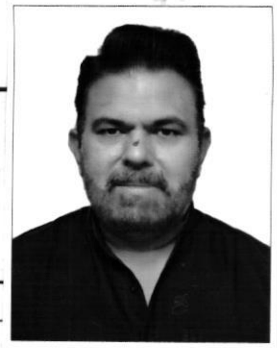
KVB Karur Vysya Bank
Smart way to bank

Customer Profile-Individual

Branch: Hyderabad



Name of the Applicant : Shri/Smt Mr. sachin malve

(First Name) (Middle Name) (Last Name)

CUSTOMER DETAIL

Existing Customer : ◯ Yes ◯ No If Yes, Since__________

Customer ID : A/c Type :

A/c No : KVB Staff : ◯ Yes ◯ No

Sex : ◯ Male ◯ Female

Date of Birth : 16/04/1971

Marital Status : ◯ Unmarried ◯ Married

Name of the Father/Husband : Shri.

No. of Dependants (Including Self) :

Earning member in Family (Excluding Self) :

Nationality : ◯ Indian ◯ Others

Caste : ◯ SC ◯ ST ◯ OBC ◯ Minority ◯ Others

Religion : ◯ Hindu ◯ Muslim ◯ Christian ◯ Others

Residential Status : ◯ Resident ◯ NRI

Educational Qualification : ◯ Doctorate ◯ PG ◯ UG ◯ HSC ◯ <HSC ◯ Illiterate

ADDRESS FOR COMMUNICATION

Is the Residence : ◯ Rented ◯ Owned ◯ Leased ◯ Family ◯ Employer

If Owned, Date of Purchase : DD/MM/YYYY

Address for Communication : 1-8-215/301C. Park Avenue Colony, PG Road Secunderabad

City : Secunderabad

Pin code: 500003.

District : Hyderabad

State : Telangana

Country : India

Type of Center : ◯ Metro ◯ Urban ◯ Semi Urban ◯ Rural

No of Years in Current Address:

PASSPORT DETAIL

Passport No :

Issued By :

Issued Date : DD/MM/YYYY

Expiry Date : DD/MM/YYYY

CONTACT NUMBERS

Residence :

Mobile :

Office :

Fax :

E-Mail ID :

INTRODUCER DETAIL

Introducer Name : Shri/Smt

Customer ID :

IDENTIFICATION DETAIL

PAN/GIR No. : AATPM6205C

Voter ID :

Driving License No. :

National ID Card No.:

Name & No. of Other Identification Document :

1. XXXXXXXX 8663.

EMPLOYMENT STATUS

Employment Status : ◯ Employee ◯ Business ◯ Professional Doctor ◯ Professional Others ◯ Agriculturist ◯ Student ◯ Unemployed

Line of Activity / Constitution : If Employed : ◯ Public Ltd / MNC ◯ Quasi Govt ◯ Govt ◯ Govt ◯ Pvt Ltd ◯ Others

If Self Employed : ◯ Family Owned ◯ Partnership ◯ Self run employee support ◯ Self run alone

Is Job Transferable : ◯ Yes ◯ No

If Yes, Place of Transfer : All India Within State

MISCELLANEOUS DETAIL

Physically Handicapped : ◯ Yes ◯ No

Ex Servicemen : ◯ Yes ◯ No Minority : ◯ Yes ◯ No

SALARY ACCOUNT DETAILS

My Salary A/c with KVB : ◯ Yes ◯ No

If Yes, A/c No :

PERMANENT ADDRESS

Address for Communication : 1-8-215/30/C, PARK AVENUE Colony, PG Road Secunderabad,

City : Secunderabad

Pin code: 500003.

District : Hyderabad

State : Telangana

Country : India.

