

Know Your Client (KYC)**Annexure (For Non- Individuals Only)**

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also

**CDSL VENTURES LIMITED**

....Exploring New Horizons



Application Number:

Application Type*: ☐ New KYC ☐ Modification KYC**1. Identity Details of Related Person** (please refer guidelines overleaf)

PAN*

Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof)

Maiden Name* (if any)

Fathers/Spouse's Name*

Date of Birth*

Gender*

☐ Male☐ Female☐ Transgender

Nationality*

☐ Indian☐ Other

Applicant Photo

Related Person Type*

☐ Director☐ Promoter☐ Karta☐ Trustee☐ Partner☐ Court Appointed Official Proprietor☐ Beneficiary☐ Authorized Signatory☐ Beneficial Owner☐ Power of Attorney Holder☐ Others (please specify)

DIN: (mandatory if the related person is Director)

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

☐ A — Aadhaar Card

XXXX XXXX

☐ B — Passport Number

(Expiry Date)

☐ C — Voter ID Card☐ D — Driving License

(Expiry Date)

☐ E — NREGA Job Card☐ F — NPR☐ Z — Others

(any document notified by Central Government)

Identification Number

2. Address Details* (please refer guidelines overleaf)**A. Correspondence/ Local Address***

Line 1*

Line 2

Line 3

City/Town/Village*

District*

Pin Code*

State*

Country*

Address Type*

☐ Residential/Business☐ Residential☐ Business☐ Registered Office☐ Unspecified

Applicant e-SIGN

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____
Line 2 _____
Line3 _____
City/Town/Village* _____ District* _____ Pin Code* _____
State* _____ Country* _____
Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Proof of Address* (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

☐ A — Aadhaar Card XXXX XXXX ____
☐ B — Passport Number _____ (Expiry Date) ____
☐ C — Voter ID Card _____
☐ D — Driving License _____ (Expiry Date) ____
☐ E — NREGA Job Card _____
☐ F — NPR Letter _____
☐ Z—Others _____ (any document notified by Central Government)
Identification Number _____

3. Contact Details

Email ID _____
Mobile No. _____
Tel (Off) _____ Tel (Res) _____

4. Applicant Declaration

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

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address.

DATE: ____ (DD-MM-YYYY)

PLACE: _____

Applicant e-SIGN

Applicant Wet Signature

5. For Office Use Only

KYC carried out by*

Intermediary Details*

KYC Date ____

Emp. Name _____

Emp. Code _____

Emp. Designation _____

☐ Self certified document copies received (OVD)☐ True Copies of documents received (Attested)

Employee Signature and Stamp

Institution Name and Stamp

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 Applicant _____ PAN of the Applicant _____

Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph

Name & Signature of the Authorised Signatory(ies)

Date dd / mm / yyyy



Place for
Intermediary Logo