



**A. IMPORTANT POINTS:**

1. Self attested copy of PAN card is mandatory for all clients.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent address are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OC Card and overseas address proof is mandatory.
8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
10. For opening an account with Depository participant or Mutual Fund, for a minor or photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/Judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

**B. Proof of Identity (POI):** List of documents admissible as Proof of Identity:

1. PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
2. Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.

**C. Proof of Address (POA):** List of documents admissible as Proof of Address: (\* Documents having an expiry date should be valid on the date of submission.)

1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale Agreement of

Residence/Driving License/Flat Maintenance bill/Insurance Copy.

2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill - Not more than 3 months old.
3. Bank Account Statement/Passbook - Not more than 3 months old.
4. Self-declaration by High Court and Supreme Court Judges, giving the new address in respect of their own accounts.
5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
6. Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc. to their Members.
7. For FI/sub account, Power of Attorney given by FI/sub-account to the Custodians (which are duly notarized and/or apostilled or consularised) that gives the registered address should be taken.
8. The proof of address in the name of the spouse may be accepted.

**D. Exemptions/clarifications to PAN**

(\* Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds upto Rs 50,000/- p.a.
5. In case of institutional clients, namely, FIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

**E. List of people authorized to attest the documents:**

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

**F. In case of Non-Individuals, additional documents to be obtained from Non-individuals, over & above the POI & POA, as mentioned below:**

Types of entity	Documentary requirements
<b>Corporate</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/MD (to be submitted every year)</li> <li>• Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations</li> <li>• Photograph, POI, POA, PAN of individual promoters holding control - either directly or indirectly</li> <li>• Copies of the Memorandum and Articles of Association and certificate of incorporation</li> <li>• Copy of the Board Resolution for investment in securities market</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Partnership firm</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Certificate of registration (for registered partnership firms only)</li> <li>• Copy of partnership deed</li> <li>• Authorised signatories list with specimen signatures</li> <li>• Photograph, POI, POA, PAN of Partners</li> </ul>
<b>Trust</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Certificate of registration (for registered trust only). Copy of Trust deed</li> <li>• List of trustees certified by managing trustees/CA</li> <li>• Photograph, POI, POA, PAN of Trustees</li> </ul>
<b>HUF</b>	<ul style="list-style-type: none"> <li>• PAN of HUF</li> <li>• Deed of declaration of HUF/List of coparceners</li> <li>• Bank pass-book/bank statement in the name of HUF</li> <li>• Photograph, POI, POA, PAN of Karta</li> </ul>
<b>Unincorporated Association or a body of individuals</b>	<ul style="list-style-type: none"> <li>• Proof of Existence/Constitution document</li> <li>• Resolution of the managing body &amp; Power of Attorney granted to transact business on its behalf</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Banks/Institutional Investors</b>	<ul style="list-style-type: none"> <li>• Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Foreign Institutional Investors (FII)</b>	<ul style="list-style-type: none"> <li>• Copy of SEBI registration certificate</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Army/Government Bodies</b>	<ul style="list-style-type: none"> <li>• Self-certification on letterhead</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Registered Society</b>	<ul style="list-style-type: none"> <li>• Copy of Registration Certificate under Societies Registration Act</li> <li>• List of Managing Committee members</li> <li>• Committee resolution for persons authorised to act as authorised signatories with specimen signatures</li> <li>• True copy of Society Rules and Bye Laws certified by the Chairman/Secretary</li> </ul>



**Important Instructions:**

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.
- F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.  
 G) List of two character ISO 3166 country codes is available at the end.  
 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

**For office use only**

Application Type\*

☐ New ☐ Update

(To be filled by financial institution) KYC Number

(Mandatory for KYC update request)

**1. ENTITY DETAILS\*** (Please refer instruction A at the end)

Name\*

Entity Constitution Type\*

☐ Others (Specify)

(Please refer instruction B at the end)

Date of Incorporation / Formation\*

Date of Commencement of Business

Place of Incorporation / Formation\*

Country of Incorporation / Formation\*

TIN or Equivalent Issuing Country

PAN \*

☐ Form 60 furnished

TIN / GST Registration Number

**2. PROOF OF IDENTITY (PoI)\*** (Please refer instruction B at the end)
☐ Officially valid document(s) in respect of person authorised to transact

☐ Certificate of Incorporation / Formation

☐ Registration Certificate

 Regn Certificate No.