PREVIOUS ADDRESS

Address for Communication :

City :

Pin code:

District :

State :

Country :

Same

SECTION 20 DETAIL

Is the applicant related to any of the Directors of our Bank / other Bank (Section 20 of BR Act.) ◯ Yes ◯ No Name of the Bank :

Name of the Director with whom the applicant is related and the relationship

PENSION DETAIL

My Pension Account with KVB bank: ◯ Yes ◯ No Pension Payment Order No. : Account No.:

Pension Authority : Monthly Pension Amount :

Name of Nominee : Relationship of Nominee :

SPOUSE DETAIL

Name of the Spouse : Shri/Smt Employment Status : ◯ Employee ◯ Business

Email: PAN/GIR No. : ◯ Professional Doctor ◯ Professional Others

Net Monthly Income : ◯ Agriculturist ◯ Student ◯ Unemployed

EMPLOYMENT DETAIL

Name of the Employer/ Firm: Phone No. :

Address: Fax No. :

Email :

City : State :

Country : Pin Code :

SELF EMPLOYED

Nature of Business: ◯ Manufacturing ◯ Trading ◯ Marketing ◯ Others

Established on : DD/MM/YYYY

No. of Years in Business :

Business Premises : ◯ Owned ◯ Rented ◯ Leased ◯ Not Applicable

Lease Period DD/MM/YYYY upto DD/MM/YYYY

TAN No :

Sales As Per Sales Tax Returns (For Last 3 Years)

Year : YYYY YYYY YYYY (Latest Year)

Rs. :

JOB DETAIL

Department Name:

Designation :

Date of Joining in the Service : DD/MM/YYYY

Category : ◯ Executive ◯ Managerial/Supervisory ◯ Officer ◯ Junior/Clerk ◯ Others

Completed Years of Service: ______ Months ______Years

Retirement Age :

Employee No./ Identity Card No. :

Knowledge & Experience :

Profit (For Last 3 Years) Year : YYYY YYYY YYYY (Latest Year) Rs. : **Investment in Business (For Last 3 Years)** Year : YYYY YYYY YYYY (Latest Year) Rs.	Contact Person : Designation : Phone : Name of Previous Employer : Address :

Income & Expenditure

Note: For Housing Loans, in case of Professionals, self employed and business persons, the figures to be filled in, on this page should be the average of last three years with proof.

Amount in Rs.

INCOME DETAILS (Yearly)				
Year	YYYY	YYYY	YYYY	AVERAGE
Gross Annual Income				
Statutory Deduction				
Net Income				
Other Deductions				
Other Income				
Total Income				

Details enclosed

OTHER INCOME DETAILS (Yearly)	
Rent	
Agriculture	
Others [please specify]	
Total	

EXPENDITURE DETAILS (Yearly)				
Total Loan Repayment				
Insurance				
Other Deductions 1				
Other Deductions 2				
Total				

INCOME TAX DETAIL

IT Assesse : Yes No

Income as per IT Return (For Last 3 Years) : Year : YYYY YYYY YYYY (Latest Year)
Rs.

Tax paid as per IT Return (For Last 3 Years) : Year : YYYY YYYY YYYY (Latest Year)
Rs.

Wealth Tax Assesse : Yes No

Wealth Reported as per Wealth Tax Return (For Last 3 Years) : Year : YYYY YYYY YYYY (Latest Year)
Rs.

Litigations, if any

DECLARATION

1. Any change in my address for communication / contact will be intimated to you
2. I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and I abide by the rules and regulations of the bank

Signature of Applicant

Date: dd/mm/yyyy

CHECKLIST

- ☐ 1. Identity Proof, Address Proof and Date of Birth Proof
- ☐ 2. IT Returns
- ☐ 3. Wealth Tax Returns
- ☐ 4. Sales Tax Returns
- ☐ 5. Passport Copy if any
- ☐ 6. Copy of the registration certificate
- ☐ 5. Salary Certificate & Service Certificate if employed

DETAILS OF ASSETS & LIABILITIES

NAME OF THE APPLICANT/PARTNER/GUARANTOR: Mr. Sachin malve

ASSETS

Details of Bank Accounts (A) ***(Rs in Lakhs)***

Bank Name	Type of Account	Account Number	Deposit Amount	Date of Maturity	Balance	Under Lien? (Yes/NO)

Investments (B) *(Including Mutual funds, Equities, Insurances, KVP/NSC etc.)*

Description	Date of Issue & Issued by	Maturity Date	Amount Invested	Maturity/ Present Value	Under Lien? (Yes/No)

