



PERSONAL
Customer ID Account Type* Normal Minor
Prefix First Name Middle Name Last Name Name* (Same as ID proof)
Maiden Name (If any*)
Father / Spouse Name*
Mother Name*
Date of Birth* Gender* M - Male F - Female T - Transgender
PAN Number
PROOF OF IDENTITY & ADDRESS DOCUMENT PROVIDED Yes No
If Yes, Identify Document Name
CURRENT ADDRESS IF DIFFERENT FROM ADDRESS MENTIONED IN PROOF OF IDENTITY & ADDRESS DOCUMENT. Yes No
If Yes, Current Address
OCCUPATION & INCOME
Occupation Salaried Self-Employed Retired Self-Employed Professional Student Housewife Politician
Pvt. Ltd. Proprietorship Public Sector Multinational Partnership Public Ltd. Govt.
Self Employed Since Year Month Date of Incorporation (If Company Owner)
Nature of Business
Type of Company/Firm Partnership Private Limited Co. Sole Proprietorship
Self Employed Professional Doctor IT Consultant Lawyer CA/CS Architect
Source of Funds Salary/Pension Agriculture Business Income Investment Income
Gross Annual Income (₹)
Residence Type Owned Rental/Leased Ancestral/Family Company Provided
There is no change in my mailing / permanent address/contact number I wish to change my mailing / permanent address/contact details as below Document Attached Mailing Permanent
PERMANENT ADDRESS (Please leave space between two words)
Flat No./Bldg. Name Road Name
Landmark
City Taluko PIN Code
State Country Country
Tel. (R) Tel. (O) Ext. No.
Email ID*
Mobile Number Mobile Number
CUSTOMER ACKNOWLEDGEMENT COPY Reference Number

MAILING / CURI	RENT ADDRESS (Please leave space between two words)
Flat No./Bldg. Name	
Road Name	
Landmark	
City	Taluko PIN Code
State	Country
Note: For Minor belo	ow 10 years, separate Re-KYC form for both "Minor" as well as "Guardian" is Mandatorily required.
DECLARATION	
I hereby declare that therein, immediately.I hereby consent to r	rmation provided above with respect to my account is up to date and correct. It the details furnished above are true and correct to the best of my knowledge and belief and undertake to inform you of any changes In case any of the information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. In receiving information from CKYC Registry through SMS/Email on the above registered number/email address. In the details furnished above with respect to my change and the sum of the
Address and Identity F	Proof
Address Proof, if differ	erent from above
PAN	OR FORM 60 Please sign in black ink only
I have also attached m recent photograph alo Place: Date:	
FOR OFFICE US	E ONLY
	Signature/Customer ID Verified/Address Change Verified
*Branch to carry out detailed Form 60 ad is selected.	Signature of Verifying Official
MISK GATEGORY F	H M L

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