CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form Individual Important Instructions A) Fields marked with '*' are mandatory fields. 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. B) Please fill the form in English and in BLOCK letters. C) Please fill the date in DD-MM-YYYY format. G) KYC number of applicant is mandatory for update application H) For particular section update, please tick $(\mbox{\ensuremath{\checkmark}})$ in the box available before the D) Please read section wise detailed guidelines / instructions []]]/FN(section number and strike off the sections not required to be updated. at the end. CO-OPERATIVE BANK LTD (A Scheduled Multi-State Bank) Application Type* ■ New Update For office use only (Mandatory for KYC update request) (To be filled by financial institution) KYC Number Account Type* ☐ Simplified (for low risk customers) Normal 1. PERSONAL DETAILS (Please refer instruction A at the end) Last Name Prefix First Name Middle Name ☐ Name* (Same as ID proof) Maiden Name (If any*) Father / Spouse Name* Mother Name* Date of Birth* **РНОТО** Gender* ☐ F- Female ☐ T-Transgender ☐ M- Male Marital Status* ☐ Married Unmarried ☐ Others Citizenship* □ IN- Indian ☐ Others (ISO 3166 Country Code Residential Status* ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin Occupation Type* ☐ S-Service (☐ Private Sector ☐ Public Sector ☐ Government Sector) ☐ Self Employed ☐ Retired ☐ Housewife □ O-Others (□ Professional ☐Student) □ B-Business ☐ X- Not Categorised □ 2. TICK IF APPLICABLE □ RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE 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 or 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[PoI] needs to be submitted) A- Passport Number Passport Expiry Date □ B- Voter ID Card Visa Validity ☐ C- PAN Card Form 60/61 Yes Nο □ D- Driving Licence **Driving Licence Expiry Date** ☐ E- UID (Aadhaar) ☐ F- NREGA Job Card Z- Others (any document notified by the central government) Identification Number ☐ S- Simplified Measures Account - Document Type code Identification Number ☐ 4. PROOF OF ADDRESS (PoA)* 4.1 CURRENT / PERMANENT / OVERSEAS ADDRESS DETAILS (Please see instruction D at the end) (Certified copy of any one of the following Proof of Address [PoA] needs to be submitted) Address Type* Residential / Business ☐ Residential Business ☐ Registered Office ☐ Unspecified Proof of Address* ☐ Passport □ Driving Licence ☐ UID (Aadhaar) ☐ Voter Identity Card ☐ NREGA Job Card Others ☐ Simplified Measures Account - Document Type code

