4554

Central KYC Registry | Know Your Customer (KYC) Application Form | Legal Entity/Other than Individuals

CAMSKRA KYC Services

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
(To be filled by financial institution)

Application Type* ☐ New ☐ Update
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* D D - M M - Y Y Y Y Date of Commencement of Business D D - M M - Y Y Y Y

Place of Incorporation/Formation* Country of Incorporation/Formation* TIN or Equivalent Issuing Country

PAN*

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 City/Town/Village*
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 City/Town/Village*
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)

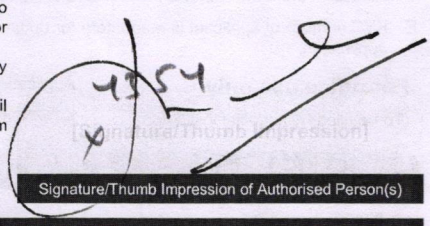
Tel. (Off) Fax
Mobile Email ID
Mobile Email ID

☐ 5. Number of Related Persons (Please fill Annexure A-2 for each related persons & also 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. Incase 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 declare that I am not making this application for the purpose contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I also providing consent to MF/AMC/KRA to share this KYC data with CKYCR, download the information from CKYCR and other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.



Signature/Thumb Impression of Authorised Person(s)

Date: D D - M M - Y Y Y Y Place:

8. Attestation / For Office Use only

Documents Received ☐ Certified Copies ☐ Equivalent e-document

KYC documents verification carried out by	
Identity Verification ☐ Done	Date: D D - M M - Y Y Y Y
Emp. Name	
Emp. Code	
Emp. Designation	
Emp. Branch	

[Employee Signature]

Institution details	
Name	
Code	

[Institution Stamp]