

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.

For office use only

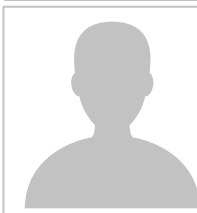
(To be filled by financial institution)

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="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name (If any*)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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="text"/>)		
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian		
	<input type="checkbox"/> Foreign National	<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 Categorized			

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

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

Address

Line 1*
 Line 2
 Line 3 City / Town / Village*
 District* Pin / Post Code* State / U.T Code* ISO 3166 Country Code*

4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS * (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City / Town / Village*

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

4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details Same as Correspondence / Local Address details

Line 1*

Line 2

Line 3 City / Town / Village*

State* ZIP / Post Code* ISO 3166 Country Code*

5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

Tel. (Off) - Tel. (Res) - Mobile -

FAX - Email ID

6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

Addition of Related Person Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* Guardian of Minor Assignee Authorized Representative

Name* Prefix First Name Middle Name Last Name

(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON* (Please see instruction (H) at the end)

A- Passport Number Passport Expiry Date --

B- Voter ID Card

C- PAN Card

D- Driving Licence Driving Licence Expiry Date --

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

S- Simplified Measures Account - Document Type code Identification Number

7. REMARKS (If any)

8. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I 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 aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.



[Signature / Thumb Impression]

Date : -- Place :

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies IPV Done

KYC / IN-PERSON VERIFICATION CARRIED OUT BY

Date --

Emp. Name

Emp. Code

Emp. Designation

Emp. Branch

INSTITUTION DETAILS

Name **FINVASIA SECURITIES PVT. LTD.**

Code

[Employee Signature]

[Institution Stamp]

TRADING ACCOUNT RELATED DETAILS

(For Individuals)

A. BANK ACCOUNT(S) DETAILS

Bank Name	Branch Address	Bank Account Number	Account Type	MICR Number	IFSC Code
			<input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> Others - in case of NRI / NRE / NRO		

B. DEPOSITORY ACCOUNT(S) DETAILS

Depository Participant Name	Name of Depository	Beneficiary Name	DP ID	Beneficiary ID (BO ID)
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			
	<input type="checkbox"/> NSDL <input type="checkbox"/> CDSL			

C. TRADING PREFERENCES

Please sign in the relevant boxes where you wish to trade. The segment not chosen should be struck off by the client.

Stock Exchange	Market Segment/s			
<input type="checkbox"/> NSE	<input type="checkbox"/> Cash	<input type="checkbox"/> F&O	<input type="checkbox"/> CDS	
<input type="checkbox"/> BSE	<input type="checkbox"/> Cash	<input type="checkbox"/> F&O	<input type="checkbox"/> CDS	

If, in future, the client wants to trade on any new segment/new exchange, separate authorization/letter should be taken from the client by the stock broker.

D. FINANCIAL & OCCUPATION DETAILS

- Gross Annual Income Details** : Income Range per annum :
 Below Rs. 1 Lac Rs. 1 Lac to 5 Lac
 Rs. 5 Lac to 10 Lac Rs. 10 Lac to 25 Lac Rs. 25 Lac to 1 Crore >1 Crore

Net Worth (Net worth should not be older than 1 year) Amount Rs.....
 as on (date) (Compulsory for Non-Individuals)

- Occupation** :
 Private Sector Public Sector Government Service Business Professional
 Agriculturist Retired Housewife Student Others _____ Please Specify
- Please tick, if applicable :** Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)
- Any other information** :

E PAST ACTIONS

Details of any action/proceedings initiated/pending/ taken by SEBI/ Stock exchange/any other authority against the applicant/constituent or its Partners/promoters/whole time directors/authorized persons in charge of dealing in securities during the last 3 years :

F. DEALINGS THROUGH SUB-BROKES AND OTHER STOCK BROKERS

If client is dealing through the sub-broker, provide the following details:

