CENTRAL KYC REGISTRY / Know Your Customer (KYC) Application Form (Individual)

KK SECURITIES LIMITED

Regd. Office : 76-77, Scindia House, Janpath, New Delhi-110001, Phones : 011-46890000 (25 Lines) Fax : 011-23723571
E-mail : kksl@kksecurities.com Website : www.kksecurities.com, For Investor Grievance : kkslig@hotmail.com. DP ID - IN300468 CIN - U74899DL1994PLC060238

Important Instructions :
A) Fields marked with(*) are mandatory fields. B) Please fill the form in English and in BLOCK letters C) Please fill the date in DD-MM-YYYY format.
d) For particular section update, please tick (✓) in the box available before the section number and strike ffo the sections not required to be updated.

For Office use only
(To be filled in financial Institution)

Application Type* ☐ New ☐ Update
KYC Number _____ *(Mandatory for KYC update request*
Account Type* ☐ Normal ☐ Simplified (for low risk customers) ☐ Small

☐ 1. PERSONAL DETAILS

	Prefix	First Name	Middle Name	Last Name
☐ Name*(Same as ID proof)				
Maiden Name (if any*)				
Father / Husband Name*				
Mother Name*				

☐ Date of Birth* D D — M M — Y Y Y Y

Gender ☐ M-Male ☐ F-Female ☐ T-Transgendor
Marital Status* ☐ Married ☐ Unmarried ☐ Others
Citizenship* ☐ IN-Indian ☐ Other _____
Residential Status* ☐ Residental Individual ☐ Non Resident Indian
☐ Foreign National ☐ Person of Indian Origin
Occupation Type* ☐ S-Service (☐ Private Sector ☐ Public Sector ☐ Government Sector)
☐ Student (☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife
☐ B-Business ☐ Others
☐ X-Not Categorised

Do not sign on face

Please Affix your recent Passport size photograph

Signature across Photograph Avoid on Face

Sign →

☐ 2. TICK IF APPLICABLE | RESIDENCE FOR TAX PURPOSES IN JURISDICTION (S) OUTSIDE INDIA

ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked)

Country of Jurisdiction of Residence *_____

Tax Identification Number of equivalend (if issued by Jurisdiction)* _____

Place / City of Birth * _____ Country of Birth * _____

☐ 3. PROOF OF IDENTITY (PoI)*

(Certified copy of <u>any one</u> of the following Proof of Identity [PoI] needs to be submitted)

☐ A- Passport Number _____ Passport Expiry Date D D — M M — Y Y Y Y
☐ B- Voter ID Card _____
☐ C- PAN Card _____
☐ D- Driving Licence _____ Driving Licence Expiry Date D D — M M — 2 0 Y Y
☐ F- NREGA Job Card _____
☐ Z- Others (any document notified by the central government) _____ Identification Number _____
☐ Z- Simplified Measures Account - Document Type _____ Identification Number _____

4. PROOF OF ADDRESS (PoA) *

☐ 4.1 CURRENT/PERMANENT/OVERSEAS ADDRESS DETAILS

(Certified copy of <u>any one</u> of the following Proof of address [PoI] needs to be submitted)

Address Type* ☐ Residence / Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified
Proof of Address * ☐ Passport ☐ Driving Licence ☐ UID
☐ Voter Identity Card ☐ NREGA Job Card ☐ Others _____
☐ Simplified Measures Account - Document Type _____

Address (For Permanent Address)

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

A1

☐ **4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS & Address Proof Required Compulsary**

☐ Same as Current / Permanent / Overseas Address Details (Aadhar / Passport / Voter ID / Driving Licence)

Line 1* _____

Line 2* _____

Line 3* _____ **City / Town / Village*** _____

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

☐ **4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES*** **(Applicable if section 2 is ticked)**

☐ **Same as Current / Permanent / Overseas Address details** ☐ **Same as Correspondence / Local Address details**

Line 1* _____

Line 2* _____

District* _____ **Pin/Post Code*** _____ **City / Town / Village*** _____

☐ **5. CONTACT DETAILS** **(All communication will be sent on provided Mobile No. / Email-ID)**

Tel. (Off) _____ **Tel. (Res.)** _____ **Mobile** _____

FAX _____ **Email ID** _____

☐ **6. DETAILS OF RELATED PERSON**

☐ **Addition of Related Person** ☐ **Deletion of Related Person** **KYC Number of Related Person (if available*)**

Related Person Type * ☐ **Guardian of Minor** ☐ **Assignee** ☐ **Authorized Representative**

	Prefix	**First Name**	**Middle Name**	**Last Name**
Name*				

(If KYC Number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY (PoI)* OF RELATED PERSON*

☐ A- Passport Number _____ Passport Expiry Date D D – M M – Y Y Y Y

☐ B- Voter ID Card _____

☐ C- PAN Card _____

☐ D- Driving Licence _____ Driving Licence Expiry Date D D – M M – 2 0 Y Y

☐ F- NREGA Job Card _____

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

☐ Z- Simplified Measures Account - Document Type _____ Identification Number _____

☐ **7. REMARKS (if any)**

Gross Annual Income Details Income Range Per annum (please tick any one)

☐ **Below 1 lac** ☐ **1 - 5 lac** ☐ **5 - 10 lac** ☐ **10 - 25 lac** ☐ **More than 25 lac**

8. APPLICANT DECLARATION

- **I hereby declare that the details furnished above are true and correct to the bes of my knowledge and belief and I undertake to inform you fo any changes. therin, immediately. In case any of the above information is found to be faise or untrue or misleading or misrepresenting. I am aware that I 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.**

