

Know Your Client Application Form (For Individuals)



SUNDARAM MUTUAL
UNEARTHING OPPORTUNITIES

Appln. No.:		KYC No.:		Appln. Type: <input type="radio"/> New <input type="radio"/> Update	
CKYC ID NO					
<input type="radio"/> PAN <input type="radio"/> PAN Exempt (Form 60)		PAN:		EX NO :	
PAN EXEMPT REASON				PHOTOGRAPH	
<input type="radio"/> PERSONAL DETAILS					
APPLICANT NAME*					
MAIDEN NAME (If any)					
FATHER / SPOUSE NAME*					
MOTHER NAME					
DATE OF BIRTH*		/ /		GENDER* <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender	
CITIZENSHIP*		<input type="radio"/> Indian <input type="radio"/> Others		MARITAL STATUS* <input type="radio"/> Married <input type="radio"/> Unmarried <input type="radio"/> Others	
RESIDENT STATUS*		<input type="radio"/> Resident <input type="radio"/> Non Resident <input type="radio"/> Foreign National <input type="radio"/> Person of Indian Origin			
OCCUPATION		<input type="radio"/> S – Service <input type="radio"/> Pvt. Sector <input type="radio"/> Public Sector <input type="radio"/> Govt. Sector <input type="radio"/> O – Others <input type="radio"/> Professional <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> B – Business <input type="radio"/> X – Not Categorized			
<input type="radio"/> IDENTITY AND ADDRESS DETAILS* (Any one of the below documents to be submitted)					
OFFICIALLY VALID DOCUMENT DETAILS		<input type="radio"/> Passport			
		<input type="radio"/> Voter ID			
		<input type="radio"/> Driving License			
		<input type="radio"/> MNREGA Job Card			
		<input type="radio"/> NPR Letter			
		<input type="radio"/> Proof of Possession of Aadhaar			
		<input type="radio"/> Online E-KYC Authentication**			
		<input type="radio"/> Offline Verification of Aadhaar**			
PERMANENT / OVERSEAS ADDRESS*					
ADDRESS TYPE		<input type="radio"/> Residence/Business <input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Regd. Office <input type="radio"/> Unspecified			
ADDRESS LINE 1*					
ADDRESS LINE 2					
ADDRESS LINE 3					
CITY*		PINCODE / ZIP*			
DISTRICT*					
STATE / U T*		STATE CODE*			
COUNTRY*		COUNTRY CODE*			
CURRENT ADDRESS (TO BE PROVIDED IF DIFFERENT FROM ABOVE ADDRESS)					
SAME ADDRESS AS AVAILABLE IN OFFICIALLY VALID DOCUMENT PROVIDED ABOVE*		<input type="radio"/> YES <input type="radio"/> NO			
PROOF OF ADDRESS FOR CURRENT ADDRESS@		<input type="radio"/> Passport			
		<input type="radio"/> Voter ID			
		<input type="radio"/> Driving License			
		<input type="radio"/> MNREGA Job Card			
		<input type="radio"/> NPR Letter			
		<input type="radio"/> Proof of Possession of Aadhaar			
		<input type="radio"/> Online E-KYC Authentication**			
		<input type="radio"/> Offline Verification of Aadhaar**			
		<input type="radio"/> Deemed Proof of Address		<input type="radio"/> Utility Bill & <input type="radio"/> Property / Municipal Tax Receipt <input type="radio"/> Pension / Family Pension Payment Orders # <input type="radio"/> Letter of Allotment of Accommodation ⁵	

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ADDRESS TYPE	<input type="radio"/> Residence/Business <input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Regd. Office <input type="radio"/> Unspecified		
ADDRESS LINE 1 [@]			
ADDRESS LINE 2			
ADDRESS LINE 3			
CITY [@]		PINCODE / ZIP [@]	
DISTRICT [@]			
STATE / U T [@]		STATE CODE [@]	
COUNTRY [@]		COUNTRY CODE [@]	
<input type="radio"/> CONTACT INFORMATION			
MOBILE NO		FAX NO	
TELEPHONE (RES)		TELEPHONE (OFF)	
EMAIL ID			
APPLICANT DECLARATION AND CONSENT*			
<p>I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake 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 aware that I may be held liable for it.</p> <p>I hereby consent to receiving information from SEBI Registered KYC Registration Agency / Central KYC Registry through SMS/Email on the above registered number/email address.</p> <p>I hereby consent to</p> <ol style="list-style-type: none"> use images of officially valid documents uploaded, digitally signed e-Aadhaar letter downloaded from UIDAI website and / or data received from UIDAI through Aadhaar authentication mechanism as proof of identity and / or address and consider signature uploaded as specimen signature and as part of my KYC information. process and register / update my KYC details provided through this application with SEBI KRA and / or Central KRA system(s), store documents / information uploaded as applicable under PML Act & Rules, SEBI KRA Regulations, 2011 and other any Act, Rules, Regulations, Guidelines, Circulars, etc. issued by Statutory / Regulatory authorities from time to time <p>I have no objection for the KRA in retaining my KYC details shared by me. I understand and am informed that the information / documents provided by me shall be stored by the KRA and / or the intermediary downloading my KYC information from SEBI KRA / Central KYC Registry and shall be used only for the purpose of completing my KYC formalities only and the information shall not be shared with any other third party.</p> <p>I also understand that the KYC information registered with KRA / Central KRA system(s) would be utilized as mentioned in the SEBI KRA Regulations, 2011 / Central KYC Registry Operating Guidelines, 2016.</p>			
DATE			
PLACE			
GEO COORDINATES	SIGNATURE / THUMB IMPRESSION OF APPLICANT		
ATTESTATION / FOR OFFICE USE ONLY			
DOCUMENTS RECEIVED	<input type="radio"/> Certified Copies <input type="radio"/> EKYC Data from UIDAI <input type="radio"/> Offline PDF / XML Verification <input type="radio"/> Digital KYC <input type="radio"/> Data from Digi Locker		
KYC VERIFICATION / IPV CARRIED OUT BY			
EMPLOYEE NAME		IPV DATE	
EMP. DESIGNATION		EMP. BRANCH	
EMPLOYEE CODE		FI CODE	
FI NAME			
EMPLOYEE SIGNATURE		FI SEAL	

* Mandatory and required information

** These documents are applicable only for online KYC

[@] Mandatory if same address as available in officially valid document provided above flag is 'NO'

[&] Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill)

[#] Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain address

[§] Letter of Allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and license agreements with such employers allotting official accommodation.