

**Know Your Customer (KYC)
Application Form**

Application
No. :

(For Individuals Only)

Please fill this form in ENGLISH and in BLOCK LETTERS (All Information as applicable in Sections A, B and C below is mandatory)

This information is sought under the Prevention of Money Laundering Act, 2002, the rules notified thereunder and SEBI's guidelines on Anti Money Laundering. For existing Mutual Fund investors, the address(es) & contact details furnished herein will be replaced in the records of the Mutual Fund / Authorised Agent. (Refer Notes / Guidelines overleaf)

A. Identity Details (Please see guidelines A1 to A5 overleaf)

1. Name of Applicant (As appearing in supporting identification document) Title Mr. Ms. Others **Gender** Male Female

Name

Father's Name

2. Date of Birth

3. Nationality Indian Others

4. Status Please tick (✓) Resident Individual Non-Resident Passport Copy & Overseas address Proof Mandatory for NRI

5. Permanent Account Number (PAN) (MANDATORY)

Please tick (✓) Copy of PAN Card attached

**Please affix
most recent
colour photograph
30mm x 40 mm
Sign across the photograph**

B. Address Details (Please see guidelines B1 to B4 overleaf)

1. Address for Correspondence

City / Town / Village Postal Code

State Country

2. Contact Details

Tel. (Off.)	(ISD)	(STD)	Tel. (Res.)	(ISD)	(STD)
Mobile	(ISD)	(STD)	Fax	(ISD)	(STD)
E-Mail Id.					

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Latest Landline Tel. Bill Latest Electricity Bill Passport Driving License Latest Bank Passbook Latest Bank Account Statement

Latest Demat Account statement Voter Identity Card Ration Card Registered Lease / Sale Agreement of residence Any other proof of address document (as listed overleaf)

4. Permanent Address of Resident Applicant if different from B1 above OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village Postal Code

State Country

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.

Latest Landline Tel. Bill Latest Electricity Bill Passport Driving License Latest Bank Passbook Latest Bank Account Statement

Latest Demat Account statement Voter Identity Card Ration Card Registered Lease / Sale Agreement of residence For NRIs - Any other document attested by local authority.

C. Other Details (Please see guidelines C1 and C2 overleaf)

1. Gross Annual Income Details Please tick (✓)

Upto Rs. 5,00,000 Rs. 5,00,001 to Rs. 25,00,000 Rs. 25,00,001 to Rs. 1,00,00,000 Rs. 1,00,00,001 to Rs. 5,00,00,000 Rs. 5,00,00,001 and above.

2. a. Occupation Details Please tick (✓) any one

Private Sector Service Public Sector / Government Service Business Professional Agriculturist Retired Housewife

Student Forex Dealer Others (Please specify) _____

b. If the following is additionally applicable to you Please tick (✓) one or more as applicable

Civil Servant Bureaucrat Current or Former MP, MLA or MLC Politician Current or Former Head of State

DECLARATION

I hereby confirm that I have read and understood the Instructions mentioned overleaf and apply to CDSL Ventures Limited ('CVL') or other agent of the mutual fund registered under the SEBI (Mutual Funds) Regulations, 1996 for compliance of Know Your Customer (KYC) procedure for transacting in units issued by Mutual Funds and I agree to abide by the terms, conditions, rules, regulations and other statutory requirements applicable to the respective Mutual Funds. I hereby declare that the particulars given herein are true, correct and complete to the best of my knowledge and belief, the documents submitted along with this application are genuine and I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any Notifications, Directions issued by any governmental or statutory authority from time to time. I hereby undertake to promptly inform CVL / the mutual fund agent of any changes to the information provided hereinabove and agree and accept that CVL, the respective Mutual Funds, their authorised agents and representatives ('the Authorised Parties') are not liable or responsible for any losses, costs, damages arising out of any actions undertaken or activities performed by them on the basis of the information provided by me as also due to my not intimating / delay in intimating such changes. I hereby authorize CVL / the mutual fund agent to disclose, share, remit in any form, mode or manner, all / any of the information provided by me to the respective Mutual Funds in which I may transact / have transacted and / or to their authorised agents and representatives including all changes, updates to such information as and when provided by me. I hereby agree to provide any additional information / documentation that may be required by the Authorised Parties, in connection with this application. I hereby confirm that this is a unique KYC application and I have not applied for KYC in the past.

SIGNATURE OF APPLICANT

Place : _____

Date : _____

**For
Office
Use
Only**

Stamp of AGC
(Name & Location)
& Receiver's Signature

Name and Employee Number of Receiver

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

KYC Ref.

Please note that the KYC Application Form and overleaf instructions should be printed on the same page (back to back), if printed separately then both the pages should be attached and signed by the applicant.