Details of Personal Properties (C)

Name of the Village or Town, street with particulars	Type of Land/Building ,Year of Built, Area of Land/Built Up Area	Total Value	Lease hold Or Free Hold, Encumbrance If any

Jewels/Ornaments (D)

Description	Net Weight in Grams	Amount (*Rs in Lakhs*)	Under Lien? (Yes/NO)

Lien Details *(If any of the above assets are under lien, please furnish the details below)*

Liabilities(E)

Limits with our Bank

Account Number & Facility	Facility	Limit	Balance O/s	Due Date

Limits with other Banks/FIs/Friends & Relatives

Borrowed from	Facility	Limit	Balance O/s	Due Date

Guarantees given to the loans taken by others

Name of the Firm/Person	Bank/FIs	Facility	Amount

NET MEANS

Immovable Assets (C)	
Other Assets(A+B+D)	
Total Assets	
Less Liabilities (E)	
Net Means	

Signature of the Borrower/Guarantor: ____________________

Date: dd/mm/yyyy

**information can be given in Annexure if required.*

ANNEXURE

From Date:

mo. sachin malve,(Name(s) of the Borrower/Guarantor/Co-obligant)

(Address)

To:

The Karur Vysya Bank Ltd,

____

Sir,

Reg: Expression of Consent for availing loan through Digital Lending platform of your Bank.

Upon our query, I/We have been explained of the bank's guidelines of the loan processing and lending through manual and digital modes. Since the Digital form of lending has been introduced by the bank with the objective of rendering services to me/us through faster and paperless mode, I/We have voluntarily opted for the digital lending process.

I/We fully understand and are aware that my/our AADHAAR details will be required for availing the loan under digital lending system. I/We am/are hereby sharing my/our AADHAAR details/AADHAAR mode voluntarily and made a request thereof. I/we hereby give my/our full consent and authorise the bank to get the loan documents executed through E-signing mode as may be required.

I/We hereby undertake not to make changes in AADHAAR details without the knowledge of the bank.

Yours faithfully,

Sachin Malve

(Borrowers)

BANK USE:

APPLICATION NO:

LOAN ACCOUNT NO:

BANK MANAGER

आयकर विभाग

INCOME TAX DEPARTMENT

भारत सरकार

GOVT. OF INDIA

SACHIN MALVE

DURGADAS MALVE

16/04/1971

Permanent Account Number

AATPM6205C

Sachi Malve

Signature

Sachin Malve

14112016

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

Unique Identification Authority of India

ఆధార్

విరునామా: S/O దుర్గాదాస్ మాల్వే
౧-౮-౨౧౫/౩౦/సి, పర్కావెనువ కాలనీ
ి జి రోడ్, సికింద్రాబాద్
ికింద్రాబాద్, హైదరాబాద్
ంధ్రప్రదేశ్, 500003

Address: S/O Durgadas Malve, 1-8-215/30/C, PARKAVENUE COLONY, P G ROAD, secunderabad, Secunderabad, Secunderabad, Hyderabad, Andhra Pradesh, 500003

