# **CKYC & KRA KYC Form**



Know Your Client Application Form (Fo (Please fill the form in English ar Fields marked with '*' are mandate	id in BLOCK Letters)		Update k			N Exempt Investors (Refe	UTI Mutual Fund Haq, ek behtar zindagi ka.
1. Identity Details (Please r	efer instruction A at the er	nd)					
PAN		Please enclose First Name	a duly attest	ed copy of	your PAN C		Last Name
Name* (same as ID proof)							
Maiden Name (If any*)							
Father / Spouse Name*							
Mother Name*							
Date of Birth*	DD-MM-YY	YY					Photo
Gender*	☐ M- Male		☐ F- Fem	ale	☐ T-Tra	nsgender	
Marital Status*	☐ Married		☐ Unmar	ried	☐ Other	rs	
Citizenship*	☐ IN- Indian		☐ Others	<ul><li>Country</li></ul>		Country Co	ode 🔲
Residential Status*	☐ Resident Individual		☐ Non Re	sident India	an		
	☐ Foreign National		Person	of Indian O	rigin		
Occupation Type*	☐ S-Service ☐ Priva		☐ Public S		Gover	rnment Sector	
	☐ O-Others ☐ Profe ☐ B-Business	essional	☐ Self Em		□ Retire	d Housewife	Student Signature/ Thumb Impression
2 Proof of Identity (Pol)* (		r if DAN oard a				struction C 9 K at the and	
2. Proof of Identity (Pol)* (f	·				se reiei ilis	struction C & K at the end,	
☐ A- Passport Number		٦			Passpo	ort Expiry Date	D D - M M - Y Y Y
☐ B- Voter ID Card			7				
$\square$ D- Driving Licence					Driving	Licence Expiry Date	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
☐ E- Aadhaar Card							
$\square$ F- NREGA Job Card							
$\square$ Z- Others (any docume	nt notified by the centra	al government	)		lo lo	dentification Number	
3. Proof of Address (PoA)*							
3.1 Current / Permanent	/ Overseas Address Detai	ils (Please see	instruction D	at the end	)		
Address Line 1*							
Line 2			++++	+++			
Line 3				+++		City / Town / Villag	de*
District*	Zip	/ Post Code	,		St		as per Indian Motor Vehicle Act, 1988
State/UT*			Country*				intry Code as per ISO 3166
(Certified copy of any one	esidential / Business of the following Proof of		dential A] needs to i		usiness ed)	☐ Registered (	Office Unspecified
Proof of Address*  Passport Number					Passno	ort Expiry Date	
☐ Voter ID Card		+	٦		, acopt	ort Expiry Buto	<u> </u>
☐ Driving Licence			$\Box$		Driving	Licence Expiry Date	D D M M - Y Y Y
☐ Aadhaar Card		<del>                                      </del>			-		
☐ NREGA Job Card							
$\square$ Others (any document	notified by the central g	overnment)			lo	dentification Number	
3.2 Correspondence / Lo	cal Address Details* (Plea	ase see instruc	tion E at the	end)			
Same as Current / Perma	nent / Overseas Addres	s details (In ca	se of multiple co	orrespondence	e / local addre	esses, please fill 'Annexure A1', S	ubmit relevant documentary proof)
Line 1*							
Line 2							
Line 3			++++	+		City / Town / Villag	ge*
District*	_  Zip	o / Post Code*			Sta		as per Indian Motor Vehicle Act, 1988
State/IIT*			Country*				intry Code     as par ISO 2166

