THE SHAHADA PEOPLE'S CO-OPERATIVE BANK LTD., SHAHADA

Head Office : Near Dondaicha Road, Shahada - 425 409. Dist. Nandurbar (M.H.)

CENTRAL KYC REGISTRY I Know Your Customer (KYC) Application Form I Individual

Important Instructions :

A) Fields marked with '*' are mandatory fields.
B) Self-Certification of documents is mandatory.
C) Please fill the form in English and in BLOCK letters
D) Please fill the date in DD-MM-YYYY format.
E) Please read section wise detailed guidelines / instructions at the end.
F) KYC number of applicant is mandatory for update application.
G) For particulars section update, please tick (✓) in the box available before the section number and strike off the sections not required to be update.

For office use only *(To be filled by financial institution)*

Application Type* ☐ New ☐ Update

KYC Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ *(Mandatory for KYC update request)*

Account Type* ☐ Normal ☐ Simplified (for low risk customers) ☐ Small

☐ 1. PERSONAL DETAILS

	Prefix	First Name	Middle Name	Last Name
☐ Name* (Same as ID proof)				
Maiden Name (If any*)				
Father / Spouse Name*				
Mother Name*				

Date of Birth* ☐☐-☐☐-☐☐☐☐

PHOTO

Gender* ☐ M- Male ☐ F- Female ☐ T- Transgender

Marital Status* ☐ Married ☐ Unmarried ☐ Others

Nationality* ☐ IN- Indian

Residential Status* ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin

Occupation Type* ☐ S-Service (☐ Private Sector ☐ Public Sector ☐ Government Sector)
☐ O-Others (☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student)
☐ B-Business
☐ X-Note Categorised

Signature / thumb impression of Applicant

☐ 2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence* ☐☐

Tax Identification Number or equivalent (If issued by jurisdiction)* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Place / City of Birth* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ISO 3166 Country Code of Birth* I N

☐ 3. PROOF OF IDENTITY (PoI)*

(Certified copy of any one or the following Proof of Identity [PoI] needs to be submitted)

☐ A- Passport Number ☐☐☐☐☐☐☐☐ Passport Expiry Date ☐☐-☐☐-☐☐☐☐

☐ B- Voter ID Card ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

☐ C- PAN Card ☐☐☐☐☐☐☐☐☐☐

☐ D- Driving Licence ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Driving Licence Expiry Date ☐☐-☐☐-☐☐☐☐

☐ E- UID (Adhaar) ☐☐☐☐☐☐☐☐☐☐☐☐

☐ F- NREGA Job Card ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

☐ Z- Others (any document notified by the central government) ☐☐☐☐☐☐☐☐☐☐☐☐ Identification Number ☐☐☐☐☐☐☐☐☐☐☐☐

S- Simplified Measures Account - Document Type code ☐☐ Identification Number ☐☐☐☐☐☐☐☐☐☐☐☐

4. PROOF OF ADDRESS (PoA)*

☐ 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS

(Certified copy of any one or the following Proof of Address [PoA] needs to be submitted)

Address Type* ☐ Residential / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Proof of Address* ☐ Passport ☐ Driving Licence ☐ UID (Aadhar)
☐ Voter Identity Card ☐ NREGA Job Card ☐ Others ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
☐ Simplified Measures Account-Document Type code ☐☐

Address

Line 1* ☐☐

Line 2* ☐☐

Line 3* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ City / Town / Village* ☐☐☐☐☐☐☐☐☐☐

District* ☐☐☐☐☐☐☐☐☐☐☐☐ Pin / Post Code* ☐☐☐☐☐☐ State Code* M H ISO 3166 Country Code* I N

☐ 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS *

☐ Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2*

Line 3* City / Town / Village*

District* Pin / Post Code* State Code* M H ISO 3166 Country Code* I N

☐ 5. CONTACT DETAILS (All communications will be send on provided Mobile no. / E-mail ID)

Tel. (Off) - Tel. (Res.) - Mobile -

FAX - E-mail ID

☐ 6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1')

☐ Addition of Related Person ☐ Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* ☐ Guardian of Minor ☐ Nominee ☐ Assignee ☐ Authorized Representative ☐ Beneficial Owner ☐ Beneficiary

Name* Prefix First Name Middle Name Last Name

(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON*

☐ A- Passport Number Passport Expiry Date -

☐ B- Voter ID Card

☐ C- PAN Card

☐ D- Driving Licence Driving Licence Expiry Date -

☐ E- UID (Adhaar)

☐ F- NREGA Job Card

☐ Z- Others (any document notified by the central government) Identification Number

☐ 7. REMARKS (If any)

☐ 8. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my/our 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/We am/are aware that, I/We may be held liable for it.
- My personal / KYC details may be shared with Central KYC Registry
- I hereby consent to receiving information from Central KYC Registry through SMS/E-mail on the above registered number/e-mail address.

Date : - - Place :

Signature / Thumb Impression of Applicant

☐ 9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date - -

Emp. Name

Emp. Designation

Branch

(Employee Signature)