Sub-broker's Name							
SEBI Registration number							
Registered office address							
Ph.		Fax		Website			
Whether dealing with any other stock broker/sub-broker (if case dealing with multiple stock brokers/sub-brokers, provide details of all)							
Name of stock broker							
Name of Sub-Broker, if any							
Client Code				Exchange			
Details of disputes/dues pending from/to such stock broker/sub-broker							

G. ADDITIONAL DETAILS

Whether you wish to receive physical contract note or Electronic Contract Note (ECN) (please specify)	<input type="checkbox"/> Physical Contact Notes	<input type="checkbox"/> Electronic Contract Note
Specify your Email id, if applicable		
Whether you wish to avail of the facility of internet trading/ wireless technology (please specify)		
Number of years of Investment/Trading Experience		

H. INTRODUCER DETAILS (optional)

Name of the introducer			
Status of the Introducer	<input type="checkbox"/> Sub Broker <input type="checkbox"/> Remisier <input type="checkbox"/> Auth. Person <input type="checkbox"/> Existing Client <input type="checkbox"/> Others_____		
Address and Phone No. of the Introducer			
Sign. of the Introducer			

I. NOMINATION DETAILS (for individuals only)

<input type="checkbox"/> I/We wish to nominate		<input type="checkbox"/> I/We do not wish to nominate	
Name of the Nominee			
Relationship with the Nominee			
PAN of Nominee			Date of Birth of Nominee
Aadhaar of Nominee			
Address and Ph. No. of the Nominee			
If Nominee is a minor, details of guardian :			
Name of the Guardian			
Address and Ph. No. of Guardian			
Sign. of Guardian			

WITNESSES (Only applicable in case the account holder has made nomination)

Name		Name	
Signature		Signature	
Address		Address	

DECLARATION

1. 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.
2. I/We confirm having read/been explained and understood the contents of the document on policy and procedures of the stock broker and the tariff sheet.
3. I/We further confirm having read and understood the contents of the 'Rights and Obligations' document(s) and 'Risk Disclosure Document'. I/We do hereby agree to be bound by such provisions as outlined in these documents. I/We have also been informed that the standard set of documents has been displayed for Information on stock broker's designated website, if any.

Place _____

Date

D	D	-	M	M	-	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

_____
Signature of Client / All Authorized Signatory (ies)**FOR OFFICE USE ONLY**

UCC Code allotted to the Client : _____

	Document verified with Originals	Client Interviewed By	In-Person Verification Done by
Name of the Employee			
Employee Code			
Designation of the Employee			
Date			
Signature			

I / We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on my/our website, if any, for the information of the clients.

For **FINVASIA SECURITIES PVT. LTD.**_____
Signature of the Authorised Signatory

Date _____

Seal / Stamp of the Stock Broker

TARIFF CHARGES

ZERO BROKERAGE CHARGES

1. All Charges (namely : Exchnage Transaction Charges ,Clearing Member Charges ,SEBI Fee etc.) and Statutory Taxes (GST & Stamp Duty etc.) Shall be charged as per rates applicable from time to time In addition to brokerage.
2. Charges mentioned above are in respect of services mentioned above only and charges for any service provided to client other than those listed above shall be charged extra.
3. Late payment penalty @2% p.m. calculated on daily overdue balance shall be charges till actual relaisation.
4. There shall be Software charges as per the Client selection :-
 - a. SCALPERT : ZERO CHARGES
 - b. NEST TRADER: NSE - INR 49/- , BSE - INR 49/- (Per Exchange)
 - c. NOW Software : NSE - INR 150/- , BSE - INR 150/- (Per Segments)

3

(Client Signature)

INTIMATION BY THE MEMBER FOR PROPRIETARY TRADING

Dear Constituent

Under instruction of SEBI, The National Stock Exchange of India Ltd.(NSE) /Bombay Stock Exchange Ltd(BSE) has directed all its member to inform their clients whether they engage in proprietary trading in this regard we wish to inform you that we do engage in proprietary trading in the Cash, FO and Currency Derivative segment of NSE/BSE .

