

Acknowledgement No.

☐ **NEW**    ☐ **CHANGE REQUEST** (Please tick ✓ the appropriate)

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

(Please tick ✓ the box on left margin of appropriate row where **CHANGE/CORRECTION** is required and provide the details in the corresponding row)

## KNOW YOUR CLIENT (KYC) APPLICATION FORM

(For Non-Individuals)

Photograph  
Please affix the  
recent passport  
size photograph and  
sign across it

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size photograph and  
sign across it

Please fill this form in **ENGLISH** and in **BLOCK LETTERS**

### A. IDENTITY DETAILS

<input type="checkbox"/> 1	Name of the Applicant																	
<input type="checkbox"/> 2a	Date of incorporation	D	D	M	M	Y	Y	Y	Y	2b.Place of incorporation								
<input type="checkbox"/> 3	Date of commencement of business									D	D	M	M	Y	Y	Y	Y	
4	a) PAN									<input type="checkbox"/> 4b.Registration No. (e.g. CIN)								
5	<b>Status (please tick any one):</b>																	
	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Private Limited Co.  <input type="checkbox"/> Public Ltd. Co.  <input type="checkbox"/> Body Corporate  <input type="checkbox"/> Trust  <input type="checkbox"/> Charities  <input type="checkbox"/> NGO's  <input type="checkbox"/> Others (please specify) _____ </div> <div> <input type="checkbox"/> Bank  <input type="checkbox"/> Government Body  <input type="checkbox"/> Non Government Organisation  <input type="checkbox"/> Defense Establishment  <input type="checkbox"/> Society  <input type="checkbox"/> LLP </div> <div> <input type="checkbox"/> Partnership  <input type="checkbox"/> FI  <input type="checkbox"/> FII  <input type="checkbox"/> HUF  <input type="checkbox"/> AOP  <input type="checkbox"/> BOI </div> </div>																	

### B. ADDRESS DETAILS

<input type="checkbox"/> 1	Correspondence Address																
		City/town/village								PIN Code							
		State								Country							
<input type="checkbox"/> 2	Contact Details	Tel. (Off.)								Tel. (Res.)							
		FaxNo.								Mobile No.							
		Email ID															
3	Specify the proof of address submitted for correspondence address																
<input type="checkbox"/> 4	Registered Address (if different from above)																
		City/town/village								PIN Code							
		State								Country							

### C. OTHER DETAILS

☐ 1 Name, PAN, residential address and photographs of Promoters/Partners/Karta/Trustees and whole time directors:

*If space is insufficient, enclose these details separately*

☐ 2 a) DIN of whole time directors:  
b) Aadhaar number of Promoters/Partners/Karta:

*[Illustrative format enclosed]*

### DECLARATION

I/We hereby declare that the details furnished above are true and correct to the best of my/ our knowledge and belief and I/we 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/we are aware that I/we may be held liable for it.

☐

Name & Signature of the Authorised Signatory(ies) \_\_\_\_\_

Date

D

D

M

M

Y

Y

Y

Y

### FOR OFFICE USE

☐ Originals verified and Self-Attested Document copies received

Signature of the Authorised Signatory → \_\_\_\_\_

Date

D

D

M

M

Y

Y

Y

Y

Seal/Stamp of the Branch

**Details of Promoters/ Partners/ Karta/ Trustees and Whole time directors forming a part of Know Your Client (KYC)**

**Application Form for Non-Individuals\***

Name of the Applicant

PAN No of the Applicant

Sr. No.	Name	Relationship with Applicant (i.e. promoters, whole time directors etc.)	PAN	Residential/ Registered Address	DIN/UID	Photograph
1						
2						
3						
4						

\*Use additional sheets, if required

**Name & Signature of the Authorised Signatory(ies)**

**Date**

**FOR OFFICE USE**

In-Person Verification of Karta of HUF / Authorised Partners of Partnership Firm / Authorised persons of Association of Persons / Authorised Trustees and Authorised Signatories of Corporates done.