City / Town / Village*

ISO 3166 Country Code*

State / U.T Code*

Pin / Post Code*

Address Line 1* Line 2

Line 3
District*

4.2 CORRESPONDEN	CE / LOCAL ADDRESS	S DETAILS * (Please see instr	ructio	on E at th	e end)										
☐ Same as Current / Perr	nanent / Overseas Add	ress details (In case of multip	ole co	rrespond	dence /	local	addres	sses, p	lease f	ill 'Annex	ure A1')				
Line 1*												\Box			
Line 2															
Line 3								City / T	own /	Village*		$\top \top$	\Box		
District*		Pin / Post Code*			s	tate /	U.T (Code*] ISC	3166 0	Country	y Code	е*	
4.3 ADDRESS IN THE	JURISDICTION DETAI	LS WHERE APPLICANT IS R	RESIE	DENT OL	JTSIDE	INDI	A FOR	R TAX F	PURPO	SES* (Ap	plicable	if section	on 2 is	ticked)	
☐ Same as Current / Perr	nanent / Overseas Add	ress details		Same as	Corres	ponde	ence /	Local A	Addres	s details					
Line 1*												$\perp \perp$	$\perp \!\!\!\! \perp$		
Line 2					\perp							Щ.	$\perp \!\!\!\!\perp$		Щ
Line 3						Щ_	c	ity / To	own /	Village*		Ш		Щ	
State*			Z	IP / Pos	t Cod	e*				ISO	3166 C	ountry	Code	*	
☐ 5. CONTACT DETAIL	_S (All communicati	ons will be sent on provide	ed M	obile no	. / Em	ail-ID) (Plea	ase re	fer ins	truction	F at the	end)			
Tel. (off)		Tel. (Res)						N	/lobile			\top	\top		П
FAX		Email ID				\perp						$\pm \pm$	$\pm \pm$		Ħ
	TED DEDOON "		' '		' '									' '	
Addition of Related Perso		ed Person KYC Numb							istruction	at the	ena)				
Related Person Type*	Guardian of min			Related				Repres	sentati	VA					
Related Ferson Type	Prefix	First Name	,				Name	Kepre	seniali	ve		Last N	Jame		
Name*												TI			
	(If KYC number and	name are provided, below det	tails c	of section	6 are	ptiona	al)								
DDOOF OF IDENTITY II		ON* (Please see instruction (H) a	at tha	and)											
_			at tile	enu)	D		-	D-4	_			7 5	Tolo		
A- Passport Number							•	ry Date	е	DD	- IVI IV		YY	Y	
☐ B- Voter ID Card					VIS	a Valid	dity			DD	- M N		YY	Υ	
☐ C- PAN Card					For	m 60/	61			Ye	es	No			
□ D- Driving Licence					Driv	ing L	icenc	е Ехрі	iry Da	te D D	- M N	/ Y	YY	Υ	
☐ E- UID (Aadhaar)															
☐ F- NREGA Job Card			1												
Z- Others (any docum	ent notified by the cent	ral government)	_ 			Ide	entific	ation	Numh	er 🗔		\top	\top		
S- Simplified Measur	•	, ,	1					ation				$\pm \pm$	++		Н
·	☐ 7. REMARKS (if any)														
	,, 														
							$\perp \perp$		 			$+\!+\!$	++		Щ
			Щ		Щ		Щ		Щ		Ш	<u></u>	 		Щ
													$\perp \perp$		
☐ 8. APPLICANT DE	CLARATION														
		orrect to the best of my knowledge and and to be false or untrue or misleading or													
for it.	y of the above information is loo	ind to be false of diffide of filisleading of	msrep	resenting, r	aiii awai	z ulat i ii	nay be n	eiu iiabie							
		istry through SMS/Email on the above re	gistere	ed number/e	mail addr	ess.									
My Personal / KYC details m	ay be shared with Central K					_			4	Signature	/ Thumb I	mpress	ion of I	Applica	nt
Date : DD - MM		Place :													
9. ATTESTATION / F	OR OFFICE USE OF	VLY													
Documents Received	☐ Certified Copies														
KYC VE	RIFICATION CARRIED	OUT BY						INST	TTUTIC	N DETAIL	S				
Date				Name]
Emp. Name			1	Code		i							$\overline{}$		์
Emp. Code]	2500											
Emp. Designation]												
Emp. Branch															
Linp. Didnon															
									[Institut	ion Stamp]					
	[Employee Signature]														

Customer	General	Staff	Minor	Senior Citizen	
Constitution	Share Holder	NRI	Others please specif	y	