9554 2112 8663

Sachin Malve

1947
300 1947

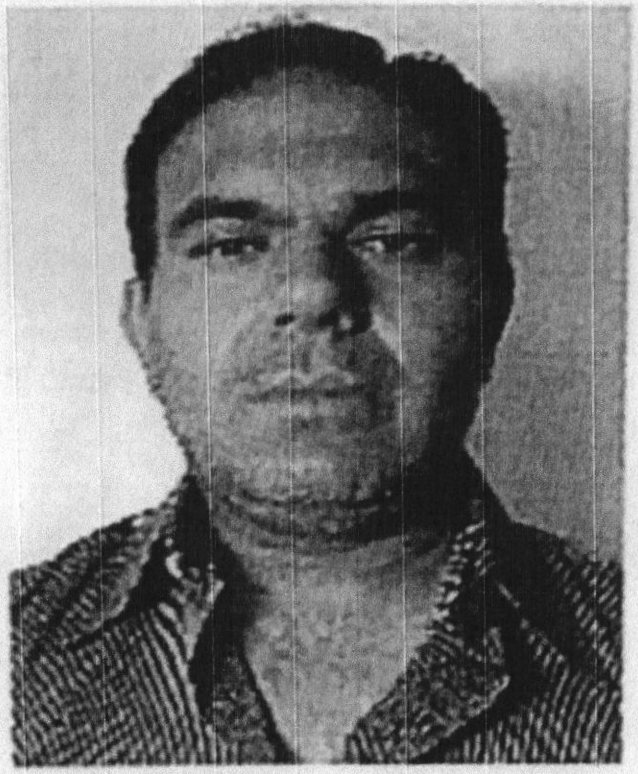
help@uidai.gov.in

WWW

www.uidai.gov.in

భారత ప్రభుత్వం

Government of India



సచిన్ మాల్వే

Sachin Malve

పుట్టిన సంవత్సరం/Year of Birth: 1971

పురుషుడు / Male

9554 2112 8663

ఆధార్ – సామాన్యుని హక్కు

M 327
Ver 1.0 – 01/2021

The Karur Vysya Bank Limited
Customer Creation Form

To
The Branch Manager, The Karur Vysya Bank Limited,
Please enroll me as a Customer at your Hyderabad. Branch

Customer ID.:

e-KYC	Non e-KYC

CKYC ID .:

DETAILS FOR APPLICANT – SB / TERM DEPOSIT

Mr/Ms * | *NAME: INDIVIDUAL (IN THE ORDER OF FIRST, MIDDLE & LASTNAME) leave space between words. Eg. RAM GOPAL VARMA

MR. Sachin Malve

*FATHER'S NAME

MR. DURGADASMalVe

*MOTHER'S NAME

SPOUSE NAME

AADHAAR ID:		PAN NO.:		FORM 60/61 (ENCLOSED)
955421128663		AATPM6205C		☐ Y ☐ N
DATE OF BIRTH*	MARITAL STATUS	NATIONALITY*	RELIGION	GENDER*
16041971	☑ M ☐ UM	India	Hindu	☑ M ☐ F ☐ T
MOBILE NO.:*		EMAIL ID:		
Alt Mob. No		RES. TEL No	STD CODE	

Minor account		Guardian Customer ID	Guardian Name	Relation
Yes	No			

***PERSONAL INFORMATION OF THE APPLICANT**

KYC CERTIFICATION FOR INDIVIDUAL / MINOR

S. No.	PROOF TYPE	NAME OF THE DOCUMENT	NUMBER	ISSUE DATE (D D M M Y Y Y Y)	EXPIRY DATE (D D M M Y Y Y Y)
1.	Proof of Identity & Address	PAN	AATPM6205C		
2.	Proof of Communication address	Adhar	955421128663		

***MAILING ADDRESS:**

PARKAVENUEColony, PGROaD, SeCUnderabad, Hyderabad

CITY/TOWN	Hyderabad		
DISTRICT	Hyderabad	PINCODE	500003
STATE	Telagana	COUNTRY	INDIA

***PERMANENT ADDRESS (IF DIFFERENT FROM ABOVE)**

PARKAVENUEColony, PGROaD, SeCUnderabad, Hyderabad.

CITY/TOWN	Hyderabad		
DISTRICT	Hyderabad	PINCODE	500003
STATE	Telagana.	COUNTRY	INDIA

Fields with * are Mandatory

QUALIFICATION ☐ UNDERGRADUATE ☐ GRADUATE ☐ POST GRADUATE ☐ PROFESSIONAL ☐ ILLITERATE	NO. OF DEPENDENTS Adult ☐ Children ☐

EMPLOYED WITH
☐ STATE GOVT. ☐ CENTRAL GOVT. ☐ PUBLIC LTD. ☐ PRIVATE LTD. ☐ BUSINESS ☐ OTHER ENTITY (specify..)

