## 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
- 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
- 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
- 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)

## KNOW YOUR CLIENT (KYC) APPLICATION FORM





(FOR NON-INDIVIDUALS)

HDFC Bank Ltf : Depository Services, Titanic Building, 3rd Floor, 26 A Nareyan Properties, Chandirali Farm Road, Opp. Sakwither Road, Chandirali, Andher(E), Mumbai-400 072.

Registeral Office: HDFC Bank House, Senapati Bapat Marg, Lower Panel, Mumbai 400 013.

A. Identity Details	Please fi	II this	s form	in E	NGL	ISH a	and in	BLOC	K LE	TERS.													
Name of the Applicant:		H	1	I	F		Н		ļ			F				4	1	Ŧ				(Sign)	ature across Photograph)
Date of Incorporation:	D D	M	M = 3	C y	SY	Y	Date	of Co	mmen	cement	of Bu	siness:	D.	D	M	101	Y.	Y Y	y.	i i	Please	Management	
Place of Incorporation:			T	Ť	t				Ar	y othe	er in fo	ormati	on:							rec	ent pa	ssport ograph	size
PAN:				T	T	T				, , , , , ,													
Registration No. e.g (CIN)				T	T					П					П		T						
Occupation: please tick any one	Private L	imite	d Co.		i	Bank	c .	P	artne	rship		Public	Ltd.	Co.			Gov	ernm	ent Bo	dy	FI		FII
product state only serv	Body Co	rpora	ite		Non	Gov	ernme	ent Or	ganiza	tion		Trust		De	efens	e Es	tablis	hmen	t	HUF		Cha	rities
	Society		AO	Р		NO	GO's		LLP		во	1		Other	S (Ple	ase S	Specify	0	Total Control of		dr-mi		N-mark.
B. Address Details																							- 18
Add ress for Correspord ence Landmark (if any)				1	Ŧ				1	H			H								Н	1	
City/Town/Village		H	H	Ť	Ť	t	+	H	+	Н		+	t	H	H	П	T	+	+		$\forall$	$\top$	
State		Ħ	T	+	Ť				1		4		T					+	+			1	
Country			$\vdash$	1	Ť	Ť		H	$\uparrow$	T				H	П			in Code	e (Manda	atory)			
Contact Details	Tel. Office		Ħ	1	Ť	Ť	$\top$	H	$\dagger$	т			Tel	Resi						-	П		
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Email ID:				1	Ť	Ť						Т	Т	Т				$\overline{}$			$\Box$		
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Specify the proof of address submitte	ou for con	espo	muene	e au	uics	٥											, and the same						
Registered Add ress (If different from a Landmark (if any)	above)				+									H				+					
City/Town/Village														П								11	
State					T			П															
Country					T	T								Г			i	Pin Code	e (Manda	atory)			
Specify the proof of address submitte C. Other Details	ed for regi	stere	d add	ress:	-						- 61						1		-01				_
Gross Annual Income Details: (Income Range per annum)		R	s.<1	00,00	00		R	s. 100	0,000	- 500,0	000		Rs.	500,	,000	- 10,	,00,0	00	R	s. 10,0	0,000	- 25,00	0,000
faccine range for marting		R	s. 25,	00,0	00 -	100,	00,00	0		Rs >	100,	00,00	0					on da	ite:		/YY (3		mount)
Please tick, if applicable, for any of	your aut	horize	ed sign	nator	ies/P	romo	oters/F	artne	rs/Kai	rta/Trus	stees/	whole	time										
		P	olitica	lly Ex	xpose	ed Pe	erson (	(PEP)		1	Relate	d to a	Politi	ically	Ехро	sed	Pers	on (PE	P)				
Declaration																							
I/We hereby declare that the details	s furnishe	ed ab	ove a	re tri	ue ai	nd c	orrect	to the	e bes	t of my	//our	knowle	edge	and	belie	f and	d I/w	e unde	ertake t	to inform	n you c	of any o	hanges
therein, immediately. In case any of the	ne above ir	nform	ation i	s fou	ind to	be fa	alse or	unt ru	ue or n	nislead	ing or	misre	prese	nting.	, I am	/we	are a	ware t	hat I/w	e may b	e held	liable f	or it.
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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

Sr. No.	Name	Relation with Applicant	PAN	Residential / Registered Address	DIN/UID	Photograph
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			2			
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## Extended Annexure - CKYC For Non-Individual Entities {All fields are Mandatory} Date: DD/MM/YYYY AOF/UDN Number Name of the entity: Customer ID (Applicable for existing Customer) Document submitted for Identity of Entity (Please tick and mention document number): Certificate of Incorporation Registration Certificate 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 Registration Certificate Any other document (Please specify) \_ Beneficial Owner details {All fields are mandatory} Name of Beneficial Owner 2 Current Address Address - City Address - State Address - Country Address - Pin Code Pan card Number 3 Maiden Name (if any) 4 Mothers Name 5 Date of Birth 6 Gender Nationality 8 Mobile Number 9 Email id 10





