

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 CKYCalso

CDSL VENTURES LIMITED
...Exploring New Horizons

Application Number: _____

Application Type*: ☐ New KYC ☐ Modification KYC

KYC Mode*: Please Tick(✓)

☐ Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Online KYC ☐ Offline EKYC ☐ Digilocker

1. PERSONAL DETAILS (Please refer instruction A at the end)

Prefix _____

☐ Name* (Same as ID proof) _____

(If any*) Maiden Name _____

Father / Spouse Name _____

Mother Name _____

Date of Birth* - -

PAN* _____

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

Nationality* ☐ Indian ☐ Others

PHOTO



Signature / Thumb Impression

2. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)

(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted)

I Certified copy of OVD or equivalent d-documents of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

I ☐ A- Passport Number _____

☐ B- Voter ID Card _____

☐ C- PAN Card _____

☐ D- Driving Licence _____ Driving Licence Expiry Date - -

☐ E- UID (Aadhaar) _____

☐ F- NREGA Job Card _____

☐ G- Others(any document notified by the central government) _____ Identification Number _____

☐ H- National Population Register Letter _____ Identification Number _____

☐ I- Proof of Possession of Aadhar _____

II ☐ E-KYC Authentication _____

III ☐ Offline verification of Aadhar _____

Address _____

Line 1* _____

Line 2 _____

Line 3 _____ City / Town / Village* _____

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

State* _____ Country* _____

3. CURRENT ADDRESS DETAILS (Please refer instructions B at the end)

☐ Same as above mentioned address (in such cases address details as below need not be provided)

I Certified copy of OVD or equivalent d-documents of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

I ☐ A- Passport Number _____

☐ B- Voter ID Card _____

☐ C- PAN Card _____

☐ D- Driving Licence _____ Driving Licence Expiry Date - -

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II ☐ E-KYC Authentication _____

III ☐ Offline verification of Aadhar _____

Address

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

☐ 4. CORRESPONDENCE / LOCAL ADDRESS DETAILS *(Please see instruction B at the end)

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

☐ I ☐ A- Passport Number _____

☐ B- Voter ID Card _____

☐ C- PAN Card _____

☐ D- Driving Licence _____

 Driving Licence Expiry Date DD - MM - YY YY
☐ E- UID (Aadhaar) _____

☐ F- NREGA Job Card _____

☐ G- Others(any document notified by the central government) _____ Identification Number _____

☐ H- National Population Register Letter _____ Identification Number _____

☐ I- Proof of Possession of Aadhar _____

☐ II ☐ E-KYC Authentication _____

☐ III ☐ Offline verification of Aadhar _____

Address

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

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

Tel. (Off) _____ Tel. (Res) _____ Mobile _____
 FAX _____ Email ID _____

☐ 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 hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

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.

PLACE: _____ DATE: _____ (DD-MM-YYYY)

Applicant e- SIGN

Applicant Wet Signature

7. For Office Use Only

Documents Received ☐ Digital KYC Process ☐ E-KYC data received from UIDAI ☐ Data received from Offline verification
☐ Certified Copies ☐ Equivalent e-documents ☐ Video based KYC

In-Person Verification (IPV) carried out by*

Intermediary Details*

Date DD - MM - YY YY
 Emp. Name _____
 Emp. Code _____
 Emp. Designation _____
 Emp. Branch _____

☐ Self certified document copies received (OVD)

☐ True Copies of documents received (Attested)

AMC / Intermediary Name :

