

Application No.

KYC No. 

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 (Mandatory for KYC update request)

Application Type\*: ☐ New KYC ☐ Modification KYC ☐ Minor

Please Tick ( ✓ ) ite my account and update my KYC details ☒ Re-activate my account with no change in KYC

UCC	DP Account 1		DP Account 3	
Date____/____/____	DP Account 2		DP Account 4	

**KYC Mode\*:** Please Tick (✓) ☐ Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Online KYC ☐ Offline EKYC ☐ Digilocker

**Modification type\*:** Please Tick ( ✓ ) ☐ PAN ☐ Name ☐ Date of Birth ☐ Mobile ☐ E-mail  
☐ Correspondence/Local Address ☐ Permanent residence address ☐ conversion Minor to Major  
☐ Conversion Resident Individual to NRO ☐ Conversion NRO to Resident Individual  
☐ Others

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

PAN\* \_\_\_\_\_

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

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

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

Mother Name (Optional) \_\_\_\_\_

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

Gender\* ☐ Male ☐ Female ☐ Transgender

Marital Status\* ☐ Single ☐ Married

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

Residential Status\* ☐ Resident Individual ☐ Non Resident Indian  
☐ Foreign National ☐ Person of Indian Origin+

PHOTOGRAPH

Please affix  
the recent passport  
size photograph and  
sign across it

Please Tick ( ✓ ) (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)

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

☐ A - Aadhaar Card

☐ B - Passport Number \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

☐ C - Voter ID Card \_\_\_\_\_

☐ D - Driving License \_\_\_\_\_ (Expiry Date) \_\_\_\_\_

☐ F - NPR \_\_\_\_\_ ☐ E - NREGA Job Card

☐ G - EKYC Authentication \_\_\_\_\_ ☐ H - Offline verification of Aadhar \_\_\_\_\_

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

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

**2. Contact Details (in CAPITAL) -** (All communications will be sent to Mobile No. / Email Id)

Primary Email / Mobile (Default)

Email \*  Mobile No. \*

Additional Email / Mobile

Email \*  Mobile No. \*

Email \*  Mobile No. \*

Email \*  Mobile No. \*

Email \*  Mobile No. \*

3. Address Details* (please refer guidelines overleaf)												
<b>A. Correspondence/ Local Address*</b> Line 1* _____ Line 2 _____ Line3 _____ City/Town/Village* _____ District* _____ Pin Code* _____ State / U.T Code* _____ Country* _____ ISO-3166 Code _____ Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified												
<b>B. Permanent residence address of applicant, if different from above A / Overseas Address*</b> (Mandatory for NRI Applicant) Line 1* _____ Line 2 _____ Line3 _____ City/Town/Village* _____ District* _____ Pin Code* _____ State / U.T Code* _____ Country* _____ ISO-3166 Code _____ Address Type* <input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified												
<b>Proof of Address*</b> (attested copy of any 1 POA for correspondence and permanent address each to be submitted) Certified copy of OVD or equivalent e document of OVD obtained through digital KYC process needs to be submitted. (Any one of the following OVD) <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> <input type="checkbox"/> A - Aadhaar Card   <span style="border: 1px solid black; padding: 2px 5px;">XXXXXXXXXX</span>  <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"/> Z - Others   _____ (any document notified by Central Government)  <div style="margin-left: 20px;">Identification Number   _____</div> </div> <div style="flex: 1; margin-top: 10px;"> <b>Gross Annual Income Details:</b>   <input type="checkbox"/> Below 1 Lac   <input type="checkbox"/> 1-5 Lac   <input type="checkbox"/> 5-10 Lac   <input type="checkbox"/> 10-25 Lac   <input type="checkbox"/> 25 Lac - 1 Crore  <input type="checkbox"/> &gt; 1 Crore   <input type="checkbox"/> Net-worth   _____ (*Net worth should not be older then 1 year)   as on (date) <span style="border: 1px solid black; padding: 2px;">DDMMYYYY</span> </div> </div>												
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 / CERSAI 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)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; padding: 5px;">Name</th> <th style="width: 50%; padding: 5px;">Signature</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"></td> <td style="height: 150px;"></td> </tr> </tbody> </table> <div style="text-align: right; margin-top: 10px;">PLACE: _____</div>	Name	Signature									
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5. For Office Use Only												
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I and my family members hereby request that mobile number being \_\_\_\_\_  
 and email ID being \_\_\_\_\_  
 belonging to undersigned shall be considered in your records for the purpose of receiving communication from you or Stock Exchanges  
 with regard to details of trading transactions executed through you.

Thus, any communication relating to our trading and demat account should be sent to the above mentioned mobile number and e-mail  
 ID. This facility shall be extended to us as an exception, for our convenience of receiving transaction details at a single mobile number  
 and e-mail ID. I understand that for the purpose of availing the above facility "family" means self, spouse, dependent children and  
 dependent parents.




Client Code	Client Name	Relationship	Signature
		<input type="checkbox"/> Self	
		<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Mother	
		<input type="checkbox"/> Father	
		<input type="checkbox"/> Son	
		<input type="checkbox"/> Daughter	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Please Fill up declaration in case  
 Email/Mobile is already updated in  
 sole/first holder account and wish to  
 update same details for Family  
 members as per SEBI guideline

The above details shall be deemed valid till any change is requested under the modification process.  
 In case the demat account is in the name of joint holders, all joint holders are required to sign below:

#### 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 CVL / KRA / CERSAI 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.

	Name	Signature
<b>First Holder</b>		
<b>Second Holder</b>		
<b>Third Holder</b>		

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

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