

Know Your Client (KYC) Application Form - for Individuals

Please fill this form in English and BLOCK Letters

(Please tick the box on the left margin of the appropriate row where CHANGE/CORRECTION is required and provide the details in the corresponding window)

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

Application Type* ☐ New ☐ Update KYC Number
 Account Type* ☐ Normal ☐ Simplified (for low risk customers) ☐ Small

A. Identity details

<input type="checkbox"/>	1. Name (Same as ID Proof)	
	1a. Maiden Name (If any)	
<input type="checkbox"/>	2. Father's/Spouse's Name	
	2a. Mother's Name	

Photograph

Please affix your recent passport size photograph and sign across it

 F1

☐ 3a. Gender ☐ Male ☐ Female ☐ Transgender 3b. Marital Status ☐ Single ☐ Married ☐ Other 3c. DOB
☐ 4a. Citizenship ☐ Indian ☐ Other _____ (ISO 3166 Country Code)
☐ 4b. Residential Status ☐ Resident Individual ☐ Non Resident Indian ☐ Person of Indian Origin ☐ Foreign National

Tick if applicable ☐ Residence for tax purposes in jurisdiction(s) outside India

ISO 3166 Country Code of Jurisdiction of residence Place of birth _____

Tax Identification Number or Equivalent ISO3166 Country Code of Birth

5a. PAN

5b. Unique Identification Number (UID) / AADHAR

6. Proof of Identity Submitted ☐ Pan Card ☐ Other (Please Specify) _____

B. Address details

1. Contact Details

Telephone (Office)		Mobile No	
Telephone (Residence)		Email ID	

☐ 2. Residence/Correspondence Address Address Type: ☐ Residential ☐ Business ☐ Unspecified

Address			
City/Town	District	Pin Code	
State/U.T Code	Country/ISO Code		
Specify the Proof of Address Submitted for Residence / Correspondence Address			

C. DECLARATION

I/We declare that the details furnished above are true and correct to the best of my knowledge and undertake all liabilities w.r.t any incorrect information, I also confirm to inform Zerodha w.r.t any changes in the future. I/We are also aware that for Aadhaar OVD based KYC, my KYC shall be validated against my Aadhaar. I/We hereby consent to sharing my/our masked Aadhaar with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I/We or Zerodha have a business relationship for KYC purposes only. I/We hereby consent to receiving information from CVL KRA & C-KYC Registry through SMS/Email on the above registered number/Email ID.

Date :

 F2

Client Signature

FOR OFFICE USE ONLY

In Person Verification (IPV) Details:

Name of the Person who has done the IPV: _____

Designation: _____ Employee ID: _____

Name of the Organization: ZERODHA BROKING LTD.

Date of the IPV:

Signature of the Person who has done the IPV

Seal/Stamp of the Intermediary

☐ Originals Verified and Self-Attested Document Copies Received

Date

Signature of the Authorized Signatory

Sign wherever you see 

☐ 3. Permanent Address

Address									
City/Town				District			Pin Code		
State/U.T Code				Country/ISO Code					

☐ 4. Address in the jurisdiction details where applicant is resident outside India for tax purpose (if applicable)

Address									
City/Town				District			Pin Code		
State/U.T Code				Country/ISO Code					

D. Details of related person (In case of additional related persons, please fill below details)

☐ Addition of Related Person ☐ Deletion of Related Person

KYC Number of Related Person (if available)

Related Person Type ☐ Guardian of Minor ☐ Assignee ☐ Authorized Representative

Name									

(If KYC number & name are provided, below details are optional)

Proof Of Identity Of Related Person

Identity Proof Submitted				Number					

Expiry Date :

Others (any document notified by the Central Govt.)				Identification No					
Simplified Measures Account-Document Type Code				Identification No					

A. Bank account details

Account Type: Savings ☐ Current ☐ Others ☐ | In case of NRI Account: NRE ☐ NRO ☐

Bank Name									
Branch Address									
Account Number									
MICR Number				IFSC Code					

B. Other details

Gross Annual Income Details (please specify): Income Range per annum

Below Rs 1 Lakh ☐ 1-5 Lakh ☐ 5-10 Lakh ☐ 10-25 Lakh ☐ More than 25 Lakh ☐

Or Net-worth as on _____ date _____ (Net worth should not be older than 1year)

Occupation

Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐

Housewife ☐ Student ☐ Self Employed ☐ Others (please specify) _____

Mode in which you wish to receive the RDD, Rights & Obligations, and Guidance Note: Physical ☐ Electronic ☐

Please tick, if applicable: Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐

Zerodha Broking Ltd.