Version 1.6 Page

4. Contact Details (All		s will he se	nt on nr																							
	communication	3 WIII DC 3C	int on pro	ovided	Mobil	e no.	/ Em	ail-ID)	(Pleas	se ref	er ins	struc	tion	<b>F</b> at	the	enc	l)									
Email ID										П				$\Box$	Т	Т	Т	Τ	Т	Т	Т	Т		$\top$		П
Mobile			Tel. (O	ff)	$\overline{\Box}$		T	ΤŢ		$\overline{\Box}$	Te	 el. (R	es)	T	Ť	Ť	<u></u> [	Ť	Ť	Ė		亓	T	ī		
5. FATCA/CRS Inform	action (Tiple if Ar	unlicable)		_	oidono	o for T	Toy I	Durnor	oo in	luriod				ido	Indi	. /D		0.00	for	inet	ruot	ion	P of	tho	and)	
	, ,				sidenc				662 111	Julisu	ictioi	1(5)	Juis	iue	mui	ו א	lcas	C 1C	ICI	IIISU	iuci	1011	<b>D</b> at	uic	ilu)	
Additional Details Re Country of Jurisdiction			TI abov	e opti	011 (3)	15 110	Keu		ntry C	ode	of li	ıried	ictio	n o	f R	eid	enc		_	7		100		•		
Tax Identification Nu			Luad by	iuriec	liction	\*	무		y C		J. J.	11100	10110	U	$\neg$	Join	CIIO	_		a:	s pe	r ISO	316	ь		
Place / City of Birth*		1011 (11 13.	T T		Coun		f Dir	th*			+	$\pm$	廾	廾	러	$\neg$	C 0.1	ıntry	, С	odo	Г	$\neg$				
Address					Cour	itiy O	ГОП										COL	IIILI y	<i>,</i> C	oue	_	ш	as	per 18	O 316	16
Line 1*										П	$\top$			Т	T	Т			$\top$	$\top$	T	Т	Т	П		
Line 2										П												$\top$				
Line 3													Cit	y / -	Tow	n / '	Villa	age*	,			$\perp$	$\perp$			
District*			Zip / P	ost C	ode*						St	ate/	UT (	Cod	е			as p	oer I	India	n M	otor \	√ehir	cle Ac	1988	3
State/UT*						Cou	ntry*		П		Т		Т				Сс	unti	ry (	Cod	еГ	$\top$	as	per	SO 31	66
6. Details of Related I	Person (Ontions	I) (please i	rafar inet	ruction	n G at	tha ar	nd) (i	n caso	of add	itiona	l rola	tod n	orco	nc r	امام	o fill	l'An	novi	ıro l	R1′\			-			
_		on of Relat													/icas	C 1111		EXU	10	J1)		7	_			
Related Person Related Person Type*	_	ian of Mind			As:			JUIK	elated آ	Pers ☐Aut				-	ntativ	∟ /e					Ш					
related i cison rype	Prefix			Name		Jigi icc				Midd			Сргс	,301	itati					La	st N	lame				
Name*																						$\perp$	$\perp$			
Droof of Identity ID	`	mber and na							are op	tional)																
Proof of Identity [P	-	•			•	•		,																		
☐ A- Passport Numb		, , , , , , , , , , , , , , , , , , , ,		.,				•/		Pa	sspo	rt E	xpiry	/ Da	ate			D	D -	- N	1 IVI	1–[	Y	YY	Υ	
□ B- Voter ID Card		+++		П	П	1					•		. ,						_				_			
C- PAN Card		+++				J																				
☐ D- Driving Licence		+++	+++			П				Dri	vina	Lice	ence	Ex	pirv	Da	te	D	D -	- N	1 1/	1_E	V .	v	V	
☐ E- Aadhaar Card		+++		+		ш					9				)					-		7 L	-			
☐ F- NREGA Job Ca	rd																									
Z- Others (any doc	cument notified	by the ce	ntral go	vernm	nent)		П		П	П	] Ic	lenti	ficat	tion	Nu	mbe	er [	Т	Т	Т	Π	П	Т	$\Box$		П
7. Remarks (If any)									1 1	1 1	_		$\overline{}$	_	$\overline{}$		$\overline{}$	_	_				$\overline{}$			$\overline{\Box}$
7. Remarks (If any)			ПП	П						1 1					1							П			Т	
7. Remarks (If any)									+				$\pm$	+			$\pm$		+				$\pm$			
7. Remarks (If any)  8. Applicant Declarat	ion												_					<u> </u>					<u>+</u>		Ŧ	
8. Applicant Declarat  I hereby declare that the de	tails furnished above																									
8. Applicant Declarat	tails furnished above e any of the above in re that I am not mak	formation is fo ing this applic	und to be fation for the	alse or ι ie purpo	untrue or ose of co	mislead ontraver	ding o	r misrep of any A	resentin	g, I am	aware	that I	may l	be he	eld			[Si	gnat	ture /	Thur	mbIm	press	on]		
8. Applicant Declarat  I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla	tails furnished above e any of the above in re that I am not mak ns/directions issued b	formation is fo ing this applic y any governm	und to be fation for the nental or statistry through	alse or use purpositutory a h SMS/l	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me.	resentin ct, Rule	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld			[Si	gnat	ture /	Thur	nbIm	oress	ion]		
8. Applicant Declarat  I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  I hereby consent to receivin Date:	tails furnished above e any of the above in re that I am not makns/directions issued b g information from Ce	formation is fo ing this applic y any governm	und to be fation for the ental or sta	alse or use purpositutory a h SMS/l	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me.	resentin ct, Rule	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld		Si	_						ion]	ant	
8. Applicant Declarat  I hereby declare that the det therein, immediately. In cas liable for it. I hereby decla legislation or any notification  I hereby consent to receivin Date:  DDD—M  9. Attestation / For One	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fation for the nental or statistry through	alse or use purpositutory a h SMS/l	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me.	resentin ct, Rule	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld		Sig	_							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For Or Documents Recei	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me.	resentin ct, Rule	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld of	ion		gnatu							ant	
8. Applicant Declarat  • I hereby declare that the detherein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin  Date:  Date:  Documents Recei  KYC Ve	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me. gistered	resentin ct, Rule number/	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld	ion		gnatu							ant	
