

KNOW YOUR CLIENT (KYC) Application Form - For Non Individual

DENTITY DETAILS Name of the Applicant Date of Commencement of business Date Da	□ NEW □ CHANGE REQUEST (Please tick ✓ the appropriate) Please fill this form in <i>ENGLISH</i> and in <i>BLOCK LETTERS</i> (Please tick ✓ the box on left margin of appropriate row where <i>CHANGE/CORRECT</i>	ON is required and provide the details in the correspo	anding row) Acknowledgement N
Name of the Applicant Date of commencement of business			Ackilowieugeillelit N
a Date of incorporation	Name of the Applicant		
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B. Registration No. (e.g. CIN)		Y	
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Prince Limited Co. Public List Co. Body Corporate Partnership Trust HEF Charities NOP Bank Government Body Non-Government Organization Defense Establishment HEF BOI Society LLP Others (Please speedly) Non-Government Organization Defense Establishment HEF Society LLP Others (Please speedly) Non-Government Organization Defense Establishment Non-Government Organization Pencode Non-Government Pencode Pe	4b. Registration No. (e.g. CIN)		
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Correspondence Address City Town / Wilage Pin Code Pin Code	· · · · · · · · · · · · · · · · · · ·	Uthers (Please specify)	
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City / Town / Vilage Pin Code Pin Code State Country Pin Code State Country Pin Code State Pin Code State Pin Code State Pin Code Promoters/Partners/Karta/Trustees and Whole time directors: If space is insufficient, enclose these details separately [illustrative format enclosed] Addhaar number of Promoters/Partners/Karta Pin Code	` 1		
State Country Country	. Registered Address (If different from above)		
State Country State Country			
State Country State Country	City / Town / Village		Pin Code
DTHER DETAILS Name, PAN, Residential Address and Phototgraphs of Promoters/Partners/Karta/Trustees and Whole time directors: DIN of whole time Directors: If space is insufficient, enclose these details separately [lilustrative format enclosed] ECLARATION We hereby declare that the details furnished above are true and correct to the best of mylour knowledge and belief all live undertake to inform you of any changes therein, immediately, in case any of the above information is found to e false or untrue or misleading or misrepresenting, I am we are aware that live may be held liable for it. Date: DD / MM / YYYYY Original Verified and Self Attested Documents Copies received In-Person Verification of Karta of HUF / Authorised Partners of Partnership Firm / Authorised persons of Association of Person Authorised Trustees of Unregistered Trust done. or Axis Bank Ltd . Designation : Designation :		Country	I III OOUG
We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we 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/ we are aware that I/we may be held liable for it. Date: D D / M M / Y Y Y Y Y Designatory (ies)			
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Original Verified and Self Attested Documents Copies received In-Person Verification of Karta of HUF / Authorised Partners of Partnership Firm / Authorised persons of Association of Person Authorised Trustees of Unregistered Trust done. or Axis Bank Ltd . uthorised Signatory ame : Designation :	We hereby declare that the details furnished above are true and correct to the be and I/we undertake to inform you of any changes therein, immediately. In case any per false or untrue or misleading or misrepresenting, I am/ we are aware that I/we	of the above information is found to may be held liable for it.	Signature of the Authorised Signatory (ies)
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Details of Promoters / Partners / Karta / Trustees and Whole Time Directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

1. Name		
	PHOTOGRAPH	
2. Relationship with Applicant (i.e. promoters, whole time directors etc.)		
3a. PAN 3b. DIN/ Aadhar No.	Divisor.	
4. Residential/ Registered Address	Please affix your recent passport	
4. Residential Registered Address	size photograph and	
	sign across it	
City / Town / Village Pin Code State Country		
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	PHOTOGRAPH	
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