153/154, 4th Cross, 4th Phase, JP Nagar, Dollars Colony,
Opp. Clarence School, Bangalore - 560078

Additional KYC Form for Opening a Demat Account

For Individuals

(To be filled by the Depository Participant)

Application No		Date		DP Internal Reference No	
DP ID		Exchange	NSE/BSE	UCC	Client ID

(To be filled by the applicant in BLOCK LETTERS in English)

I/We request you to open a demat account in my/ our name as per following details:-

Holder Details

Sole / First Holder's Name			
PAN		UID	
Second Holder's Name			
PAN		UID	
Third Holder's Name			
PAN		UID	

*In case of Firms, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., although the account is opened in the name of the natural persons, the name of the Firm, Association of Persons (AOP), Partnership Firm, Unregistered Trust, etc., should be mentioned above.

Type of Account (Please tick whichever is applicable)

Status	Sub – Status	
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual Resident <input type="checkbox"/> Individual Director's Relative <input type="checkbox"/> Individual Promoter <input type="checkbox"/> Individual Margin Trading A/c (MANTRA)	<input type="checkbox"/> Individual-Director <input type="checkbox"/> Individual HUF / AOP <input type="checkbox"/> Minor <input type="checkbox"/> Others(specify)
<input type="checkbox"/> NRI	<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Repatriable Promoter <input type="checkbox"/> NRI – Depository Receipts	<input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> NRI Non-Repatriable Promoter <input type="checkbox"/> Others (specify)
<input type="checkbox"/> Foreign National	<input type="checkbox"/> Foreign National <input type="checkbox"/> Foreign National - Depository Receipts <input type="checkbox"/> Others (specify)	

Details of Guardian (in case the account holder is minor)

Guardian's Name		PAN	
Relationship with the applicant			

I / We instruct the DP to receive each and every credit in my / our account [Automatic Credit] ☐ Yes ☐ No
(If not marked, the default option would be 'Yes')

Account to be operated through Demat Debit and Pledge Instruction (DDPI) ☐ Yes ☐ No

I / We would like to instruct the DP to accept all the pledge instructions in my /our account without any other further instruction from my/our end (If not marked, the default option would be 'No') ☐ Yes ☐ No

Account Statement Requirement ☐ As per SEBI Regulation ☐ Daily ☐ Weekly ☐ Monthly ☐ Fortnightly

I / We request you to send electronic transaction-cum-holding statement at the following ☐ Yes ☐ No

Email ID	
----------	--

I / We would like to share the email ID with the RTA ☐ Yes ☐ No

I / We would like to receive the Annual Report ☐ Physical ☐ Electronic ☐ Both Physical and Electronic
(Tick the applicable box. If not marked the default option would be Electronic)

I / We accept that all communication from the DP will be sent to the first holder of the account in case the account is being operated jointly. ☐ Yes ☐ No

Zerodha Broking Ltd.

153/154, 4th Cross, 4th Phase, JP Nagar, Dollars Colony,
Opp. Clarence School, Bangalore - 560078

Schedule-A Tariff Structure	
For individuals/HUF/corporates	
Details	POA/DDPI Clients
Stamp charges payable upfront	Rs.50/-
Annual Maintenance Charges (charged upfront annually)	
a. Foreign Individuals	Rs.50,000 + GST
b. Foreign Body Corporate/Foreign Entity	Rs.50,000 + GST

Transaction Charges : (Market Trades)	
Buy(Receive) / Sell (Debit)	Nil / Rs.4 NSDL fee (Rs. 0 for Yuva plan) + Rs.9 Zerodha fee
Transaction Charges : (Off-Market Trades)	
Buy(Receive) / Sell (Debit)	Nil / Rs.25/- per transaction (Exclusive of NSDL charges)
Demat (Per certificate)	Rs. 150/- per certificate
Remat (Per certificate)	Rs. 150/- per certificate + NSDL Charges
Courier charges per Demat/Remat/Demat Rejn./CMR	Rs. 100/-
Pledge Request	Rs. 20/- + Rs. 25 per request (NSDL charges)
Unpledge Request	Rs. 20/- + Rs. 25 per request (NSDL charges)
Pledge invocation	Rs. 20/-
Margin Pledge	Rs. 9 + Rs. 5 per request (NSDL charges)
Margin Unpledge	Rs. 9 + Rs. 5 per request (NSDL charges)
Margin Repledge	Rs. 2/-
Periodic Statement	
By Email / Physical	Free / Rs. 25/- (+ Courier charges at actual)
Adhoc / Non Periodic Statement Requests	
a. By Email	Rs.10/- per request
b. Physical	Rs. 25 per request upto 10 pages. Every additional page at Rs. 5 (+ Courier charges at actual)
Delivery instruction	
a. First Delivery Instruction Book	Free (10 Leaves)
b. Every Addl Booklet (10 Leaves)	Rs.100/-
Cheque Bounce Charges	Rs. 350/-
Failed Transactions	Rs. 50 per ISIN
Modification in CML	Rs. 25/- per request
KRA Upload / Download	Rs. 50/-