Authorised Signatories Details {All fields are Mandatory}

_		8					
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)	☐ Passport No. ☐ Voter ID No ☐ Driving License No. ☐ Aadhaar No. ☐ NREGA Job Card No. ☐ Letter from National Population register  Mention ID No	☐ Passport No. ☐ Voter ID No. ☐ Driving License No.☐ Aadhaar No.☐ NREGA Job Card No.☐ Letter from National Population register  Mention ID No.				
5	Proof of Address (Tick any one and mention the details)	☐ Passport No. ☐ Voter ID No. ☐ Driving License No. ☐ Aadhaar No. ☐ NREGA Job Card No. ☐ Letter from National Population register  Mention ID No. ☐	☐ Passport No. ☐ Voter ID No. ☐ Driving License No. ☐ Aadhaar No. ☐ NREGA Job Card No. ☐ Letter from National Population register  Mention ID No.				
6	Current Address						
5 <u>6</u> - 6	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:	Name :	Name :				
		The second secon					

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)

#### APPLICATION FOR ACCOUNT OPENING/ MODIFICATION USING AADHAAR / E-KYC FOR CUSTOMERS NOT OPTING FOR DBT

10, (1) The Branch Mana HDEC Bank Limited ("E	ger, ank" which term shall include its suc	branch.	
			HSL" which term shall include its successors
UDN NO		Date	//
DP ID	DP Account		HSL Trading A/c

and

## Subject: A)Aadhaar - informed consent

- I voluntarily opt for Aadhaar OVD KYC or e-KYC or offline verification, and submit to the Bank/HSL my Aadhaar number, Virtual ID, e-Aadhaar, XML, Masked Aadhaar, Aadhaar details, demographic information, identity information, Aadhaar registered mobile number, face authentication details and/or biometric information (collectively, "Information").
- 2. I am informed by the Bank/HSL, that:
  - submission of Aadhaar is not mandatory, and there are alternative options for KYC and establishing identity including by way of physical KYC with officially valid documents other than Aadhaar. All options were given to me.
  - (ii) For e-KYC/authentication/offline verification, Bank/HSL will share Aadhaar number and/or biometrics with CIDR/UIDAI, and CIDR/UIDAI will share with Bank/HSL, authentication data, Aadhaar data, demographic details, registered mobile number, identity information, which shall be used for the informed purposes mentioned in 3 below.
- 3. I authorise and give my consent to the Bank/HSL (and its service providers), for following informed purposes:
  - (i) KYC and periodic KYC process as per the PML Act, 2002 and rules thereunder and RBI guidelines, or for establishing my identity, carrying out my identification, offline verification or e-KYC or Yes/No authentication, demographic or other authentication/verification/identification as may be permitted as per applicable law, for all accounts, facilities, services and relationships of/through the Bank/HSL, existing and future.
  - (ii) collecting, sharing, storing, preserving Information, maintaining records and using the Information and authentication/verification/identification records: (a) for the informed purposes above, (b) as well as for regulatory and legal reporting and filings and/or (c) where required under applicable law;
  - (iii) enabling my account for Aadhaar enabled Payment Services (AEPS);
  - (iv) producing records and logs of the consent, Information or of authentication, identification, verification etc. for evidentiary purposes including before a court of law, any authority or in arbitration.
- 4. I understand that the Aadhaar number and core biometrics will not be stored/ shared except as per law and for CIDR submission. I have downloaded the e-Aadhaar myself using the OTP received on my Aadhaar registered mobile number. I will not hold the Bank/HSL or its officials responsible in the event this document is not found to be in order or in case of any incorrect information provided by me.
- 5. The above consent and purpose of collecting Information has been explained to me in my local language.

## B)Consent for Aadhaar details, email id & mobile number validation by KYC Registration Authority (KRA)

- I/We hereby provide my/our explicit consent that my/our Aadhaar record can be used by KRAfor the specific purpose of validating / maintaining / sharing my KYC record as an audit evidence. I/We understand that I/wewill have an option to request KRA for deletion of my/our Aadhaar record.
- I/We hereby consent for receiving information from KRA through sms/e-mail on my/our registered mobile number/e-mail 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 for sharing my/our masked Aadhaar card 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 have a business relationship for KYC purposes only.
- 4. I am / We are aware that if the QR code is not readable, then the KYC shall be placed on "Hold" by KRA. Also I/we understand that as per SEBI circular dated April 06, 2022, clients whose KYC records are not found to be valid by KRA after the validation process shall be allowed to transact in securities market only after their KYC is validated

Name of Client	Aadhaar No (Last Four Digits only)							ır C	Digi	ts	on	ly)	Signature	
	*			•	*	•	•	*	•					