☐ Memorandum and Articles of Association

☐ Partnership Deed

☐ Trust Deed

☐ Resolution of Board / Managing Committee

☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

☐ Activity Proof - 1 (For Sole Proprietorship Only)

☐ Activity Proof - 2 (For Sole Proprietorship Only)
**3. ADDRESS\*** (Please see instruction C at the end)**3.1 Registered Office Address / Place of Business\***

Proof of Address\*

☐ Certificate of Incorporation / Formation

☐ Registration Certificate

☐ Other Document

Line 1\*

Line 2

Line 3

District\*

PIN / Post Code\*

State / U.T Code\*

ISO 3166 Country Code\*

**3.2 Local Address in India (If different from Above)\***

Line 1\*

Line 2

Line 3

District\*

PIN / Post Code\*

State / U.T Code\*

ISO 3166 Country Code\*

**4. CONTACT DETAILS** (All communications will be sent to Mobile number/ Email-ID provided\* may be used) (Please refer instruction D at the end)

Tel. (Off)

FAX

Mobile

Email ID

Mobile

Email ID

**5. NUMBER OF RELATED PERSONS**


(Please refer instruction E at the end)

☐ 6. REMARKS (If any)

7. APPLICANT DECLARATION (Please refer Instruction G at the end)

- 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 any 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/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date :    -    -

Place:

[Signature / Thumb Impression]

Signature / Thumb Impression of Authorised Person(s)

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Equivalent e-document

KYC VERIFICATION CARRIED OUT BY

Identity Verification ☐ Done Date    -    -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

INSTITUTION DETAILS

Name

Code

[Institution Stamp]

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

## Important Instructions:

- A) Fields marked with "\*" are mandatory fields.  
 B) Tick '✓' wherever applicable.  
 C) Please fill the date in DD-MM-YYYY format.  
 D) Please fill the form in English and in BLOCK letters.  
 E) KYC number of applicant is mandatory for update application.  
 F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.  
 G) List of two character ISO 3166 country codes is available at the end.  
 H) Please read section wise detailed guidelines / instructions at the end.  
 I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated



For office use only

Application Type\*

☐ New ☐ Update ☐ Delete

(To be filled by financial institution) KYC Number

(Mandatory for KYC update and delete request)

## 1. DETAILS OF RELATED PERSON\* (Please refer instruction E at the end)

☐ Addition of Related Person

☐ Deletion of Related Person

☐ Update Related Person Details

KYC Number of Related Person (if available\*)

If KYC number is available, only 'Related Person Type' &amp; 'Name' is mandatory

Related Person Type\*

- ☐ Director ☐ Promoter ☐ Karta ☐ Trustee ☐ Partner ☐ Court Appointment Official ☐ Proprietor  
☐ Beneficiary ☐ Authorised Signatory ☐ Beneficial Owner ☐ Power of Attorney Holder ☐ Other (Please specify)

DIN (Director Identification Number)

(Mandatory if Related Person Type is Director)

## 1.1 PERSONAL DETAILS (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender	
Nationality*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )		
PAN*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			<input type="checkbox"/> Form 60 furnished	

## 1.2 PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction E at the end)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number   
☐ B- Voter ID Card   
☐ C- Driving Licence   
☐ D-NREGA Job Card   
☐ E- National Population Register Letter   
☐ F - Proof of Possession of Aadhaar   
 II ☐ E-KYC Authentication   
 III ☐ Offline verification of Aadhaar