NOTE :

- For all purposes the bill date shall be construed as the date demand and the bills will be considered as the bill cum notice for payment and Zerodha Broking Ltd. reserves the right to freeze depository account for debit transaction in case of non payment of charges after two days from the bill date.
- Zerodha may, upon obtaining consent, charge for any ancillary services not listed above as and when applicable.
- The above tariff is subject to change. Changes if any will be intimated 30 days in advance. Annual Maintenance Charge (AMC) is non refundable. GST is applicable on all above charges except stamp charges.
- I/We understand that any instruction provided by me to Zerodha to transfer securities from my account shall be rejected by Zerodha, if there is any debit balance or any unpaid amounts due as per this tariff sheet to Zerodha with a notice of 2 days.

First/Sole Holder
or Guardian
(in case of Minor)

Second Holder

Third Holder

Sign wherever you see

Date :

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

To,

Zerodha Broking Ltd.

153/154, 4th Cross, Dollars Colony, 4th Phase, JP Nagar, Opp. Clarence Public School, Bangalore - 560078.

Dear Sir,

Sub : Requesting for bill/transaction/holding statement through email.

I/We request you to send me/us bill, transaction and holding statement of my Demat account no. _____ at following email address: _____

I/We fully agree and are aware of following Terms and Conditions mentioned below.

- a) that I/We will not receive the bill, transaction and holding statements in paper form.
- b) that I/We will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account.
- c) that I/We am/are aware that the bill, transaction and holding statements may be accessed by other entities in case the confidentiality /secrecy of the login name and password is compromised.
- d) that I/We in case bill, transaction and holding statements are sent by email, I/We will immediately inform the Zerodha Broking. about change in email address, if any.

In case, the Zerodha Broking is not able to provide bill/transaction statement to its Clients by email or on website due to any reason (including bounced emails), Zerodha Broking Ltd. will ensure that the transaction statement is provided to me/us in paper form as per the time schedule stipulated in the Bye Laws & Business Rules of NSDL.

I/We hereby request you to send the statements:

Daily ☐ Fortnightly ☐ Weekly ☐ Monthly ☐

Mode of Operations for Demat Account

We would like to update mode of operation in the Demat account number _____ held with Zerodha Broking Ltd. as below:

Jointly ☐ Anyone of the holder or survivor(s) ☐

We understand that If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including Inter-Depository Transfer, pledge/hypothecation/margin pledge/margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and/or securities and/or specific number of securities will be permitted.

Yours faithfully,

F5(a) First/Sole Holder or Guardian (in case of Minor)

S3(a) Second Holder

T3(a) Third Holder

I, the sole holder, or we, the Joint Holders confirm that we would like to designate the First Demat Account Holder (who is a Resident Indian Individual) of our account to receive the TPIN (or any such other similar PIN as required by any or all Depositories to transact as per the e-DIS facility offered by such Depository) on his/her mobile/email address for execution/permission of all such transactions & ancillary facilities to be availed via such mechanism from any or all Depositories.

Declaration

I/We have received and read the Rights and Obligations documents and terms & conditions and agree to abide by and be bound by the same and the Bye Laws as are in force from time to time. I/We declare that the particulars given by me/us above are true to the best of my/our knowledge as on the date of making this application.

I/We agree and undertake to intimate the DP of any change(s) in the details/particulars mentioned by me/us in this form.

I/We further agree that any false/misleading information given by me/us or suppression of any material information will render my account liable for termination and suitable action.

