

**Know Your Client (KYC)
Application Form (For Individuals Only)**



Application No.:
SBICAP SECURITIES LIMITED

Please fill in ENGLISH and in BLOCK LETTERS with black ink

For office use only Account Type Normal Simplified (for low risk customers) Small Application Type New Update
(To be filled by financial institution) KYC Number (Mandatory for KYC update request)

1. PERSONAL DETAILS

Name (Same as ID proof) Prefix _____ First Name _____ Middle Name _____ Last Name _____
Father / Spouse Name _____
Mother Name _____
Date of Birth _____ DOB Document Submitted _____
Place of Birth: _____ Country of Birth _____
Gender: M- Male F- Female T-Transgender **Marital Status:** Married Unmarried Others
Nationality: IN- Indian Others Tax Residency: _____
Residential Status: Resident Individual Non Resident Indian Foreign National Person of Indian Origin
PAN: _____ Foreign TIN: _____ Issuing Country: _____
Unique Identification Number(UID) / Aadhaar, If any _____
Proof of Identity submitted for PAN exempt cases (Ö) UID (Aadhaar) Passport Voter ID Driving License
Occupation Type: S-Service (Private Sector Public Sector Government Sector)
 O-Others (Professional Self Employed Retired Housewife Student)
 B-Business X- Not Categorised
Financial Status (Income Range per Annum): Up to Rs.1 Lac Rs.1 Lac to Rs.5 Lac Rs.5 Lac to Rs.10 Lac Rs.10 Lac to Rs.25
 Lac Rs.25 Lac to Above (Specify) _____

Signature / Thumb
Impression

2. PROOF OF ADDRESS (PoA)

2.1 CORRESPONDENCE / LOCAL ADDRESS DETAILS

Proof of Address: UID (Aadhaar) Passport Driving License Correspondence Residence Voter Identity Card NREGA Job Card
 Utility Bill* (Tel. / Electric city / Gas bill) Allotment Letter Others please specify
Address
Line 1 _____
Line 2 _____
City / Town / Village: _____ District: _____
State: _____ Pin / Post Code: _____ Country Name: _____

2.2 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS

Same as Correspondence / Local Address details

Proof of Address: UID (Aadhaar) Passport Driving License Voter Identity Card NREGA Job Card
Address
Line 1 _____
Line 2 _____
City / Town / Village: _____ District: _____
State: _____ Pin / Post Code: _____ Country Name: _____

*Not more than 2 months old. Validity / Expiry date of proof of address submitted

3. CONTACT DETAILS

Tel. (Off) _____ Tel. (Res) _____ Mobile _____
FAX _____ Email ID _____

4. APPLICANT DECLARATION

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. In case 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 consent to receiving information from Central KYC Registry / KRA through SMS/Email on the above registered number/email address.
I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and other data as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

[Signature / Thumb Impression]
Signature / Thumb Impression of Applicant

Date : _____ Place : _____

DOCUMENT VERIFIED WITH ORIGINALS AND IN-PERSON VERIFICATION DONE BY

Name of the Employee _____

Designation _____

IPV Done on Date _____ / _____

For SBICAP Securities Ltd.

Signature of Verifier

eIA No.:

Approved Person ID: _____

DECLARATION AND UNDERTAKING (FATCA)

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

First Holder:

Country/countries of tax residency	Tax Identification Number (TIN)	TIN Issuing Country	Documents provided (copy of certificate of residence or copy of TIN)

Second Holder:

Country/countries of tax residency	Tax Identification Number (TIN)	TIN Issuing Country	Documents provided (copy of certificate of residence or copy of TIN)

Third Holder:

Country/countries of tax residency	Tax Identification Number (TIN)	TIN Issuing Country	Documents provided (copy of certificate of residence or copy of TIN)

Documents Required: Kindly provide the documentary evidence of residence or TIN for all the countries listed in the above table.

I/We certify that:

- a) the information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income tax Rules, 1962.
- b) the information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- c) I/We permit/authorise SBICAP Securities Limited ('the Company') to collect, store, communicate and process information relating to the Account and all transactions therein, by the Company and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- d) I / We 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 in the Form, its supporting Annexures as well as in the documentary evidence provided by us or if any certification becomes incorrect and to provide fresh self certification alongwith documentary evidence.
- e) I / We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and the Company would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by the Company if the deficiency is not remedied by us within the stipulated period.
- f) I / We hereby accept and acknowledge that the Company shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me / us to the Company.
- g) It shall be my / our responsibilities to educate myself / ourself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules thereunder.
- h) I/We also agree to furnish such information and/or documents as the Company may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- i) I/We shall indemnify the Company for any loss that may arise to the Bank on account of providing incorrect or incomplete information.

Date: _____

_____  FH04

Place: _____

Name: _____