

Important Instructions:

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Legal Entity / Other than Individuals

A) Fields marked with "" are mandatory fields. 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. B) Tick ' ' wherever applicable. H) Please read section wise detailed guidelines / instructions at the end. C) Please fill the date in DD-MM-YYYY format. I) For particular section update, please tick (✓) in the box available before the D) Please fill the form in English and in BLOCK letters. section number and strike off the sections not required to be updated. E) KYC number of applicant is mandatory for update application. ☐ Update Application Type* New For office use only (To be filled by financial institution) (Mandatory for KYC update request) **KYC Number** 1. ENTITY DETAILS* (Please refer instruction A at the end) Name* (Please refer instruction B a the end) Entity Constitution Type* Date of Incorporation / Formation* Date of Commencement of Business D D - M M - Y Country of Incorporation / Formation* TIN or Equivalent Issuing Country Place of Incorporation / Formation* Form 60 furnished PAN* TIN / GST Registration Number 2. PROOF OF IDENTITY (Pol)* (Please refer instruction B at the end) Officially void document(s) in respect of person authorised to transact Regn. Certificate No Certificate of Incorporation / Formation Registration Certificate Trust Deed Memorandum and Articles of Association Partnership Deed Power or attorney granted to its manager, officers or employees to transact on its behalf Resolution of Board / Managing Committee Activity Proof - 1 (For Sole Proprietorship Only) Activity Proof - 2 (For Sole Proprietorship Only) 3. ADDRESS* (Please refer instruction C at the end) 3.2 Local Address in India (If different from Above)* Proof of Address* Registration Certificate Other Document Certificate of Incorporation / Formation Line 1* Line 2 City / Town / Village Line 3 ISO 3166 Country Code* Pin / Post Code* State / U.T. Code* District 3.1 Registered Office Address / Place of Business* Line 1* Line 2 City / Town / Village* Line 3 ISO 3166 Country Code* State / U.T. Code* Pin / Post Code* District (All communication will be sent to Mobile number / E-mail ID provided may be used) (Please refer instruction D at the end) Tel. (Off) FAX Mobile Email ID Mobile Email ID (Please refer instruction E at the end) ☐ 5. NUMBER OF RELATED PERSONS



☐ 4. CURRENT ADDRESS DETAILS (Please refer instruction B at the end)	
Same as above mentioned address (in such cases address details as belo	
 Certified copy of OVD or equivalent e-document of OVD or OVD obtained thr 	rough 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	
IV. ☐ Deemed Proof of Address - Document type Code	
Address	
Line 1*	
Line 2	City/T Village
Line 3	City / Town / Village* State / U.T Code* ISO 3166 Country Code*
District* Pin / Post Code*	State / 0.1 Code 100 5100 Country Code
\square 5. CONTACT DETAILS (All communications will be sent to Mobile number / Em	ail-ID provided) (Please refer instruction C at the end)
Tel. (Off) Tel. (Res)	
Email ID	
☐ 6. REMARKS (If any)	
7. APPLICANT DECLARATION	
I hereby declare that the KYC details furnished by me are true and correct to the best of the bes	of my knowledge and belief
and I under-take to inform you of any changes therein, immediately. In case any of the a be false or untrue or misleading or misrepresenting, I amaware that I may be held liab	above information is found to
 I hereby consent to receiving information from KRA/CERSAI (CKYC) through SMS/Em 	
number/Email address. I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validate.	d against Aadhaar details. I
hereby consent to sharing my masked Aadhaar card with readable QR code or my Ar file, along with passcode and as applicable, with KRA and other Intermediaries wit	adhaar XML/Digilocker XML aighatta 7 Thumb impression of Applicant
relationship for KYC purposes only.	· · · · · · · · · · · · · · · · · · ·
Date:	
8. ATTESTATION / FOR OFFICE USE ONLY	
Documents Received ☐ Certified Copies ☐ E-KYC data received fi	rom UIDAI
Equivalent e-document Video Based k	
_ Light of document	
MCARRIED OUT BY	
Date D G M M Y Y Y Y	Name SACHDEVA STOCKS PVT. LTD.
Emp. Name	Code
Emp. Code	
Ellip. Code	
Emp Designation	
Emp. Designation	
Emp. Designation	[Institution Stamp]
Emp. Designation [Employee Signature]	[Institution Stamp]