*NATURE OF BUSINESS ☐ MANUFACTURING ☐ TRADING ☐ SERVICES ☐ RETAILING ☐ AGRICULTURE ☐ MONEY SERVICES ☐ AGENCY
☐ STOCK BROKER ☐ REAL ESTATE ☐ NGO/NPO ☐ JEWELS/GEMS/PRECIOUS METAL DEALER ☐ OTHERS (specify) ______

*TYPE OF PROFESSION ☐ DOCTOR ☐ ENGINEER ☐ BANKER ☐ TEACHER ☐ LAWYER ☐ ARCHITECT ☐ CONSULTANT
☐ IT PROFESSIONAL ☐ OTHERS (specify) ______

*ANNUAL INCOME	SELF ₹	SPOUSE ₹	HOUSEHOLD ₹

ASSETS OWNED ☐ HOUSE ☐ CAR ☐ TWO WHEELER ☐ GOLD ☐ SILVER ☐ LAND

LOANS WITH OTHER BANKS
☐ HOUSING ☐ BUSINESS ☐ CAR ☐ TWO WHEELER ☐ CREDIT CARD ☐ PERSONAL ☐ JEWEL ☐ PROFESSIONAL

OTHER INVESTMENTS ☐ DEPOSITS ☐ INSURANCE ☐ SHARES ☐ MF ☐ DEMAT

DP ID		DP Name		Client ID	

***FATCA / CRS Declaration**

Country of Residence	INDIA
Residence for tax purposes	INDIA
Country of Birth	INDIA
US Person (Yes/No)	NO

Note : In case if any of the details above, the country mentioned is other than "India" / U.S Person=Yes, then fill out the details in FATCA / CRS declaration form.

General Declaration:

I agree to furnish and intimate to KVB any other particulars that I am called upon to provide on account of any change in law/ statutory requirements either in India or abroad. I hereby immediately note to update any change in my personal details to the Bank.

I submit my KYC documents including Aadhaar number voluntarily, and offer my consent to: (i) Update my Aadhaar / UID number issued by the UIDAI (Unique Identification Authority of India), Govt. of India to my customer profile. (ii) Use my Aadhaar number and biometric details (fingerprints / Iris), captured on a biometric device, to authenticate me with UIDAI. (iii) To retrieve my demographic details viz.. Name, Age, Gender, Address, Photograph etc.. available with UIDAI.

For the purpose of providing certain services, the Bank is / may be required to engage the services of specialized and other service providers/agents. I authorize the Bank to furnish any information regarding my account to these service providers/agents. I shall not hold KVB or its agents/ representatives liable for using/sharing such information.

I consent to receive information/service etc. from the Bank or from the authorized call center for marketing of KVB products & services through Telephone/Mobile/SMS/E-mail by the Bank. I am aware that as a part of the post account opening/availing services, I may receive calls from the Bank to verify the correctness of my request made either through the branch/call centre/mobile application/KVB website, and also for cross sell/upsell of the Bank's products/services.

I accept and agree to be bound by the said terms and conditions including those limiting the Bank's liability. I confirm that I have read and understood the content and meaning of the above Declaration.

I hereby declare that the information provided herein as well as in the documentary evidence provided by me to KVB (the "Customer Information") is/are true, correct and complete in all aspects to the best of my knowledge and that I have not withheld any Customer Information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I further agree that any false/misleading Customer Information given by me or suppression of any material fact will render my account liable for closure and the bank shall have the right to initiate any action, under law or otherwise. If any of the information provided here is/are incorrect, I hereby agree to indemnify and keep indemnified KVB, their affiliates and their successors or assignees.

Sachin Mahe

SIGNATURE OF THE APPLICANT
Note: For additional account holders attach this same type of form.

Bank Use Section

RISK CATEGORY ☐ HIGH ☐ MEDIUM ☐ LOW	POLITICALLY EXPOSED PERSON ☐ Yes ☐ No

This form is complete in all respects, and all relevant documents are obtained and verified. The form has been personally submitted by the customer, and I have satisfied myself about the identity of the customer by verifying the KYC documents. I have done proper due diligence for updating the details in Bank records.