F5(b) First/Sole Holder or Guardian (in case of Minor)

S3(b) Second Holder

T3(b) Third Holder

Sign wherever you see

Nomination Details - Annexure 1A

☐ Zerodha Broking Limited

☐ Zerodha Commodities Private Limited

Date

I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

Name	UCC	Demat ID
------	-----	----------

Nomination Details

Up to 3 nominations can be made	Details of 1st Nominee	Details of 2nd Nominee	Details of 3rd Nominee
Name of the nominee(s) (Mr./Ms.)			
Share of each nominee <input type="checkbox"/> Distribute equally <small>[If not equally shared, please specify %age]</small>	Any odd lot after division shall be transferred to the first nominee mentioned in the form.		
Relationship With the Applicant (if any)			
Address of nominee(s)			
Mobile/Telephone no. of nominee(s)			
Email ID of nominee(s)			
Proof of identity submitted for nominee(s)			
Fill below details only if the nominee is a minor			
Date of birth			
Name of the guardian			
Address of guardian(s)			
Mobile/Telephone no. of guardian(s)			
Email ID of guardian(s)			
Relationship of guardian with nominee			
Proof of identity submitted			

F8 First/Sole Holder or Guardian (in case of Minor)

S5 Second Holder

T5 Third Holder

Note:

- This nomination shall supersede any prior nomination made by the account holder(s), if any.
- The Trading Member / Depository Participant shall provide acknowledgment of the nomination form to the account holder(s).

Zerodha Broking Ltd.

153/154, 4th Cross, 4th Phase, JP Nagar, Dollars Colony,
Opp. Clarence School, Bangalore - 560078

Date :

Declaration form for opting out of nomination (Annexure 1B)

To,

Zerodha Broking Ltd.

153/154, 4th Cross, Dollars Colony,

4th Phase, JP Nagar, Opp. Clarence Public School, Bangalore -


560078.

DP ID

Client ID

First Holder Name	<input type="text"/>
Second Holder Name	<input type="text"/>
Third Holder Name	<input type="text"/>

I/We hereby confirm that I/We do not wish to appoint any nominee(s) in my/our trading/demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my/our legal heirs would need to submit all the requisite documents/information for claiming of assets held in my/our trading/demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the trading/demat account.


 **F9** First/Sole Holder
or Guardian
(in case of Minor)

 **S6** Second Holder

 **T6** Third Holder

Most Important Terms and Conditions

1. Your trading account has a “Unique Client Code” (UCC), different from your demat account number. Do not allow anyone (including your own stock broker, their representatives and dealers) to trade in your trading account on their own without taking specific instruction from you for your trades. Do not share your internet/mobile trading login credentials with anyone else.
2. You are required to place collaterals as margins with the stock broker before you trade. The collateral can either be in the form of funds transfer into specified stock broker bank accounts or margin pledge of securities from your demat account. The bank accounts are listed on the stock broker website. Please do not transfer funds into any other account. The stock broker is not permitted to accept any cash from you.
3. The stock broker’s Risk Management Policy provides details about how the trading limits will be given to you, and the tariff sheet provides the charges that the stock broker will levy on you.
4. All securities purchased by you will be transferred to your demat account within one working day of the payout. In case of securities purchased but not fully paid by you, the transfer of the same may be subject to limited period pledge i.e. seven trading days after the pay-out (CUSPA pledge) created in favor of the stock broker. You can view your demat account balances directly at the website of the Depositories after creating a login.
5. The stock broker is obligated to deposit all funds received from you with any of the Clearing Corporations duly allocated in your name. The stock broker is further mandated to return excess funds as per applicable norms to you at the time of quarterly/ monthly settlement. You can view the amounts allocated to you directly at the website of the Clearing Corporation(s).
6. You will get a contract note from the stock broker within 24 hours of the trade.
7. You may give a one-time Demat Debit and Pledge Instruction (DDPI) authority to your stock broker for limited access to your demat account, including transferring securities, which are sold in your account for pay-in.
8. The stock broker is expected to know your financial status and monitor your accounts accordingly. Do share all financial information (e.g. income, networth, etc.) with the stock broker as and when requested for. Kindly also keep your email ID and mobile phone details with the stock broker always updated.
9. In case of disputes with the stock broker, you can raise a grievance on the dedicated investor grievance ID of the stock broker. You can also approach the stock exchanges and/or SEBI directly.
10. Any assured/guaranteed/fixed returns schemes or any other schemes of similar nature are prohibited by law. You will not have any protection/recourse from SEBI/stock exchanges for participation in such schemes.