☐ PHOTO\*


## Address

Line 1*	<input type="text"/>
Line 2	<input type="text"/>
Line 3	<input type="text"/>
District*	<input type="text"/>
Pin / Post Code*	<input type="text"/>
State / U.T Code*	<input type="text"/>
ISO 3166 Country Code*	<input type="text"/>

☐ 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end)

☐ Same as above mentioned address (In such cases address details as below need not be provided)

I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A- Passport Number   
☐ B- Voter ID Card   
☐ C- Driving Licence   
☐ D-NREGA Job Card   
☐ E- National Population Register Letter   
☐ F - Proof of Possession of Aadhaar   
 II ☐ E-KYC Authentication   
 II ☐ Offline verification of Aadhaar   
 IV ☐ Deemed PoA  
 V ☐ Self Declaration

**Address**

Line 1*																				
Line 2																				
Line 3																				
District*					Pin / Post Code*					State / U.T Code*			City / Town / Village*					ISO 3166 Country Code*		

**1. 4 CONTACT DETAILS** (All communication will be sent on provided mobile no. / Email-ID) (Please refer instruction **D** at the end)

Tel. (Off)					Tel. (Res)					Mobile						
Email ID																

**2. APPLICANT DECLARATION**

- 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 any 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/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date :   -   -    Place:        

Signature /Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

**Documents Received** ☐ Certified Copies ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification  
☐ Digital KYC process ☐ Equivalent e-document

**KYC VERIFICATION CARRIED OUT BY**

Date   -   -

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

[Employee Signature]

**INSTITUTION DETAILS**

Name

Code

[Institution Stamp]



**A Clarification / Guidelines for filling Entity Details section****1 Entity Constitution Type**

A - Sole Proprietorship	H - Trust	O - Artificial Juridical Person
B - Partnership Firm	I - Liquidator	P - International Organisation or Agency /Foreign
C - HUF	J - Limited Liability Partnership	Embassy or Consular Office etc.
D - Private Limited Company	K - Artificial Liability Partnership	Q - Not Categorized
E - Public Limited Company	L - Public Sector Banks	R - Others
F - Society	M - Central/State Government Department or Agency	S - Foreign Portfolio Investors
G - Association of Persons (AOP) / Body of Individuals (BOI)	N - Section 8 Companies (Companies Act, 2013)	

2 In case of companies and partnerships, PAN of the entity is mandatory. In case of other entities, FORM 60 may be obtained if PAN is not available.

**B Clarification / Guidelines for filling 'Proof of Identity[Pol]' section**

- 1 Activity Proof - 1 and Activity Proof - 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
- 2 Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity.
- 3 Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
- 4 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
- 6 KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.

**C Clarification / Guidelines for filling 'Proof of Address [PoA]' section**

- 1 State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 2 Certified copy of document or equivalent e-document to be submitted.

**D Clarification / Guidelines for filling 'Contact Details' section**

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- 2 Do not add '0' in the beginning of Mobile number.

**E Clarification / Guidelines for filling 'Related Person Details' section**

- 1 Personal Details
  - The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Proof of Address [PoA]
  - PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
  - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
  - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
  - REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
- 3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
- 4 Regulated Entity (RE) shall redact (first 5 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.

