



CKYC / KYC Personal Details

Client ID :

UCC : _____

First Name _____

Middle Name _____

Last Name(surname) _____

Maiden Name : _____

Father's Name/ Spouse Name: _____

Mother's Name: _____

DOB: _____

Place Of Birth: _____

Country Of Birth: _____

GENDER:

F-female

M-male

T- Transgender

MARITAL STATUS:

Married

Unmarried

Other

NATIONALITY:

Indian

Other

RESIDENTIAL STATUS :

Resident

Non-resident Indian

Foreign National

MANDATORY DETAILS

Individual

ent Indian

PAN : UID / ENROLLMENT NO:

CONTACT DETAILS : TEL(RES. _____

TEL(OFFICE _____

MOBILE NO:

(MANDATORY IF POA GIVEN IN FAVOUR OF ACML)

MOBILE NO GIVEN:

Self

Dependent Parent

Dependent Children

Spouse

Not Provided

EMAIL ID: _____

EMAIL ID PROVIDED:

Self

Dependent Parent

Dependent Children

Spouse

Not Provided

PERMANENT RESIDENCE ADDRESS OF HOLDER

City / Town / Village _____ Dis: _____ Postal Area _____

Pin

State: _____ Country: _____

PROOF OF ADDRESS :

MANDATORY :

Voter Id No : _____ Issue Of Date : _____

 Bank Pass Book (of Last 3 Months Transactions) Electricity/telephone Bill (Not More than 3 Months)

Driving Licence No: _____ Issue Date: _____ Expiry Date: _____

Passport No: _____ Issue Date: _____ Expiry Date: _____

Other(please Specify) : _____

* I Hereby Declare That I Have Not Provided Mobile Or Email Id. -->



(2)

Client Signature



ACML

APPLICATION NO: _____

CORRESPONDENCE ADDRESS

 As Per above Permanent Address

C/o:

Name _____

City / Town/

Village _____ Dis: _____ Postal Area _____

State: _____ Country: _____ Pin

PROOF OF ADDRESS: (Third Party In Case Of Correspondence Address)

MANADATORY : AADHAR /UID : Last For Digit

VOTER ID : _____ ISSUE DT. OF VOTER ID : _____

 Bank Pass Book (of Last 6 Months Transactions)
 Electricity/telephone Bill
 Other(please Specify) _____

Driving Licence No: _____ Issue Date: _____ Expiry Date: _____

Passport No: _____ Issue Date: _____ Expiry Date: _____

Occupation:
 Private Sector
 Public Sector
 Government
 Self Employed
 House Wife
 Retired
 Agriculturist
 Professional
 Landlord
 Student
 Business
 Other(please Specify) _____

INCOME : (PER ANNUM)

 Below 1 LAC
 1-5 LAC
 5-10LAC
 10-25LAC
 25-1 CR
 1CR
 Above

NETWORTH AS ON : _____ is Rs. (Lacs) _____
 (Should Not Be Older than 1 Year)
NATURE OF BUSINESS: _____**NAME OF ESTABLISHMENT:** _____**OFFICE ADDRESS:** _____

CITY: _____ Postal Area _____ STATE: _____

 COUNTRY: _____ PIN CODE: TEL(OFFICE): _____

**KRA / KYC RECEIVED OF
THIRD PARTY :**

Third Client Signature

(3) Client Signature

**A. ADDITIONAL INFORMATION/ FATCA-CRS DECLARATION (SECOND HOLDER / TRADING HOLDER)**

ARE YOU A CITIZEN OR TAX RESIDENT OF ANY OTHER COUNTRY OTHER THAN INDIA?

 YES NO

IF YES, PLEASE INDICATE ALL THE COUNTRIES IN WHICH YOU ARE RESIDENT FOR TAX PURPOSE.

COUNTRY	TAX IDENTIFICATION NUMBER	IDENTIFICATION TYPE

B. Additional Information: Regarding Any Actions/proceedings Initiated / pending (Second Holder)

Details Of Any Actions/proceedings Initiated / pending /taken By Sebi /stock Exchange/ Any Other Authority Against The Applicant /constituent Or Its Parteners / Promoters/whole Time Directors / Authorised Person Incharge Of Dealing In Security Durina The Last Three Years (attached Copv:)

YEAR	AUTHORITY NAME	ORDER REF NO

C. POLITICALLY EXPOSED PERSON RELATED TO POLITICALLY EXPOSED PERSON Not Applicable

Certification: I/WE have understood the information requirements of this form(read along with the FATCA & CRS instructions) and hereby confirm that the information provide by me/us on this form is true,correct,and complete. I/WE also confirm that I/WE have read and understood the FATCA & CRS terms and condations below and hereby accept the same.

 _____
(4) Client Signature

I / We am / are the Giving Assurance for the following :

- * Family Flag as Per Email Consent
- * I agree to receive SMS / Email alerts from Broker, Stock Exchanges and depositories on the above Mobile number / email id Instead of Physical
- * 2nd & 3rd Holder Sign Applicable In Case If Client Wish To Update Above Information For Their Trading / Demat Account Registered With Acml.
- * All Updates Applicable For E-confirmation Regarding Any Communication Under SEBI Authorities.

(5) Client Signature:



Original Verified Stamp Affixed by ACML Authorised Person

ORIGINALS VERIFIED

(6) Client Signature:



In Person Verification Stamp Affixed by ACML Authorised Person

IN PERSON VERIFICATION



2nd Holder Sign



3rd Holder Sign

