA] needs to be submitted)	
Proof of Address*	Passport D Others	riving Licence [☐ Residential / Business ☐ Registered Office ☐ Unspecified ☐ UID (Aadhaar) ☐ Voter Identity Card ☐ NREGA Job Card ☐ Simplified Measures Account - Code ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
3.1 CURRENT / PERMA	NENT / OVERSEAS	ADDRESS DETAILS	3	
City / Town / Village /	District*		Pin Code*	
State*			State / U.T Code* ISO 3166 Country Code*	
3.2 CORRESPONDENCE	E / LOCAL ADDRES	S DETAILS Same	e as Current / Permanent / Overseas Address details	
City / Town / Village / D	istrict*		Pin Code*	
State* State / U.T Code* ISO 3166 Country Code*				
4. CONTACT DETAILS (All communications will be sent on provided Mobile No. / Email ID)				
Mobile No 9 1 –]	Tel. (Resi.)	
E-Mail ID				
Tel. (Off.)	-		Fax —	

5. Annual Income Details	
	s.5-10 lac Rs.10-25 lac More than 25 lac
6. REMARKS (if any)	
7. APPLICANT DECLARATION * I hereby declare that the details furnished above are true and correct to the best of immediately. In case any of the above information is found to be false or untrue of the state of th	r misleading or misrepresenting, I am aware that I may be held liable for it.
Signature of the Applicant	
8. ATTESTATION / FOR OFFICE USE ONLY Documents Received & Originals Verified □ Certified Copies	
IPV & KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date Emp. Name Emp. Code Emp. Designation Emp. Branch Emp. Sign	Name N T E G R A T E D