

Know Your Client (KYC) Application Form (For Non-Individuals Only)

Application No. :

Ver. 01-2012

Please fill in ENGLISH and in BLOCK LETTERS with black ink

"Please note that the KYC Application Form and overleaf instructions should be printed on the same page (back to back). If printed separately then both the pages should be attached and signed by the applicant."

A. Identity Details (please see guidelines overleaf)

1. **Name of Applicant** (Please write complete name as per Certificate of Incorporation/Registration; leaving one box blank between 2 words. Please do not abbreviate the Name).

2. **Date of Incorporation**

D	D	/	M	M	/	Y	Y	Y	Y
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 2a. **Place of Incorporation** _____

3. **Registration No. (e.g. CIN)** _____

3a. **Date of commencement of business**

D	D	/	M	M	/	Y	Y	Y	Y
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4. **Status** Private Ltd. Co. Public Ltd. Co. Body Corporate Partnership Trust / Charities / NGOs
 Please tick (✓) FI FII HUF AOP Bank Government Body Non-Government Organisation
 Defence Establishment Body of Individuals Society LLP Others Please specify

5. **Permanent Account Number (PAN) (MANDATORY)** _____ Please enclose a duly attested copy of your PAN Card.

PHOTOGRAPH

Please affix
the recent passport
size photograph of
Authorised Signatory
and sign across it

B. Address Details (please see guidelines overleaf)

1. **Address for Correspondence**

City / Town / Village _____ Postal Code _____

State _____ Country _____

2. **Contact Details**

Tel. (Off.) (ISD) (STD) _____ Tel. (Res.) (ISD) (STD) _____

Mobile (ISD) (STD) _____ Fax (ISD) (STD) _____

E-Mail Id. _____

3. **Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.**
 *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Bank Account Statement Registered Lease / Sale Agreement of Office Premises
 Any other proof of address document (as listed overleaf) Please specify

*Not more than 3 Months old. **Validity/Expiry date of proof of address submitted**

D	D	/	M	M	/	Y	Y	Y	Y
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4. **Registered Address (If different from above)**

City / Town / Village _____ Postal Code _____

State _____ Country _____

5. **Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.**
 *Latest Telephone Bill (only Land Line) *Latest Electricity Bill *Latest Bank Account Statement Registered Lease / Sale Agreement of Office Premises
 Any other proof of address document (as listed overleaf) Please specify

*Not more than 3 Months old. **Validity/Expiry date of proof of address submitted**

D	D	/	M	M	/	Y	Y	Y	Y
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C. Other Details (please see guidelines overleaf)

1. **Gross Annual Income Details** Please tick (✓) Income range per annum : Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 Crore >1 Crore

2. **Net-worth in ₹** _____ (* Net worth should not be older than 1 year) as on (date)

D	D	/	M	M	/	Y	Y	Y	Y
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3. **Name, PAN, DIN/UID, residential address and photographs of Promoters/Partners/Karta/Trustees/whole time directors**
 (Please use the Annexure to fill in the details)

4. **Is the entity involved in/providing any of the following services**
 - Foreign Exchange / Money Changer Services YES NO
 - Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates) YES NO
 - Money Lending / Pawning YES NO

5. **Any other information:** _____

DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we 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/we are aware that I/we may be held liable for it.

Place : _____ Date : _____

NAME & SIGNATURE(S) OF AUTHORIZED PERSON(S)

FOR OFFICE USE ONLY

In-Person Verification carried out on

d	d	/	m	m	/	y	y	y	y
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 at _____ a.m./p.m. by :

Name of Official : _____

Designation : _____

Organisation Name : _____ AMC / Intermediary Name or Code _____

ARN Code : _____

Originals Verified → Self Certified Document copies received (Attested) True copies of documents received

Signature with Stamp



Seal/Stamp should contain Staff Name, Designation, Name of Organisation, Signature, Date

INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients, including Promoters/Parents/Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
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 list mentioned under [E].
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 addresses are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity. If you are a sole proprietor, please use the KYC Application Form for Individuals.
7. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.

B. Permanent Account Number (PAN):

PAN is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).

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)

- Latest Land Line Telephone Bill
- Latest Electricity Bill
- Latest Bank Passbook / Bank Account Statement
- Registered Lease / Sale Agreement of office premises

- Proof of Address issued by Bank Managers of Scheduled Commercial Banks / Multinational Foreign Banks / Gazetted Officer / Notary Public / Elected Representatives to the Legislative Assembly / Any other document approved by AMFI as a valid address proof
 - Registration Certificate issued under Shops and Establishments Act
- Documents having an expiry date should not be more than three months old as on the date of submission of this form.

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 up to 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. Documents need to be certified true by Director / Company Secretary. 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:

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

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	Photograph
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

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

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	Photograph
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Name & Signature of the Authorised Signatory(ies)

Date

D	D	/	M	M	/	Y	Y	Y	Y
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PEP: Politically Exposed Person
RPEP: Related to Politically Exposed Person