Date: Manager / Officer

For Centralised Office Use Only:

Received Date ☐☐☐☐☐☐☐☐ Maker ID ☐☐☐☐☐☐☐☐ Checker ID ☐☐☐☐☐☐ Completed ☐

Rejected Date ☐☐☐☐☐☐☐☐ Rejected Reason ______

KVB Karur Vysya Bank
Smart way to bank

Aadhaar / e-KYC consent form

________________________ Branch

Customer ID	Account Number	ORN

e-KYC resident consent (For paperless KYC verification): I hereby grant my explicit consent to the Bank to retrieve my demographic details viz.. Name. Age, Gender, Address, Photograph etc. available with UIDAI (Unique Identification Authority of India) and authorize the Bank to store the demographic details for their records. I understand that the details can be retrieved by the Bank only when I furnish my Aadhaar number to the Bank and authenticate with my finger prints / iris on a biometric device, and that my biometric finger prints / iris pattern details will be used by the Bank only for authentication of my details with UIDAI and will not be stored by the Bank in electronic form or otherwise. I also understand that my details cannot be compromised during electronic transfer of data as the Bank uses a secure medium of communication.

I am desirous of receiving entitled benefits and/or subsidies of welfare schemes (DBT-Beneficiary) of the Government of India directly in my account.

Sachin Mahre

Date: **Signature of the customer**

Resident consent for non e-KYC:

I hereby offer my Aadhaar number to the bank voluntarily and extend my full consent to the bank to update my Aadhaar Number in their records

Sachin Mahre

Date: **Signature of the customer**

For official use

Date : **Signature and seal of the branch official**

Karur Vysya Bank
Smart way to bank

FATCA/CRS Declaration Form (For Individuals)
(Foreign Account Tax Compliance Act / Common Reporting Standard)

Customer ID:		Customer Name:	Sachin malve		
Mobile No : Prefix with country code		E-Mail:			
City of Birth:		Occupation:			
PAN:	AATPM6205C	Aadhaar No	9554 2112 8663	Date of Birth:	16/04/1971
Fathers' name:	Durgapal malve	Spouse Name:			

PART A	
Country of Residence	INDIA
Residence for Tax Purposes	INDIA
Country of Birth	INDIA
US Person* (YES /No)	No

PART B

If in any of the fields under "PART A", the 'Country' mentioned is **other than 'INDIA' or if U.S person=Yes,** then either fill the details in Part-B (i) below **OR** sign the self-declaration in Part-B(ii)

Part B (i)

S.No (1)	Country of Tax Residency # (2)	Tax Payer Identification Number (TIN) / Functional Equivalent (3)	Issuing Country of TIN / Functional Equivalent (4)	Specify whether column (3) is TIN / Functional Equivalent (5)

to include all countries other than India, where investor is Citizen / Resident / Green Card Holder / Tax Resident in those respective countries especially of USA

Part B (ii) (If Part B is applicable but Part B(i) has not been filled in, kindly provide information below)

I confirm that I am neither a U.S Person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India. Therefore, I am providing the following document as proof of my citizenship and residency in India.

☐ Passport ☐ Voter ID ☐ Aadhaar ☐ PAN ☐ Driving License ☐ Govt ID

☐ NREGA Job Card Document#______________

X

Signature

***-Definition for the term 'U.S Person' is available on the rear of this form**

Declaration by customer:

1. I hereby certify that I have declared my status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes(CBDT) vide notification No.S.O.2155(E)dated 7th August 2015 and RBI Circular No. RBI/2015-16/165.DBR.AML.BC.No.36/14.01.001/2015-16 dated 28th August 2015 in this regard.
2. I understand that the Bank is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. I shall seek advice from a professional tax advisor for clarification on my tax residency and its implication under FATCA / CRS.
3. I understand and acknowledge that as per the provisions of Income Tax Act, Rules made thereunder and guidelines issued by the RBI in the matter, depending upon the residential status and / or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements(IGA) and common Reporting Standards (CRS) and or any other similar arrangements.
4. I certify that the information provided by me above as applicable to me and signed by me as well as in the documentary evidence provided by me is, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment / categorization of my account as a U.S Reportable Account or other Reportable Account or otherwise. In case any of the above information is found to be false or untrue or misleading or misinterpreting, I am aware that I may be held liable for it.
5. I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided above, as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh and valid self-declaration along with documentary evidence.
6. I agree to make good any loss that may be caused to KarurVysya Bank on account of providing incorrect or incomplete information by me.

