

CHECK LIST FOR FILLING RE-KYC FORM

1. All mandatory fields should be compulsorily filled.
2. Self attested PAN Card copy is mandatory for CKYC/ KRA
3. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
4. **Mother's name should be mentioned mandatory for Individual**
5. **Copy of PAN card, Aadhar & Address Proof should be self attested & OSV done (by HSL or Bank RM) with name, signature, emp. Code & designation**
6. **Pt 9 "ATTESTATION / FOR OFFICE USE ONLY" to be filled and signed by HSL or Bank RM**
7. Signature on PAN and document should be same.
8. Corrections if any should be authenticated by the customer
9. **HUF accept only Non-Individual forms with Copy of PAN card & Address Proof (HUF & Karta) should be self attested & OSV done (by HSL or Bank RM) with name, signature, emp. Code & designation**
10. HUF stamp with Karta's signature including Photo with Signature across on 1st page is mandatory
11. HUF Address Proof (Bank Statement only) is mandatory.
12. Name of HUF should be same on PAN, Stamp and AOF
13. HUF Coparceners Details to be filled on 2nd page (i.e. Name, Relation with Applicant, PAN, Residential / Registered Address, DIN/UID, Photograph) is mandatory.
14. Aadhaar Consent declaration is required if Adhar card is provided as an address proof.

Name & Signature of Authorised
Signatory

(HSL or Bank RM)

Application Number

KNOW YOUR CLIENT (KYC) APPLICATION FORM (FOR NON-INDIVIDUALS)

HDFC Bank Ltd. Depository Services, Titanic Building, 3rd Floor, 26 A Narayan Properties, Chandivali Farm Road,
Opp. Sakinagar Road, Chandivali, Andheri(E), Mumbai-400 072.

Registered Office: HDFC Bank House, Senapati Bapat Marg, Lower Parel, Mumbai 400 013.



We understand your world

A. Identity Details

Name of the Applicant:

Date of Incorporation:

Place of Incorporation:

PAN:

Registration No. e.g (CIN)

Occupation:
please tick any one

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**.

D	D	M	M	Y	Y	Y	Y	Date of Commencement of Business:					D	D	M	M	Y	Y	Y	Y

Any other information: _____

(Signature across
the Photograph)

Please affix your
recent passport size
Photograph

Private Limited Co.		Bank		Partnership		Public Ltd. Co.		Government Body		FI		FII	
Body Corporate		Non Government Organization		Trust		Defense Establishment		HUF		Charities			
Society		AOP		NGO's		LLP		BOI		Others (Please Specify)	_____		

B. Address Details

Address for Correspondence

Landmark (if any)

City/Town/Village

State

Country

Contact Details

Mobile No. :

Email ID:

Tel. Office:

Tel. Resi:

Fax. No.:

Pin Code (Mandatory)

Specify the proof of address submitted for correspondence address: _____

Registered Address (If different from above)

Landmark (if any)

City/Town/Village

State

Country

Pin Code (Mandatory)

Specify the proof of address submitted for registered address: _____

C. Other Details

Gross Annual Income Details:
(Income Range per annum)

Rs. <100,000

Rs. 100,000 - 500,000

Rs. 500,000 - 10,00,000

Rs. 10,00,000 - 25,00,000

Rs. 25,00,000 - 100,00,000

Rs. > 100,00,000

or Net Worth as on date: DD / MM / YY (₹ _____)
(Net worth should not be older than 1 year) (Amount)

Please tick, if applicable, for any of your authorized signatories/Promoters/Partners/Karta/Trustees/whole time directors:

Politically Exposed Person (PEP)

Related to a Politically Exposed Person (PEP)

Declaration

I/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.

Name & Signature of the
Authorised Signatory(ies)

Date:

D D M M Y Y Y Y

FOR OFFICE USE ONLY

☐ (Originals Verified) True Copies of documents received☐ (Self-Attested) Self Certified Document copies received

Signature of the Authorised Signatory

Date:

D D M M Y Y Y Y

Seal/Stamp of the intermediary

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC)
Application Form for Non-Individuals

Sr. No.	Name	Relation with Applicant	PAN	Residential / Registered Address	DIN/UID	Photograph

Name & Signature of the
Authorized Signatory(ies)

Date: DDMMYYYY

Extended Annexure - CKYC For Non-Individual Entities

{All fields are Mandatory}

Date: DD / MM / YYYY

AOF/UDN Number

Name of the entity:

[illegible]

Customer ID

(Applicable for existing Customer)

[illegible]

Document submitted for Identity of Entity (Please tick and mention document number):

☐ Certificate of Incorporation

[illegible]

Registration Certificate

[illegible]☐ Partnership Deed

☐ Resolution of Board / Managing Committee

☐ **Trust Deed**

Activity Proof 1 (For Sole Proprietorship)

☐ Memorandum & Article of Association

Activity Proof 2 (For Sole Proprietorship)

Document submitted for Mailing Address (Please tick and mention document number):

☐ Certificate of Incorporation

[illegible]☐ **Registration Certificate**[illegible]☐ Any other document

(Please specify) _____

Beneficial Owner details {All fields are mandatory}

1	Name of Beneficial Owner	1)	2)
2	Current Address		
	Address - City		
	Address – State		
	Address - Country		
	Address - Pin Code		
3	Pan card Number		
4	Maiden Name (if any)		
5	Mothers Name		
6	Date of Birth		
7	Gender		
8	Nationality		
9	Mobile Number		
10	Email id		

Authorised Signatories Details {All fields are Mandatory}

1	Name of Authorised Signatories	1) _____	2) _____
2	Father's Name		
3	Pan Card Number		
4	Proof of Identity (Tick any one and mention the details)	<input type="checkbox"/> Passport No. <input type="checkbox"/> Voter ID No. <input type="checkbox"/> Driving License No. <input type="checkbox"/> Aadhaar No. <input type="checkbox"/> NREGA Job Card No. <input type="checkbox"/> Letter from National Population register Mention ID No. _____	<input type="checkbox"/> Passport No. <input type="checkbox"/> Voter ID No. <input type="checkbox"/> Driving License No. <input type="checkbox"/> Aadhaar No. <input type="checkbox"/> NREGA Job Card No. <input type="checkbox"/> Letter from National Population register Mention ID No. _____
5	Proof of Address (Tick any one and mention the details)	<input type="checkbox"/> Passport No. <input type="checkbox"/> Voter ID No. <input type="checkbox"/> Driving License No. <input type="checkbox"/> Aadhaar No. <input type="checkbox"/> NREGA Job Card No. <input type="checkbox"/> Letter from National Population register Mention ID No. _____	<input type="checkbox"/> Passport No. <input type="checkbox"/> Voter ID No. <input type="checkbox"/> Driving License No. <input type="checkbox"/> Aadhaar No. <input type="checkbox"/> NREGA Job Card No. <input type="checkbox"/> Letter from National Population register Mention ID No. _____
6	Current Address		
	Address - City		
	Address - State		
	Address - Country		
	Address - Pin Code		
7	Maiden Name (if any)		
8	Mothers Name		
9	Date of Birth		
10	Gender		
11	Nationality		
12	Mobile Number		
13	Email id		
14	Signature:	<div style="border: 1px solid black; height: 60px; width: 100%;"></div> Name : _____	<div style="border: 1px solid black; height: 60px; width: 100%;"></div> Name : _____

Note: 1. Additional annexure to be provided if more than Two Authorised Signatories / BOs
2. Pan card is mandatory for all AUS/BOs (Form 60 can be accepted for Foreign National/NR)

