

**Know Your Client (KYC)**  
**Application Form (For Individuals Only)**



Please fill the form in ENGLISH and in BLOCK letters

Fields marked \* are mandatory

Fields marked \* are pertaining to CKYC and mandatory only if processing CKYC also

Application Number: \_\_\_\_\_

Moneywise. Be wise.

Application Type\*:  New KYC  Modification KYC

**KYC Mode\***: Please Tick (✓)

Normal  EKYC OTP  EKYC Biometric  Online KYC  Offline EKYC  Digilocker

**1. Identity Details** (please refer guidelines overleaf)

PAN\* \_\_\_\_\_ Trading Code: \_\_\_\_\_ DP Id: \_\_\_\_\_ Client Id: \_\_\_\_\_

Name\* (same as ID proof) \_\_\_\_\_

Maiden Name\* (if any) \_\_\_\_\_

Fathers/Spouse's Name\* \_\_\_\_\_

Date of Birth\* \_\_\_\_\_

Gender\*  Male  Female  Transgender

Marital Status\*  Single  Married

Nationality\*  Indian  Other \_\_\_\_\_

Residential Status\*  Resident Individual  Non Resident Indian

Please Tick (✓)  Foreign National  Person of Indian Origin\*

(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)



Cross Signature across photograph

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

A — Aadhaar Card XXXX XXXX \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

B — Passport Number \_\_\_\_\_

C — Voter ID Card \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

D — Driving License \_\_\_\_\_

E — NREGA Job Card \_\_\_\_\_

F — NPR \_\_\_\_\_

Z — Others \_\_\_\_\_ (any document notified by Central Government)

Identification Number \_\_\_\_\_

**2. Address Details\*** (please refer guidelines overleaf)

**A. Correspondence/ Local Address\***

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

City/Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified

Blank area for stamp or additional information.

Applicant SIGN

Blank area for Applicant Signature.

**B. Permanent residence address of applicant, if different from above A / Overseas Address\*** (Mandatory for NRI Applicant)

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line3 \_\_\_\_\_

City/ \_\_\_\_\_

Town/Village\* \_\_\_\_\_ District\* \_\_\_\_\_ Pin Code\* \_\_\_\_\_

State\* \_\_\_\_\_ Country\* \_\_\_\_\_

Address Type\*  Residential/Business  Residential  Business  Registered Office  Unspecified**Proof of Address\*** (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

<input type="checkbox"/> A — Aadhaar Card	XXXX XXXX _____		
<input type="checkbox"/> B — Passport Number	_____	(Expiry Date)	_____
<input type="checkbox"/> C — Voter ID Card	_____		
<input type="checkbox"/> D — Driving License	_____	(Expiry Date)	_____
<input type="checkbox"/> E — NREGA Job Card	_____		
<input type="checkbox"/> F — NPR Letter	_____		
<input type="checkbox"/> Z — Others	_____	(any document notified by Central Government)	
Identification Number	_____		

**3. Contact Details (in CAPITAL)**

Email ID\* \_\_\_\_\_

Mobile No. \* \_\_\_\_\_

Tel (off) \_\_\_\_\_ Tel (Res) \_\_\_\_\_

**One mobile number or Email id is not allowed in multiple accounts.**

If exist kindly tick on relation: ( ) Spouse / ( ) Dependent child / ( ) Dependent parents.

**4. Applicant Declaration**

I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take 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.

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email 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 to 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.

DATE: \_\_\_\_\_ (DD-MM-YYYY)

PLACE: \_\_\_\_\_

Applicant Wet Signature

**5. For Office Use Only**

In-Person Verification (IPV) carried out by\*

Intermediary Details\*

IPV Date \_\_\_\_\_

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

 Self certified document copies received (OVD) True Copies of documents received (Attested)

AMC / Intermediary Name :

**SMC GLOBAL SECURITIES LTD.**

Employee Signature and Stamp

Institution Name and Stamp

## FINANCIAL & ADDITIONAL DETAILS UPDATION FORM

<b>Applicant Name</b> (same as ID proof)	
<b>Father's/Spouse' Name</b>	
<b>Mother's Name*</b>	
<b>Financial Details</b>	<b>Income Range (Per Annum) as on date</b> _____/_____/20____
Gross Annual Income Details (Please Specify)	<input type="checkbox"/> Below Rs 1 Lakh <input type="checkbox"/> Rs 1 - 5 Lakh <input type="checkbox"/> Rs 5 - 10 Lakh <input type="checkbox"/> Rs 10 - 25 Lakh <input type="checkbox"/> Above Rs 25 Lakh
	#Provide document in support of financial details (mandatory for Derivatives)
Net worth (should not be older than 1 year) (Mandatory for Non-individual)	Rs. _____ as on date ____/_____/20____
<b>Occupation</b> (In case of Individual)	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Central Government <input type="checkbox"/> State Government <input type="checkbox"/> Business* <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturalist <input type="checkbox"/> Retired <input type="checkbox"/> House Wife <input type="checkbox"/> Student <input type="checkbox"/> NGO <input type="checkbox"/> Others _____
<b>*If business is selected, then provide nature of business</b>	
<b>Politically Exposed (Please tick)</b>	
<input type="checkbox"/> Not Politically Exposed Person (PEP) / Not Related to Politically Exposed Person (PEP) <input type="checkbox"/> Politically Exposed Person (PEP) / Related to a Politically Exposed Person (PEP)	
<b>FATCA Declaration</b>	
Are you resident outside India for Tax Purpose <input type="checkbox"/> No <input type="checkbox"/> Yes (provide additional information) Country of Birth _____	
City of Birth _____ (specify)	
If you are resident outside India for Tax Purpose, provide following additional information:	
Country of Tax residence _____	
Tax Identification Number (TIN) _____ (attach TIN proof)	
<b>#Documents that can be submitted in support of financial details (any one):</b>	<b>For SMC use</b>
(i) Copy of ITR	In-Person Verification (IPV) conducted
(ii) Copy of Annual Accounts / Balance Sheet and P&L	by: Details of SMC Employee/AP:
(iii) In case of salary income - Salary Slip or Copy of Form 16	Name: _____
(iv) Net worth certificate	Signature: _____ Date _____
(v) Copy of latest demat account holding statement with value	
(vi) Bank account statement for last 6 months	

<b>Applicant SIGN</b>
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
<b>Date:</b> DD / MM / YYYY