Sachin Make

Place : **Date:** **Customer Signature**

Note:

The term 'United States person' will be based on one or more of the following indicia:

1. An individual, being a citizen or resident of the United States of America.
2. Unambiguous indication of a US place of birth
3. Current US mailing/residence address (including a US post office box)/Current US telephone Number
4. Standing instructions to transfer funds to an account maintained in USA
5. Current effective power of attorney or signing authority granted to a person with a US address (or) An 'in-care-of' or 'Hold mail' address that is the sole address the Indian Financial Institution has on the file for the account holder.

Date : **Branch :** **Signature & Stamp of Branch Official**

---**Tear off portion**---

Acknowledgement

KarurVysya Bank hereby confirms that the Bank has received FATCA /CRS declaration from Mr / Ms / Mrs. ____________________ on ____________

Date : **Branch:** **Signature & Stamp of Branch Official**

Classification | INTERNAL

Karur Vysya Bank
Smart Way to bank

Annexure to Circular No: 231 /2024 (INF) dt. 23.07.2024

CKYC Consent Form
(Mandatorily to be obtained along with physical AOF)

Dear Sir/Madam,

I, Sachin malve [Name of the customer] S/o / D/o / W/o Durgadas malve [Father's /Mother's/Spouse Name], give my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry.

I understand that my KYC Record includes my KYC Records /Personal information such as my name, address, date of birth, PAN number, Mobile Number, etc.

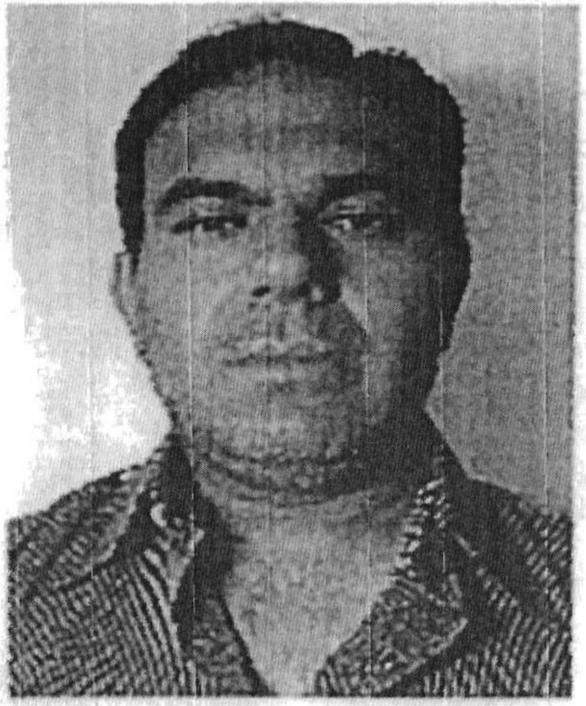
I hereby consent to receive information from Central KYC Registry through SMS/eMail on my registered mobile number/eMail address.

Signature: Sachin Malve

Residential Address Park Avenue colony, PG Road, Secunderabad. Hyderabad.

Date: ____________________

భారత ప్రభుత్వం
Government of India



సచిన్ మాల్వే
Sachin Malve

పుట్టిన సంవత్సరం/Year of Birth: 1971
పురుషుడు / Male

9554 2112 8663

ఆధార్ – సామాన్యుని హక్కు

Sachin Malve

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

ఆధార్

చిరునామా: S/O దుర్గాదాస్ మాల్వే
౧-౮-౨౧౫/౩౦/సి, పర్కావెనుఎ కాలనీ
పి జి రోడ్, సికింద్రాబాద్
సికింద్రాబాద్, హైదరాబాద్
ఆంధ్రప్రదేశ్, 500003

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INCOME TAX DEPARTMENT

भारत सरकार

GOVT. OF INDIA

SACHIN MALVE

DURGADAS MALVE

16/04/1971

Permanent Account Number

AATPM6205C

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Sachin Malve

Signature