



# INNOVATE SECURITIES PVT. LTD.

1st Floor, "Devashish", 39, Sardar Patel Nagar, Nr. Nest Hotel,  
Navrangpura, Ahmedabad - 380 006.



**For Individuals**

Application No.

## Central KYC Registry [Know Your Customer (KYC) Application Form]

DP SEBI Regn. No. : IN-DP-CDSL-239-2004

### 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-YYY format.
- D] Please read section wise detailed guidelines / instructions at the end.
- E] List of State /U.T. Code as per Indian Motor Vehicle Act. 1988 is available at the end.
- F] List of two character ISO 3166 country codes is available at the end.
- G] KYC number of applicant is mandatory for update application.
- H] For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

### For Office Use only.

Application Type\*  New  Update

(To be filled by financial institution) KYC Number  (Mandatory for KYC update request)

Account Type\*  Normal  Simplified (for low Risk Customers)  Small

### 1. PERSONAL DETAILS (Please refer instruction A at the end)

### A IDENTITY DETAILS

	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="checkbox"/> M-Male	<input type="checkbox"/> F-Female	<input type="checkbox"/> T-Transgender	
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others	
Citizenship*	<input type="checkbox"/> IN-Indian	<input type="checkbox"/> Others (ISO 3166 Country Code <input type="text"/> )		
Occupation Type*	<input type="checkbox"/> S-Service ( <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector )	<input type="checkbox"/> O-Others ( <input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student )		
	<input type="checkbox"/> B-Business			
	<input type="checkbox"/> X-Not Categorised			

Signature / Thumb Impression

**PHOTO**

### 2. TICK IF APPLICABLE Residence for Tax Purposes in Jurisdiction(s) Out Side INDIA (Please refer instruction B at the end)

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

ISO 3166 Country Code of Jurisdiction of Residence\*

Tax Identification Number of equivalent (If issued by Jurisdiction)\*

Place / City of Birth\*  ISO 3166 Country Code of Birth\*

### 3. PROOF OF IDENTITY (Pol)\* (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity (Pol) needs to be submitted)

A-Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
B-Voter ID Card	<input type="text"/>		
C-PAN Card	<input type="text"/>		
D-Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
E-UID (Aadhar)	<input type="text"/>		
F-NREGA Job Card	<input type="text"/>		
Z-Others (any document notified by the central Government)	<input type="text"/>	Identification Number	<input type="text"/>
S-Simplified Measures Account - Document Type Code	<input type="text"/>	Identification Number	<input type="text"/>

### 4. PROOF OF ADDRESS (PoA)\* / ADDRESS DETAILS

#### 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end)

(Certified copy of any one of the following Proof of Identity (PoA) needs to be submitted)

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

Proof of Address\*  Passport  Driving Licence  UID (Aadhar)  Voter Identity Card

NREGA Job Card  Others

Simplified Measures Account - Document Type Code

#### Address :

Line 1\*

Line 2\*

Line 3\*  City / Town / Village\*

District\*  Pin / Post Code\*  State / U.T. Code\*  ISO 3166 Country Code\*

**4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS\*** (Please refer instruction E at the end)

Same as Current / Permanent / Overseas Address Details (In Case of Multiple correspondence / local address, please fill 'Annexure A1')

Line 1\*   
 Line 2   
 Line 3  City / Town / Village\*   
 District\*  Pin / Post Code\*  State / U.T. Code\*  ISO 3166 Country Code\*

**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   
 Line 3  City / Town / Village\*   
 District\*  Pin / Post Code\*  State / U.T. Code\*  ISO 3166 Country Code\*

**5 CONTACT DETAILS** (As communication will be sent on provided Mobile No. / Email ID) (Please refer Instruction F at the end)

Tel. (Off.)   Tel. (Res.)   Mobile    
 FAX   Email ID

**6 DETAILS OF RELATED PERSON** (In case of additional related persons, Please fill 'Annexure B1' (Please refer Instruction G at the end)

Addition of Related Person  Deletion of Related Person  KYC Number of Related Person (If available\*)   
 Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative   
 Name\*       
(If KYC number and name are provided, below details of section 6 are optional)

**PROOF OF IDENTITY (PoI)\* of RELATED PERSON\*** (Please see instruction H at the end)

A-Passport Number  Passport Expiry Date   
 B-Voter ID Card   
 C-PAN Card   
 D-Driving Licence  Driving Licence Expiry Date   
 E-UID (Aadhar)   
 F-NREGA Job Card   
 Z-Others (any document notified by the central Government)  Identification Number   
 S-Simplified Measures Account - Document Type Code  Identification Number

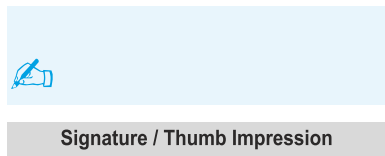
**7 REMARKS** (If any)

**8 APPLICANT DECLARATION**

\* I hereby declare that the detail 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.

\* I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date :  Place :




**9 ATTESTATION AND IN PERSON VERIFICATION (IPV) DETAIL / FOR OFFICE USE ONLY**

**Documents Received**  Certified Copies (Self Attested)  (Original Verified) true Copies of Document's

IPV and C - KYC VERIFICATION CARRIED OUT BY

INSTITUTION DETAILS

DATE  
 Emp. Name  
 Emp. Code  
 Emp. Designation  
 Emp. Branch  
 \_\_\_\_\_  
 [Sign. of Person who has done IPV / Attestation]

Name : **INNOVATE SECURITIES PVT. LTD.**  
 C - KYC Code : **IN0448**  
 CVL KRA POS CODE : **1100033800**  
  
**INNOVATE SECURITIES PVT. LTD.**  
 1st Floor, "Devashish", 39, Sardar Patel Nagar,  
 Near Nest Hotel, Navrangpura, Ahmedabad - 380 006.