

Registered office address : The Ruby, 18th Floor, 29 Senapati Bapat Marg, Dadar (West), Mumbai – 400 028, Maharashtra, INDIA,
Tel : 022 - 6750 2000 Fax : 022-2432 7343 | Website: www.sharekhan.com

For office use only Application Type* New Update
 (To be filled by financial institution) KYC Number (Mandatory for KYC update request)
 Account Type* Normal Minor Aadhaar OTP based E-KYC (in non-face to face mode)

1. PERSONAL DETAILS (Please fill the form in English and in BLOCK letters) (As per OVD document only)

Name* (Same as OVD proof) Prefix First Name Middle Name Last Name
 Maiden Name (If any*) First Name Middle Name Last Name
 Father / Spouse Name* First Name Middle Name Last Name
 Mother Name First Name Middle Name Last Name
 Date of Birth*
 Gender* M - Male F- Female T-Transgender Marital Status* Married Unmarried Others _____
 Residential Status* Resident Individual Non Resident Indian Foreign National Person of Indian Origin Citizenship / Nationality IN-Indian Others _____
 Occupation Type* S-Service (Private Sector Public Sector Government Sector) O-Others (Self Employed Retired Housewife Student Professional) B-Business X-Not Categorized (Please Specify _____)
 A- PAN Card*

2. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID)

Mobile
 Tel. (Res)
 Email ID
 Tel. (Off)
 Fax

3. PROOF OF IDENTITY AND ADDRESS*

I. (Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs))
 A- Passport Number
 B- Voter ID Card
 C- Driving Licence
 D- NREGA Job Card
 E - National Population Register Letter
 F - Proof of Possession of Aadhaar
 G - E-KYC Authentication
 H- Offline verification of Aadhaar

Address
 Line 1* _____
 Line 2 _____
 Line 3 _____ City / Town / Village* _____
 District* _____ Pin / Post Code* _____ State _____
 Country _____ Landmark _____

4. CURRENT ADDRESS DETAILS

Same as above mentioned address (in such cases address details as below need not be provided)
 Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)
 A- Passport Number
 B- Voter ID Card
 C- Driving Licence
 D- NREGA Job Card
 E - National Population Register Letter
 F - Proof of Possession of Aadhaar
 G - E-KYC Authentication
 H- Offline verification of Aadhaar
 I - Deemed Proof of Address

Address
 Line 1* _____
 Line 2 _____
 Line 3 _____ City / Town / Village* _____
 District* _____ Pin / Post Code* _____ State _____
 Country _____ Landmark _____

5. REMARKS (If any)

6. 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 Central KYC Registry and KRAs 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 KRAs, CKYCR and other Intermediaries with whom I have a business relationship for KYC purposes only.

PHOTO

(1) 

Signature of Applicant

Date : _____

Place : _____

7. ATTESTATION / FOR OFFICE USE ONLY

Documents Received Certified Copies E-KYC data received from UIDAI Data received from Offline verification Digital KYC Process
 Equivalent e-document Video Based KYC

This is to certify that I have carried out in-person verification in respect of the client mentioned in the KYC form.

KYC VERIFICATION CARRIED OUT BY

Date DD MM YYYY
Emp. Name _____
Emp. Code _____
Emp. Designation _____
Emp. Branch _____

[Employee Signature]

INSTITUTION DETAILS

Name : SHAREKHAN LIMITED
Code IN0344

[Institution Stamp]