 F10

Client Signature

From,

To,
Zerodha Broking Ltd, 153/154
4th Cross 4th Phase,
JP Nagar Opp Clarence School,
Bangalore-560078

Subject: Declaration for Confirmation of Signature

Sir/Madam,

This letter is to confirm that all signatures placed on the account opening forms, and all such other documents towards Zerodha Broking Limited or any of its group entities, are done solely by me with complete knowledge of all such terms and clauses contained therein.

I/We, the undersigned, would like to request Zerodha Broking Limited or any of its group entities to accept the signed account opening forms and documents, even in case there may be slight variations on a few pages/areas of the document.

I/We, the undersigned, further would like to represent and warrant that in case of any misrepresentation with respect to the signatures placed on the account opening forms or all such documents towards Zerodha Broking Limited or any of its group entities by me/us, I/We will indemnify Zerodha Broking Limited and its directors/employees/agents for all such actions.

Yours faithfully,
Signature:

Name:

Annexure to Account opening Form for Individuals containing information for reporting requirement under Section 285BA of the Income-tax Act, 1961 and KYC.

Background:

1. India has joined the Multilateral Competent Authority Agreement (MCAA) on Automatic Exchange of Financial Account Information (AEOI) on June 3, 2015 and has agreed to certain global standards on automatic exchange of information, known as Common Reporting Standards (CRS). Further, the Government of India (GoI) signed an Inter-Governmental Agreement (IGA) with United States of America (USA) on July 9, 2015 to improve international tax compliance and to implement Foreign Account Tax Compliance Act (FATCA) in India.
2. To implement the CRS on AEOI and also the IGA with USA, the GoI has made necessary amendments in Section 285BA of the Income-tax Act, 1961 and notified Rules 114F to 114H in the Income-tax Rules, 1962 vide amendment dated August 7, 2015. These Rules are available on: <http://www.incometaxindia.gov.in>.
3. SEBI has issued a circular dated August 26, 2015 advising all registered intermediaries to implement FATCA and CRS as per above mentioned Rules.

We do understand that the information mentioned above is technical in nature and hence we advise you to consult your financial or tax advisor for more details.

Applicant's Name :				
Client Id / Form No :		Father's name :		
PAN :		Place of Birth(City) :		Country of Birth :
Gender : <input type="checkbox"/> M – Male <input type="checkbox"/> F – Female <input type="checkbox"/> O – Others		Nationality : <input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify the name of country) :		
Occupation Type:		<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others <input type="checkbox"/> Not Categorized		
Address Type : <input type="checkbox"/> Residential Or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified				
City/ Town :		State :		
Country :		Postal Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
1. Declaration of Tax Residency / Citizenship Country of tax residence India - Yes / No. 2. Tax resident of Multiple Countries – Yes / No If tax resident of multiple countries, kindly provide information of tax residence of all countries. If Point 1 is Yes and Point 2 is No, no further information required to be provided. If Point 1 is No OR if both Point 1 and 2 are Yes, then the following should be provided alongwith with documentary evidence:				
Country/countries of tax residency	Tax Identification Number (TIN)/ functional equivalent number	TIN / functional equivalent Issuing Country	Documents provided (copy of certificate of tax residence or copy of TIN or others)	Date upto which the documentary evidence is valid

Signature of the Applicant

Remarks if any :

Declaration and Undertakings

The Customer/account holder certifies 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 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) /Reserve Bank of India 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 responsibility / our responsibilities to educate myself / ourselves 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 Company on account of providing incorrect or incomplete information.

Date : _____

Place: _____

Signature of the Applicant

4. CONTACT DETAILS (All communications will be sent to Mobile number/ Email-ID provided) (Please refer instruction Cat the end)

Tel. (Off)

[illegible]

Tel. (Res)

[illegible]

Mobile

LIJ1111

Email ID

— J — F — f — J —

0 5. REMARKS (If any)

6 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. Incase 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 through SMS/Email on the above registered number/email address.

Date:

Place:

[illegible]

Signature/ Thumb Impression of Applicant

7. ATTESTATION/ FOR OFFICE USE ONLY

Documents Received

0 Certified Copies

0 Equivalent e-document

DE-KYC data received from UIDAI

D Data received from Offline verification

Digital KYC Process

KYC VERIFICATION CARRIED OUT BY

INSTITUTION DETAILS

Date _____

			-			-			1	
--	--	--	---	--	--	---	--	--	---	--

Emp. Name

Emp. Code

[illegible]

Emp. Designation

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	-----

Emp. Branch

zur

Name

[illegible]

Code

								f	r	T									
--	--	--	--	--	--	--	--	---	---	---	--	--	--	--	--	--	--	--	--

[illegible]