**Signature of the**

**Authorised Signatory:** \_\_\_\_\_

**Name :** \_\_\_\_\_

**Designation :** \_\_\_\_\_ **Employee Code:** \_\_\_\_\_

**Organizations:** ☐ ASL ☐ Axis Bank Ltd.

**Date**

**Seal/Stamp of the Branch**

<b>KRA-KYC</b> (dully filled & signed by the authorized signatories as per mode of operation given in Board Resolution)
<b>Pan Card</b> (in the name of Firm)
<b>Address Proof (in the name of Firm – Any one) – For Registered Office as well as Address for Communication</b> >Bank Account Statement/Passbook – Not more than 3 months old >Utility bills like Telephone Bill (only land line), Electricity bill – Not more than 3 months old.
<b>Copy of Memorandum and Articles of Association / Partnership Deed / Trust deed / Societies by Laws</b> (including Copy of Registration Certificate & Certificate of Incorporation)
<b>Balance Sheet for last 2 financial years</b> (Submit Annual Balance Sheet every year)
<b>Latest Net worth Certificate</b> (should not be older than one year)
<b>Copy of latest Shareholding pattern</b> including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the Company Secretary/Whole Time Director/MD (to be submitted every year)
<b>Copy of the Resolution (On Letter Head) of Board of Directors approving</b> i) participation in equity/derivatives/currency trading & naming authorized persons for dealing in securities – For opening of Trading Account ii) Opening and operations of Demat account along with clear mode of operation
<b>List of Directors</b> - with Name, PAN, Designation, DIN & Photographs – On Letter Head
<b>Photograph of Whole time Directors /2 Directors</b> in charge of day to day operations/ Individual promoters holding 5% or more in the shareholding (Should be attached to the form & KRA, and has to be signed across with Company Stamp) - On Letter Head
<b>List of Authorised Signatories</b> - with Name, Designation, Specimen Signature & Signed across photographs - On Letter Head
<b>Proof of Identity of Authorized Signatories/Whole Time Directors/2 Directors in charge of day to day operations –</b> *PAN Card with photograph (mandatory)
<b>Proof of Address (POA) of Authorized Signatories/Whole Time Directors/2 Directors in charge of day to day operations – Any one</b> Passport/ Voters Identity Card/ Driving License/Aadhar Card.
<ul style="list-style-type: none"> <li>- All the documents must be             <ul style="list-style-type: none"> <li>o Attested / certified under relevant stamp viz Authorized Signatory/ Partner etc.</li> <li>o 'Verified with Original' by Axis Bank/ Axis Securities Ltd employee</li> <li>o If AOF is downloaded , take clear print out and get the same filled &amp; signed by the applicant on all pages with clear Rubber stamp</li> </ul> </li> <li>- Submitted copies must be clear &amp; readable</li> </ul>

### Checklist - HUF Account

<b>Non-Individual KRA-KYC Form</b> (dully filled & signed by the Karta with Stamp)
<b>Pan Card</b> (in the name of HUF)
<b>Address Proof (in the name of HUF – Any one) – For Registered/ Correspondence as well as Permanent Address</b> * Bank Account Statement/Passbook – Not more than 3 months old *Utility bills like Telephone Bill (only land line), Electricity bill – Not more than 3 months old.
<b>Letter of Authorisation/ Declaration for Karta of HUF</b> (with list & sign of co-parceners) (Format available in AOF)
<b>Proof of Identity of Karta –</b> *PAN Card with photograph (mandatory)
<b>Proof of Address (POA) of Karta – Any one</b> * Aadhaar Card (First 8 digits of number must be masked) * Passport/ Voters Identity Card/ Driving License (Valid as on date) * Bank Account Statement/Passbook – Not more than 3 months old * Utility bills like Telephone Bill (only land line), Electricity bill, Piped Gas Bill – Not more than 3 months old.
<ul style="list-style-type: none"> <li>- All the documents must be             <ul style="list-style-type: none"> <li>o Attested / certified under relevant stamp viz Authorized Signatory/ Partner/ Karta etc.</li> <li>o 'Verified with Original' by Axis Bank/ Axis Securities Ltd employee</li> </ul> </li> <li>-</li> </ul>