**F Provision for capturing signature of multiple authorised persons is to be made by the RE.**

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

State/U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

**List of ISO 3166 two digit Country Code**

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Åland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GO	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Malta	MT	Singapore	SG
Armenia	AM	Finland	FI	Marshall Island	MH	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Martinique	MQ	Slovakia	SK
Australia	AU	French Guiana	GF	Mauritania	MR	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritius	MU	Solomon Island	SB
Azerbaijan	AZ	French Southern Territories	TF	Mexico	MX	Somalia	SO
Bahamas	BS	Gabon	GA	Moldova, Republic of	MD	South Africa	ZA
Bahrain	BH	Gambia	GM	Monaco	MC	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Mongolia	MN	South Sudan	SS
Barbados	BB	Germany	DE	Montenegro	ME	Spain	ES
Belarus	BY	Ghana	GH	Montserrat	MS	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Morocco	MA	Sudan	SD
Belize	BZ	Greece	GR	Mozambique	MZ	Suriname	SR
Benin	BJ	Greenland	GL	Myanmar	MM	Svalbard and Jan Mayen	SI
Bermuda	BM	Grenada	GD	Namibia	NA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Nauru	NZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Nepal	NP	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Netherlands	NL	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	New Caledonia	NC	Taiwan province of China	TW
Botswana	BW	Guinea	GN	New Zealand	NZ	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Nicaragua	NI	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	Niger	NE	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	Nigeria	NG	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Niue	NU	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Norfolk Island	NF	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Northern Mariana Islands	MP	Tonga	TO
Burundi	BI	Hongkong	HK	Norway	NO	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Oman	OM	Tunisia	TN
Cambodia	KH	Iceland	IS	Pakistan	PK	Turkey	TR
Cameroon	CM	India	IN	Palau	PW	Turkmenistan	TM
Canada	CA	Indonesia	ID	Palestine, State of	PS	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Panama	PA	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Papua New Guinea	PG	Uganda	UG
Chad	TD	Ireland	IE	Paraguay	PY	Ukraine	UA
Chile	CL	Isle of Man	IM	Peru	PE	United Arab Emirates	AE
China	CN	Israel	IL	Philippines	PH	United Kingdom	GB
Christmas Island	CX	Italy	IT	Pitcairn	PN	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Poland	PL	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Portugal	PT	Uruguay	UY
Comoros	KM	Jersey	JE	Puerto Rico	PR	Uzbekistan	UZ
Congo	CG	Jordan	JO	Qatar	QA	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Reunion/Reunion	RE	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Romania	RO	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Russian Federation	RU	Virgin Islands, British	VG
Cote d'Ivoire/Cote d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Rwanda	RW	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Saint Barthelemy/Saint Barthelemy	BL	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Saint Helena, Ascension and Tristan da Cunha	SH	Western Sahara	EH
Curacao/Curacao	CW	Kyrgyzstan	KG	Saint Kitts and Nevis	KN	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Lucia	LC	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Martin (French Part)	MF	Zimbabwe	ZW
Denmark	DK	Lebanon	LB				
Djibouti	DJ	Lesotho	LS				
Dominica	DM	Liberia	LR				



Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant \_\_\_\_\_ PAN of the Applicant \_\_\_\_\_

Sr. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed (Tick the Applicable)	Photograph
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	



Name & Signature of the  
Authorised Signatory(ies)

Date dd / mm / yy

\*Incase of PEP/RPEP Annexure 2.2A to be submitted  
PEP: Politically Exposed Person  
REP: Related to Politically Exposed Person

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant \_\_\_\_\_ PAN of the Applicant \_\_\_\_\_

Sr. No.	PAN	Name	DIN (For Directors) / UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed (Tick the Applicable)	Photograph
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
						<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	



Name & Signature of the  
Authorised Signatory(ies)

Date dd / mm / yy

\*Incase of PEP/RPEP Annexure 2.2A to be submitted  
PEP: Politically Exposed Person  
REP: Related to Politically Exposed Person

**Details of Politically Exposed Persons (PEP) / Related to Politically Exposed Person (RPEP). [ For-non-individual]**

Name of holder \_\_\_\_\_ PAN of the holder \_\_\_\_\_

Sr.No	Name of the Authorized signatories / Promoters / Partners / Karta/ Trustees /Whole Time Directors	Relation with the holder (i.e. promoters, whole time directors etc	Please tick the relevant option.
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP
			<input type="checkbox"/> PEP <input type="checkbox"/> RPEP

Name & Signature of the Authorised Signatories Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**PEP:** Politically Exposed Person **RPEP:** Related to politically Exposed Person