Sign

Date : D D – M M – 2 0 Y Y **Place :** _____

9. ATTESTATION / FOR OFFICE USE ONLY (Self Attested)

Documents Received ☐ **Self Attested Document Copies Receive**

INSTITUTION DETAILS & KYC VERIFICATION CARRIED OUT BY

Name KK. SECURITIES LTD. **Code**

Date D D – M M – 2 0 Y Y

Emp. Name _____

Emp. Code _____

Emp. Designation _____

Emp. Branch _____

IN-PERSON VERIFICATION (IPV)
DOCUMENTS VERIFIED WITH ORIGINALS
CLIENT INTERVIEWED BY

Date : D D – M M – 2 0 Y Y

Employee/Sub-Broker/Ap Details :

Name: _____

Code: _____

Designation: _____

Signature: _____

A2

KK SECURITIES LIMITED

Regd. Office : 76-77, Scindia House, Janpath, New Delhi-110001, Phones : 011-46890000 (25 Lines) Fax : 011-23723571

FATCA / CRS DECLARATION FOR INDIVIDUAL ACCOUNTS

Note - *The information in this section is being collected in order to comply with Foreign Account Tax Compliance Act (FATCA) requirements pursuant to amendments made to Income-tax Act, 1961 read with Income-tax Rules, 1962.*

For more information refer: http://www.incometaxindia.gov.in/dtaa & http://www.oecd.org

Section I **(All fields are mandatory)**

Particulars	Details of Account Holder
Client Code / Demat A/c Number / PAN	
Name of Account Holder	
Type of Address given at KYC KRA (Please Tick ✓)	(a) Residential ☐ (b) Business ☐ (c) Registered Office ☐
Country of Citizenship*	
Country of Birth*	
Place within the country of Birth	
Country of Tax Residence*	
DDPI / POA granted to a person outside India	Yes ☐ No ☐ *(if yes, please give detail in Section II)*
Address or telephone number outside India	Yes ☐ No ☐ *(if yes, please give detail in Section II)*

**** If your answer is other than 'INDIA', please fill Section II of the form, else go to declaration & acknowledgment***

Section II - Other information (Please fill in BLOCK LETTERS)

Please list below the details, confirming ALL countries of tax residency/ permanent residency/ citizenship and ALL Tax Identification Numbers

Country of Tax residency	Tax identification No	Tax identification document (TIN or functional equivalent)

It is mandatory to supply a TIN or functional equivalent (in case TIN not available) if the country in which you are tax resident issues such identifiers. If no TIN /functional equivalent is yet available or has not yet been issued, please provide an explanation below:

Declaration & Acknowledgement

I have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read along with the FATCA & CRS Instruction) and hereby confirm that the information provided by me on this Form is true, correct and complete. I hereby agree and confirm to inform **KKSL** for any modification to this information promptly, i.e., within in 30 days. I further agree to abide by the provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI).

Customer Signature _____		Date	

Terms and Conditions

The CBDT has notified Rules 114F to 114H, as part of the Income Tax Rules, 1962, which require Indian Financial Institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose for ensuring appropriate withholding from the folio (s)or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., **within 30 days**.

Please note that you may receive more than one request for information if you have multiple relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attached with this form.

In case investor has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, investor to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document **evidencing nationality or citizenship** (refer list below); **AND** 3. **Any one** of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite
Residence/mailing address in a country other than India	1. **Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and** 2. **Documentary evidence (refer list below)**
Telephone number in a country other than India	***If no Indian telephone number is provided*** 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; **and** 2. Documentary evidence (refer list below) ***If Indian telephone number is provided along with a foreign country telephone number*** 1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; **OR** 2. Documentary evidence (refer list below)
Standing instructions to transfer funds to an account maintained in a country other than India (other than depository accounts)	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; **and** 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

*** Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.**

Client Sign

_____

To,

Date : ……..

KK Securities Limited.
76-77, Scindia House, Janpath,
New Delhi-110001,PH.011-46890000

Dear Sir/Madam,

Sub: Adhaar Consent form.

I/We hereby submit voluntarily at my/our own discretion, the physical copy of Aadhaar card/physical e-adhaar/masked Aadhaar/offline electronic Aadhaar xml as issued by UIDAI (Aadhaar),to **KK Securities Limited** for the purpose of establishing my/our identity/address proof and voluntarily give my/our consent to open account/process instructions for the said purpose with **KK Securities Limited** in my/our name/s individual capacity/ies using my/our Aadhaar or as an authorized signatory in non-individual accounts and; hereby consent to **KK Securities Limited** for verification of my/our Aadhaar to establish its genuineness through Quick Response(QR)code embedded in the Aadhaar card or through such other acceptable manner as per UIDAI or under any Act or law from time to time. The consent and purpose of collecting Aadhaar has been explained to me/us in local language. **KK Securities Limited** has informed me/us that my/our Aadhaar submitted to the KKSL herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.

KK Securities Limited has informed me/us that this consent and my/our Aadhaar will be stored along with my/our account details within **KK Securities Limited.**

I/We hereby declare that all the information voluntarily furnished by me/us is true, correct and complete. I/We will not hold **KK Securities Limited** or any of its officials responsible in case of any incorrect information provided by me/us.

I am maintaining Trading/Demat Account number …….. with you. I request you to link my Aadhaar/UID number issued by the UIDAI, Government of India in my name with my aforesaid account. The particulars of the Aadhaar/ UID letter and trading/demat account are as under:

Client's Name:_____ Client's Sign _____