Thanking You

For **Finvasia Securities Pvt Ltd.**

Authorized Signatory

I Have read the above letter:

4

(Client Signature)

STANDING INSTRUCTIONS / AUTHORIZATION LETTER

To,

Finvasia Securities Pvt. Ltd.

Plot No. 10, Netsmartz House (Level 3),
Rajiv Gandhi Chd Tech Park, Chandigarh-160101 (India)

Date : _____

Place : _____

Sub : Standing Instructions / Authorization Letter

I/We have been / shall be dealing through you as my broker on the Capital Market and/or Futures & Options Segments / Currency Derivatives Segments. As my broker i.e. agent I/we direct and authorize you to carry out trading / dealings on my/our behalf as per instructions given below.

Since you are issuing contract notes bearing order numbers and trade numbers on a daily basis, please do not issue the order/trade confirmation slips as generated from the Trading Terminal.

You have discounted to me/us that you undertake proprietary trading.

(The client hereby authorized Finvasia Securities Pvt. Ltd. to maintain records/books of accounts for the client collectively for different exchange / segments of the exchanges and also retention of an amount upto Rs. 10,000/- at the time of settling client account or any other services which the client may be availing)

Thanking you

Yours faithfully

5

(Client Signature)

VERBAL ORDER ACCEPTANCE AUTHORIZATION

To,

Finvasia Securities Pvt. Ltd.

Plot No. 10, Netsmartz House (Level 3),
Rajiv Gandhi Chd Tech Park, Chandigarh-160101 (India)

Date : _____

Place : _____

Sub : Verbal Order Acceptance Authorization

I/We have been / shall be dealing through as my / our broker on the Capital Market, Mutual Fund and/or Futures & Options Segments / Currency Derivative Segment. As my/our broker i.e. agent I/we direct and authorize you to carry out trading / dealings on my/our behalf as per instructions given below.

I/We agree and acknowledge the it is advised and preferred you that I/We given instructions for order placement/modification and cancelation in writing and to avoid disputes, I/we must given instructions in exactly the format given below in duplicate (carbon copy/ photocopy) and take signatures of your duly authorized officers at the branch along with your company stamp on the carbon/photocopy of the instructions in acknowledgement of receipt of my/our instructions. However as I/we shall be dealing by ordering over phone and even if I/we visit the branch, the fluctuations in market are so rapid that it is not practical to give written instructions for order placement/modification and cancellation. I/We hereby authorize you to accept my / my authorized representative's verbal instructions for order placement/ modification and cancellation in person or over phone (fixed line or mobile phone) and execute the same. I/we understand the risk associated with verbal orders and accept the same, and agree that I/we shall not be entitled to disown orders and consequent trades (if any) under the plea that same were not undermine/our instructions. I/We agree that I/We will not have the right to shift the burden of proof by asking you to prove the placement of orders through telephone recording or otherwise. I/We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my/our directions given above.

Thanking you

Yours faithfully

6

(Client Signature)

RUNNING ACCOUNT AUTHORISATION

To,

Date : _____

Finvasia Securities Pvt. Ltd.

Plot No. 10, Netsmartz House (Level 3),
Rajiv Gandhi Chd Tech Park, Chandigarh-160101 (India)

Sub : Running Account Authorisation

I/We are dealing through you as a client in Capital Market and/or Future & Option segment and/or Interest Rate Future segment in order to facilitate ease of operations and upfront requirement of margin for trade. I/We authorize you as under :

1. I/We request you to maintain running balance in my account & retain the credit balance in any of my/our account and to use the unused funds towards my/our margin/pay-in/other future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing corporation unless I/We instruct you otherwise.
2. I/We request you to retain securities with you for my/our margin/pay-in/other-future obligation(s) at any segment(s) of any or all the Exchange(s)/Clearing Corporation unless I/We instruct you to transfer the same to my/our account.
3. I/We request you to settle my fund and securities account except the funds given towards collaterals/margin in form of Bank Guarantee and/or Fixed Deposit Receipt atleast
 - Once in every calander quarter or
 - Once in a calander month.
4. In case I/We have an outstanding obligation on the settlement date, you may retain the requisite securities/funds towards such obligations and may also retain the funds expected to be required to meet future margin /settlement obligations computed in the manner as prescribed by SEBI/Exchange from time to time.
5. I/We further authorise you to retain such minimum value of funds/securities at the time of settlement of a/c's as may be allowed by the exchange(s)/SEBI from time to time.

