		NAMES AND STREET OF STREET OF STREET OF STREET OF STREET		
		App. No.		
Impoortant Instructions: A) Fields marked with '*' are mandated B) Please fill the form in English and in C) Please fill the date in DD-MM-YYYY D) Please read section wise detailed g E) List of state / U.T code as per India available at the end.	n BLOCK letters. / format. uidlines / instructions 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. 		
1. CENTRAL KYC REGISTRY	Know Your Customer (KYC) A	pplication Form Individual		
For office use only (To be filled by financial institution)	Application Type* New KYC Number Account Type* Normal	Update (Mandatory for KYC update request) Simplified (for tow risk customers) Small		
2.1 TICK IF APPLICABLE R	ESIDENCE FOR TAX PURPOSES IN	JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end) *		
ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticke	ed)		
ISO 3166 Country Code of Jurisdiction of Residence*				
Tax Identification Number or equivalent (if issued by jurisdiction)*				
Place / City of Birth* ISO 3166 Country Code of Birth *				
2.2 ADDRESS IN THE JURISD if section 2 is ticked) * Kindly re		ANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable		
Same as Current / Payment / Over		Same as Correspondence / Local Address details		
Line 1*				
Line 2				
Line 3		City / Town / Village*		
Stake*	ZIP	/ Post Code* ISO 3166 Country Code*		
☐ 3. PROOF OF IDENTITY (Pol)*	(Please refer instruction C at the e	nd)		
(Certified copy of any one of the follow	wing Proof of Identity[Pol] needs t	o be submitted)		
A- Passport Number		Passport Expiry Date DD — MM — Y Y Y Y		
B-Voter ID Card				
☐ C- PAN Card				
D- Driving Licence		Driving Licence Expiry Date		
E- UID(Aadhaar)				
F-NREGA Job Card				
Z-Others (any document notified by the	e central government)	Identification Number		
S-Simplified Measures Account		Identification Number		
	Document Type code	Identification (Author)		
4. PROOF OF ADDRESS (PoA)"				
4.1 CURRENT / PERMANENT / C	OVERSEAS ADDRESS DETAILS (P	lease see instruction D at the end)		
(Certified copy of any one of the follow	ving Proof of Address [PoA] need:	s to be submitted)		
Address Type* Residential / B		Business Registered Office Unspecified		
Proof of Address* Passport	☐ Driving Licence	UID (Aadhaar)		
☐ Voter Identity	Card NREGA Job Card asures Account - Document Type			
Current address (Correspondence /Loc		*ISO 3166 Country code:		
Permanent address : *State/U.T code :	*ISO 3166 Country code:	Overseas Address: *ISO 3166 Country code:		
5. DETAILS OF RELATED PERS	SON (In case of additional related p	ersons, please fill 'Annexure BV) (please refer instruction G at the end)		
Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)				
Related Person Type* Guardian of Minor Assignee Authorized Representative				

(If KYC number and name are provided, below details of section 6 are optional)

Name*

PROOF OF IDENT	TY [Pol] OF RELATED PERSON* (Please see instruc	etion (H) at the end)	
A- Passport Nu	mber	Passport Expiry Date	DD-MM-YYYY
☐ B-Voter ID Card			
C- PAN Card			
☐ D- Driving Lice	nce	Driving Licence Expiry Da	te DD—MM—YVY
E- UID(Aadhaa		icola ()	
F-NREGA Job (
(<u></u>	ocument notified by the central government)	Identification I	
	easures Account - Document Type code	Identification I	Number
6. PERSONAL	DETAIL OF APPLICANT		
Maiden Name(if any*):	Prefix First Name:	Middle Name:	Last Name:
If PIO : YES NO	Citizenship: IN - INDIAN Others (ISO 3166	Country Code)	
7. REMARKS	(If any)		
8. APPLICANT DE	CLARATION		
 I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of arty changes therein, immediately In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby consent to recerving information from Central KYC Registry through SMS/Emaii on 			
the above registered number/email address. Date ; DD — MM — Y Y Y Y Place*			Signature /Thumb Impression of Applicant
9. ATTESTATION	/ FOR OFFICE USE ONLY		
Documents Receiv	ed Certified Copies		
KYC VERIFICATION CARRIED OUT BY		INSTITUTION DETAILS	
Date		Name Name	
Emp. Name		Code	
Emp. Code			
Emp. Designation			
Emp. Branch		THE STATE OF THE S	
		Inst	itution Stamp]
	[Employee Signature]		
[[]		Inches	

Note to point 2.1 and 2.2: Part of FATCA Declaration" that is applicable for cases which are sourced along with MultiAdvnatage Savings Account. Seperatly FATCA declaration needs to be signed for all Savings Accounts sourced along with Car Loans.