8. Applicant Declarat  1 hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  1 hereby consent to receivin Date:  9. Attestation / For Or Documents Recei	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep of any A me. gistered	resentin ct, Rule number/	g, I am s, Regu	aware ulation	that I s or a	may l	be he	eld of	ion I		gnatu							ant	
8. Applicant Declarat  • I hereby declare that the detherein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin  Date:  Date:  Documents Recei  KYC Very Date  Emp. Name	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	be he	eld of	ion		gnatu							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For Or  Documents Recei  KYC Ve  Date  Emp. Name  Emp. Code	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	resentin ct, Rule number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	be he	eld of	ion I		gnatu							ant	
8. Applicant Declarat  • I hereby declare that the detherein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin  Date:  Date:  Documents Recei  KYC Very Date  Emp. Name	tails furnished above e any of the above in re that I am not mak ns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	be he	eld of	ion		gnatu							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For Or  Documents Recei  KYC Ve  Date  Emp. Name  Emp. Code	tails furnished above e any of the above in re that I am not makns/directions issued b g information from Ce	formation is foing this applic y any governm ntral KYC Reg	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	Ins	eld of		Deta	ils							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For Or  Documents Recei  KYC Ve  Date  Emp. Name  Emp. Code	tails furnished above e any of the above in re that I am not makns/directions issued b g information from Ce	formation is foring this application in this application and the property of t	und to be fication for the nental or station stray istry through Place:	alse or use purpositutory a shiple sh	untrue or ose of co uthority f	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	Ins	eld of stitu!		Deta	ils							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For O'  Documents Recei  KYC Ve  Date  Emp. Name  Emp. Code  Emp. Designation	tails furnished above e any of the above in re that I am not makns/directions issued b g information from Ce	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	Institute	eld of stitu!	ution	<b>Deta</b>	ills							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For O'  Documents Recei  KYC Ve  Date  Emp. Name  Emp. Code  Emp. Designation	tails furnished above e any of the above in re that I am not mak ins/directions issued by g information from Ce M — Y Y Y Y MITTIE USE ONLY  Ved — Certified Certification Carriece D — M MITTIE D — M M M M M M M M M M M M M M M M M M	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	r misrep f any A me. gistered  Nam  Cod	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	Institute	stitul	ution	<b>Deta</b>	ills							ant	
8. Applicant Declarat  I hereby declare that the detherein, immediately. In cas liable for it. I hereby decla legislation or any notification  I hereby consent to receivin Date:  9. Attestation / For ODCUMENTS Receiving Date  Emp. Name  Emp. Name  Emp. Code  Emp. Designation	tails furnished above e any of the above in re that I am not make it is a more than I am not make it is a more than I am not make it is a more it is	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	r misreppor any American Nam Cod Emp	number/	g, I am s, Regu email a	aware ulation	that I s or a	may l	Institute	stitul	ution	<b>Deta</b>	ills							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For O'  Documents Recei  KYC Very Date  Emp. Name  Emp. Code  Emp. Designation	tails furnished above e any of the above in re that I am not make it is a more than I am not make it is a more than I am not make it is a more it is	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	n misrepof any Ame.  Nam Cod Emp Nam Cod	number/	g, I am	aware ulation	that I s or a	may l	Institute	stitul	ution	<b>Deta</b>	ills							ant	
8. Applicant Declarat  I hereby declare that the detherein, immediately. In cas liable for it. I hereby decla legislation or any notification  I hereby consent to receivin Date:  9. Attestation / For Or Documents ReceixYC Vertical Section (Consequence of the Consequence of the C	tails furnished above e any of the above in re that I am not make it is a more than I am not make it is a more than I am not make it is a more it is	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	n misrepof any Ame.  Nam Cod Emp Nam Cod	number/	g, I am	aware ulation	that I s or a	may l	Institute	stitul	ution	<b>Deta</b>	ills							ant	
8. Applicant Declarat  • I hereby declare that the de therein, immediately. In cas liable for it. I hereby decla legislation or any notification  • I hereby consent to receivin Date:  9. Attestation / For O'  Documents Recei  KYC Very Date  Emp. Name  Emp. Code  Emp. Designation  In-Person Very Date  Emp. Name  Emp. Code  Emp. Name  Emp. Code	tails furnished above e any of the above in re that I am not make it is a more than I am not m	formation is fo ining this applic y any governmentral KYC Reg	und to be fixed to be fixed to be fixed to be fixed to state to state the fixed to be	lalse or r lee purportion library large last control library last control l	Intrue or six of countries of c	mislead ontraver from tim	ding on tion of e to ti	n misrepof any Ame.  Nam Cod Emp Nam Cod	number/	g, I am	aware ulation	that I s or a	may l	Ins Ins	stitul	ution :	Stam	ills iils							ant	