The running account authorisation provided by me shall continue and remain valid until it is revoked by me anytime in writing.

Thanking you

Yours faithfully,



(Client Signature)

Client Name : _____

Client Code : _____

FATCA-CRS Declaration

Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA & CRS guidance

Name														
Place of Birth														
Country of Birth														
Nationality														
Constitute	<input type="checkbox"/> Individual	<input type="checkbox"/> HUF	<input type="checkbox"/> NRI	<input type="checkbox"/> Foreign National										
	<input type="checkbox"/> Corporate	<input type="checkbox"/> Others (Pl. Specify) _____												

Are you a tax resident of any country other than India - Yes No

If Yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

S.No.	Country#	Tax Identification Number%	Identification Type <i>(TIN or other, please specify)</i>
1.			
2.			
3.			

To also include USA, where the individual is a citizen / green card holder of the USA

% In case Tax Identification Number is not available, kindly provide its functional equivalent \$

CERTIFICATION

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

FATCA & CRS - TERMS & CONDITIONS

Details under FATCA & CRS : The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account of any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e. within 30 days.

It is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Date :

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Place :

--

8

Signature

ACKNOWLEDGEMENT RECEIPT

To,

Finvasia Securities Pvt. Ltd.

Plot No. 10, Netsmartz House (Level 3),
Rajiv Gandhi Chd Tech Park, Chandigarh-160101 (India)

FinvasiaTM
Invest with Intelligence

Application No.

Date _____

Dear Sir,

I/We hereby wish to receive the below mentioned documents either electronically (email) or physically.

1. Rights & Obligation of Stock Broker/Trading Member, Sub broker and client for Trading on exchanges (including additional Rights and Obligations in case of Internet/Wireless Technology based Trading)
2. Risk Disclosure Document (RDD) & Documents detailing Do's & Don'ts for Trading on exchange & Policies and procedures of the stock broker.

Electronically (E-mail) Physically

 _____

Client Signature

Client Name _____

AUTHORISATION FOR ELECTRONIC COMMUNICATION

To,

Date : _____

Finvasia Securities Pvt Ltd
Plot No.10 Netsmartz House(Level-3)Rajiv Gandhi Technology Park

Sub : Authorisation for Electronic Communication

Dear Sir,

I/We understand that I/We have the option to receive the contract notes in physical form or electronic form. In pursuance of the same, I/We hereby opt for receipt of contract notes in electronic form as well as all other communications including account statement, holding statement, trade, order confirmations and any other notices also electronically.

I/We understand that for the above purpose, you are required to take from the client "an appropriate email account" for you to send the electronic contract notes. Accordingly, please take the following email account on your record for sending the contract notes and other communications to me/us.

1 Email id :.....

2. Alternate Email id:

I/We agree that the Log Reports of your dispatching software shall be a conclusive proof of dispatch of Contract Notes and any other electronic communication to me/us and such dispatch shall be deemed to mean receipt by me/us and shall not be disputed by me/us on account of any non-receipt / delayed receipt for any reason whatsoever.

I/We also agree that non-receipt of bounced mail notification by the stock broker shall amount to delivery at my/our e-mail id.

Please treat this authorisation as written ratification of my/our verbal directions / authorizations given and carried out by you earlier. I/We agree to indemnify you and keep you indemnified against all losses, damages and actions which you may suffer or face as a consequence of adhering to and carrying out my/our directions given above.

I/We agree to inform you any change in my email in future either in physical mode by regd. post or by hand delivery or through an email from my email id registered with you.

Thanking you

Yours faithfully,

(Client Signature)

 _____

Client Name : _____