

THE JAMNAGAR PEOPLES CO-OP. BANK LTD. CENTRAL KYC REGISTRY | Know Your Customer(KYC) Application Form Individual

CENTRAL KYC REGISTRY Know Your Custom	er(KYC) Application Forn	m Individual	ſ	
Instruction:	Application T	ype : New	Update	
A) Field marked with ^{1st} are mandatory fields.	Account Type	• •	Small	
B) Please fill the form in English and BLOCK Letter.s. C) Please read guidelines / detailed instructions over leaf.	KYC Number			
D) List of Two character ISO-3166 country codes are available	overleaf.			
PERSONAL DETAILS				
Name *(Same as ID Proof) : Prafix Hirst	Name I I I I I I	Middle Name		Last Name
Maiden Name (if Any*) : Prafix First	Name	Middle Name		Last Name
Father / Spouse Name * : Prafix First	Name	Middle Name		Last Name
Mothers Name* : Prafix First	Name	Middle Name		Last Name
	Gender* : Male Fema	le Transgender		20041421110
Marital Status* : Married Unmarried	Nationalty*: Indian Others	· ·		
Residential Status * : Resident Individual Non Resid	•	Person of Indian Origin		
Occuaption* : Private Sector Service Public Se	ctor Government Sector Bus	siness Proffessional		
Self Employeed Retired House	se Wife Student Others	Specified		
Tick of applicable : Residence for Tax Purposes in jurisc	liction(s) out side INDIA			
ADDITIONAL DETAILS REQUIRED* (If Applicant is residen	nt out side India fo	r Tax purpos	se)
(Please read guideliens / detailes for 'Jurisdiction of Residence	• •		, ,	,
ISO-3166 Country Code of Jurisdiction of Residence* :		,		
Tax Identifictaon Number of equivalent (if issued jurisdiction)*				
Place / City of Birth * : ISO-3	3166 Country Code of Birth $^*:$			
PROOF OF IDENTITY (Pol)* (One Certifierd	Copy of any one of the fo	ollowing Proof of ide	ntity (pol) nee	ds to be submitted)
PAN : TITITI	UID (Aadhaar)	: []]]		,
Voter ID Card : T T T T T T T T T T T T T T T T T T	VNREGA Job Card			
Passport Number : The Passport Number	PassportExpiry Date	DD MM	YYYY	
Driving License : The little is a second control of the little is a second	Driving License Expiry Dat	e : DD MM	YYYY	
Other (Any document notified by the central Government) : [
PROOF OF ADDRESS (PoA)*				
CURRENT / PERMANENT / OVERSEAS ADDRESS DETA	AILS (One Certifierd Copy of a	nv one of the following Pr	oof of address (P	oA) needs to be submitted)
Line 1* :				
Line 2* :				
Line 3* :		City / Town / Village :		
State/U T * : Pin / Post C	ode :	ISO-3166 Country Co	ode :	
Proof Of : Passport	Driving License	Aadhaar Card		
Address* Voter Identity Card	NREGA CARD	Others	Specified	

CORRESPONDENCE / LOCAL ADDRESS DETAILS (Incase the PO)	A is not the local address or Address where the customer is currently residing . To be declared only and no POA is required)		
Same as Current / Permanent / Overseas Address details (Incase of multiple correspondence / local address, Please fill 'Annexture A1')			
Line 1* :			
Line 2* : .			
Line 3* :	City / Town / Village :		
State/U T * : Pin / Post Code : [ISO-3166 Country Code :		
CONTACT DETAILS (Communication will be done on provided Mobile no. and Email ID)			
T1/(%)			
Fax : STC Code	The doubt of the second of the		
OTHER DETAILS			
	0 Lac to 15 Lac 15 lac to 25 Lac 25 Lac and Above		
Net Worth : D. Cooperation	As on: DD MM YYYY		
Education Qualification : Below SSC SSC HSC	Graduate Masters Proffessional (CA, CS, CMA, Others)		
Please Tick if Applicable : Politically Expossed Person	Related to Politically Exposed Person		
Any other Information :			
APPLICANT DECLARATION :	ATTESTATION / FOR OFFICE USE ONLY		
I hereby declare that the details furnished	Documents Received : Self certified True Copies Notary		
above are true and correct to the best of my/our : knowledge and belief and I undertake to inform :	Risk Category : High Medium Low		
you of any changes therein, immediately. In			
case any of the above information is found to be : false or untrue of misleading or :	IN PERSON VERIFICATION DETAILS INSTRUCTION DETAILS		
misrepresenting, I am/we are aware that I/We	Identity Verification : Done Name :		
may be held liable for it. I Would like to share my personal /KYC details with Central KYC	Date : Code : Code		
Registry.	Emp. Name : Stamp :		
Signature / thumb Impression	Emp. Code : .		
	Emp. Designation		
	Emp. Branch		
Cignatura / though languagian of Applicant	Signature Institution Stamp		
Signature / thumb Impression of Applicant			
Place:	Employee Signature		
Date: DD MM YYYY	=		
INCTRICTIONS	- · · · · · · · · · · · · · · · · · · ·		
INSTRUCTIONS	(a) Name Discourse of D. C. (A) (A) (B) (1) (C)		
Importatnt Points (a) Application should be completed in ENGLISh and in BLOCK letters	(g) Name: Please state your name as Prefix (Mr./ Mrs./Ms./Dr./etc.) First, Middles and Last Name in the space provided. This should match the name as		

- (b) KYC Number is Mandatory for UPDATE Application
- (c) Tick* where ever applicable
- (d) Tick * in the respective section heading for updation
- (e) Please fill the form in legible handwriting so as to avoide errors in your application processing, Please do not overwrite, Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the client
- (f) Your are required to submit a Proof of Identity and Proof Of address for Current/Peramanent/Overseas address provided by you.
- (g) Name: Please state your name as Prefix (Mr./ Mrs./Ms./Dr./etc.) First, Middles and Last Name in the space provided. This should match the name as mentioned in the proof of Identity submitted failing which the application is liable to be rejected.
- (h) Pin/Post code is not mendatory if country is other than INDIA
- (i) Please provide additional details whereever required if Applicant resident outside INDIA of Tax Purposes.
- (j) For Individiuals:
 - a. Please fill 'Annexture A1' for multiple address Details.
 - b. Please fill 'Annexture B1' for Related person Details.