

# Know Your Client (KYC) Application Form - for Individuals

Please fill this form in English and BLOCK Letters

(Please tick the box on the left margin of the appropriate row where CHANGE/CORRECTION is required and provide the details in the corresponding window)

<b>For office use only</b> (To be filled by the financial institution)			
Application Type*	<input type="checkbox"/> New	<input type="checkbox"/> Update	KYC Number <input type="text"/>
Account Type*	<input type="checkbox"/> Normal	<input type="checkbox"/> Simplified (for low risk customers)	<input type="checkbox"/> Small

## A. Identity details

<input type="checkbox"/>	1. Name (Same as ID Proof)	
	1a. Maiden Name (If any)	
<input type="checkbox"/>	2. Father's/Spouse's Name	
	2a. Mother's Name	

**Photograph**  
Please affix your recent passport size photograph and sign across it

F1

3a. Gender  Male  Female  Transgender    3b. Marital Status  Single  Married  Other    3c. DOB

4a. Citizenship  Indian  Other \_\_\_\_\_ (ISO 3166 Country Code  )

4b. Residential Status  Resident Individual  Non Resident Indian  Person of Indian Origin  Foreign National

<b>Tick if applicable</b> <input type="checkbox"/> Residence for tax purposes in jurisdiction(s) outside India
ISO 3166 Country Code of Jurisdiction of residence <input type="text"/> Place of birth _____
Tax Identification Number or Equivalent <input type="text"/> ISO3166 Country Code of Birth <input type="text"/>

5a. PAN

5b. Unique Identification Number (UID) / AADHAR

6. Proof of Identity Submitted  Pan Card  Other (Please Specify) \_\_\_\_\_

## B. Address details

1. Contact Details

Telephone (Office)	<input type="text"/>	Mobile No	<input type="text"/>
Telephone (Residence)	<input type="text"/>	Email ID	<input type="text"/>

2. Residence/Correspondence Address    Address Type:  Residential  Business  Unspecified

Address			
City/Town	District	Pin Code	<input type="text"/>
State/U.T Code	Country/ISO Code	<input type="text"/>	<input type="text"/>
Specify the Proof of Address Submitted for Residence / Correspondence Address			

## C. 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 hereby consent to receiving information from Central KYC Registry through SMS/email on the above registered number/email address.

Date :

F2    Client Signature

## FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the Person who has done the IPV: \_\_\_\_\_

Designation: \_\_\_\_\_ Employee ID: \_\_\_\_\_

Name of the Organization: ZERODHA BROKING LTD.

Date of the IPV:

Signature of the Person who has done the IPV

Seal/Stamp of the Intermediary

Originals Verified and Self-Attested Document Copies Received

Date

Signature of the Authorized Signatory

3. Permanent Address

Address									
City/Town			District			Pin Code			
State/U.T Code			Country/ISO Code						

4. Address in the jurisdiction details where applicant is resident outside India for tax purpose (if applicable)

Address									
City/Town			District			Pin Code			
State/U.T Code			Country/ISO Code						

**D. Details of related person** (In case of additional related persons, please fill below details)

Addition of Related Person    Deletion of Related Person

KYC Number of Related Person (if available)

Related Person Type    Guardian of Minor    Assignee    Authorized Representative

Name									
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(If KYC number & name are provided, below details are optional)

Proof Of Identity Of Related Person

Identity Proof Submitted					Number				
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Expiry Date :

Others (any document notified by the Central Govt.)					Identification No				
Simplified Measures Account-Document Type Code					Identification No				

**Trading account related details**

**A. Bank account details**

Account Type: Savings    Current    Others    |   In case of NRI Account: NRE    NRO

Bank Name									
Branch Address									
Account Number									
MICR Number					IFSC Code				

**B. Other details**

Gross Annual Income Details (please specify): Income Range per annum

Below Rs 1 Lakh    1-5 Lakh    5-10 Lakh    10-25 Lakh    25 Lacs to 1 Cr    >1Cr

Or Net-worth as on \_\_\_\_\_ date \_\_\_\_\_ (Net worth should not be older than 1year)

**Occupation**

Private Sector    Public Sector    Government Service    Business    Professional    Agriculturist    Retired

Housewife    Student    Self Employed    Others (please specify) \_\_\_\_\_

Mode in which you wish to receive the RDD, Rights & Obligations, and Guidance Note:   Physical    Electronic

Please tick, if applicable: Politically Exposed Person (PEP)    Related to a Politically Exposed Person (PEP)

In what capacity do you trade commodities?

Farmer/Farmer Producer Organisation    Value Chain Participant    Others