

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)

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

DP ID _____ Client ID _____ Bank Cust ID _____ Trading A/c No _____

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

Application Type* New Update

KYC Number _____ (Mandatory for KYC update request)

Account Type* Normal Simplified (for low risk customers) Small

1. PERSONAL DETAILS (Please refer instruction A at the end)

Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maiden Name (If any*)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father / Spouse Name*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother Name*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Birth*	DD - MM - YYYY		
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others
Citizenship*	<input type="checkbox"/> IN- Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="checkbox"/> <input type="checkbox"/>)	
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Person of Indian Origin
Occupation Type*	<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Sector)
	<input type="checkbox"/> O-Others (<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student)
	<input type="checkbox"/> B-Business		
	<input type="checkbox"/> X- Not Categorised		

PHOTO

Signature / Thumb Impression

2. TICK IF APPLICABLE RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end)

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (If issued by jurisdiction)* _____

Place / City of Birth* _____ ISO 3166 Country Code of Birth*

3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

<input type="checkbox"/> A- Passport Number	<input type="checkbox"/>	Passport Expiry Date	DD - MM - YYYY
<input type="checkbox"/> B- Voter ID Card	<input type="checkbox"/>		
<input type="checkbox"/> C- PAN Card	<input type="checkbox"/>		
<input type="checkbox"/> D- Driving Licence	<input type="checkbox"/>	Driving Licence Expiry Date	DD - MM - YYYY
<input type="checkbox"/> E- UID (Aadhaar)	<input type="checkbox"/>		
<input type="checkbox"/> F- NREGA Job Card	<input type="checkbox"/>		
<input type="checkbox"/> Z- Others (any document notified by the central government)	<input type="checkbox"/>	Identification Number	<input type="checkbox"/>
<input type="checkbox"/> S- Simplified Measures Account - Document Type code	<input type="checkbox"/>	Identification Number	<input type="checkbox"/>

4. PROOF OF ADDRESS (PoA)*

4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)	<input type="checkbox"/> Others _____ please specify	
	<input type="checkbox"/> Voter Identity Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/>		
	<input type="checkbox"/> Simplified Measures Account - Document Type code	<input type="checkbox"/>			

Address

Line 1* _____

Line 2 _____

Line 3 _____

District* _____ Pin / Post Code* _____ State / U.T Code* _____ ISO 3166 Country Code* _____

City / Town / Village* _____

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

To,

(1) The Branch Manager, _____ branch.
HDFC Bank Limited (“Bank” which term shall include its successors and assigns)

(2) The Branch Manager, _____ branch.
HDFC Securities Limited (“HSL” which term shall include its successors and assigns)

UDN NO																				Date	__ / __ / ____			
DP ID										DP Account										HSL Trading A/c				

Subject: 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”).
- 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.
 - 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.
- I authorise and give my consent to the Bank/HSL (and its service providers), for following informed purposes:
 - 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.
 - 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;
 - enabling my account for Aadhaar enabled Payment Services (AEPS);
 - 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.
- 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.
- The above consent and purpose of collecting Information has been explained to me in my local language.

Name of Client	Aadhaar No (Last Four Digits only)	Signature
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