Version 1.6 Page 2

#### Instructions/Guidelines for filling Individual KYC Application Form

#### General Instructions:

- 1. Self-Certification of documents is mandatory.
- 2. KYC number of applicant is mandatory for update/change of KYC details.
- 3. For particular section update, please tick ( ) in the box available before the section number and strike off the sections not required to be updated.
- 4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
- 5. If any proof of identity or address is in a foreign language, then translation into English is required.
- 6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- 8. Sole proprietor must make the application in his individual name & capacity.
- 9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- 10. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- A. Clarification / Guidelines on filling 'Identity Details' section
  - 1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
  - 2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory

#### B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

- 1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)
- C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Inve

stors

- 1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2. Mention identification / reference number if 'Z Others (any document notified by the central government)' is ticked.
- Others Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- 4. Letter issued by a gazetted officer, with a duly attested photograph of the person.

#### D. Clarification / Guidelines on filling 'Proof of Address [PoA] section

- 1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- **E.** Clarification / Guidelines on filling 'Proof of Address [PoA]
- Correspondence / Local Address details' section
- 1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.

  2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- F. Clarification / Guidelines on filling 'Contact details' section
  - 1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
  - 2. Do not add '0' in the beginning of Mobile number.
- G. Clarification / Guidelines on filling 'Related Person details' section
  - 1. Provide KYC number of related person if available.
- H. Clarification / Guidelines on filling 'Related Person details Proof of Identity [Pol] of Related Person' section
  - 1. Mention identification / reference number if 'Z Others (any document notified by the central government)' is ticked.

### I. List of people authorized to attest the documents after verification with the originals:

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- 5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
- 6. Government authorised officials who are empowered to issue Apostille Certificates.

#### J. List of people authorized to perform In Person Verification (IPV):

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
- 5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

#### K. PAN Exempt Investor Category

- 1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
- 2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
- 3. Investors residing in the state of Sikkim.
- 4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in

## List of Two-Digit state / U.T Codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP
Andhra Pradesh	AP	Jammu & Kashmir	JK
Arunachal Pradesh	AR	Jharkhand	JH
Assam	AS	Karnataka	KA
Bihar	BR	Kerala	KL
Chandigarh	CH	Lakshadweep	LD
Chattisgarh	CG	Madhya Pradesh	MP
Dadra and Nagar Haveli	DN	Maharashtra	MH
Daman & Diu	DD	Manipur	MN
Delhi	DL	Meghalaya	ML
Goa	GA	Mizoram	MZ
Gujarat	GJ	Nagaland	NL
Haryana	HR	Orissa	OR

State / U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarakhand	UA
WestBengal	WB
Other	XX

## List of ISO 3166 Two-Digit Country Code

	Country		Country		Country		Country
Country	Code	Country	Code	Country	Code	Country	Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	10	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		