Other Details					
Religion	□ Hindu □ Muslim □ Christian □ Sikh □ Jain				
Educational Qualification	 □ Non-matricualtion □ SSC/HSC □ Undergraduate □ Gradute □ Postgraduate (General) □ Post Graduate (Professional) 				
Occupation	□ Salaried □ Self Employed □ Professional □ Politician □ Housewife □ Retired □ Student □ Dependent □ Others				
If salaried, employed with	□ Public Limited Company □ Private Limited Company □ Others □ Government Employee □ Bank Employee				
Name of the company					
Designation If Self-employed, profession	☐ CA ☐ Engr. ☐ Doctor ☐ Trader ☐ Lawyer ☐ Consultant ☐ Other				
If in business	□ Public Limited □ Private Limited □ Proprietorship □ Partnership □ Others				
Income Group (p.a.)	□ <50,000				
Residence	☐ Ownership ☐ Rental ☐ Ancestral ☐ Company Provided ☐ Purchased against loan				
Life Insurance Value	□ upto 2 lakhs □ upto 5 lakhs □ above 5 lakhs				
Existing loans Assets Ownership	☐ Vehicle ☐ Home ☐ Personal ☐ Education ☐ Business				
Consumer durable ownership:	☐ Computer ☐ Microwave ☐ LCD Television				
	☐ Digital Camera ☐ DVD Player ☐ Home Theatre System				
	☐ Projection Television ☐ Airconditioner				
Vehicle Ownership:	☐ Car ☐ Two Wheeler ☐ None ☐ Both				
Car Model & Make:					
Banking Relations with other	Banks:				
Name of the Bank	A/c No.				
Name of the Bank	A/c No.				
KYC Certification & Risk cat	regorization.				
We certify that after having done the necessary Customer due diligence viz identification and verification of the customer / beneficial owner on the basis of reliable and independent information, data or documentation, we are satisfied of the KYC credentials of the customer in terms of our extant KYC Policy.					
We certify that the identity of the customer does not match with any person with known criminal background or with banned entities such as individual terrorists or terrorist organization etc.					
	ategory in the context of money laundering risk / terrorist financing risk based on the of funds, nature of occupation / business, social / financial status.				
RISK LEVEL LOW MED	DIUM HIGH				
	been signed by the applicant in my presence.				

Date: ___

Signature of Bank Official

Place:___



Annexure 1 - FATCA-CRS Self Certification Form Individual - New Accounts

1.	Name of the acco	ount holder	
2.	Aadhaar number	r (optional)	
3.	Nationality		
4.	City of birth		
5.	Country of birth		
6.	Occupation Type	2(Service, Business, Others - Please specify)
7.	Residence addres	ss for tax purposes (include City, Stat	e, Country & Pin code)
	☐ Same as Ove	rseas Address 🔲 Same as Perma	nent Address (Please tick anyone)
8.	Address Type	🗌 Residential 🔲 Business 🔲 Regi	stered Office (Please tick anyone)
9.	Tax residence de	claration - please tick any one, as app	licable to you.
		sident of India and not resident of an	
	☐ I am a tax re	sident of the country/ies mentioned i	n the table below
Plea	se indicate ALL the	countries in which you are a resident f	or tax purposes and the associated Tax ID Number below:
	Country#	Tax Identification Number%	Identification Type (TIN or Other%, Please specify
ŀ			_
#To	also include USA	where the individual is a citizen/gree	L card holder of USA
		ation Number is not available, kindly	
		3	if the country in which you are tax resident issues such
			ed, please provide an explation and attach this to the form.
		Declar	
I, _			of passport number residing
			hereby declare that: I am
neit	her a citizen of US	A nor a resident of USA for tax purpo	ses despite being my place of birth is in USA (by persons
havi	ing U S birthplace,	, but not a U S citizen/tax resident)	
		Ol	R
I am			r country other than India even though
		e/mailing address/telephone number	
	b) I have a stan	ding instruction to an account mainta	ined outside India
(By	persons having for	reign country Indicia, but are tax resi	dents of India)
		Certific	ation
here	by confirm that the	e information provided by me/us on t	Form (read along with the FATCA/CRS instructions) and his Form is true, correct, and complete. I/We also confirm and conditions below and hereby accept the same.
Nan	ne:		
Sign	nature :	I	Place :
Date	e:		
		1 - 14.4	

FATCA-CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which rules require Indian financial Institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account 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 of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there by 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 Citizencredit Co-op. Bank Ltd. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

List of two – digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code
Andaman & Nicobar	AN
Andhra Pradesh	AP
Arunachal Pradesh	AR
Assam	AS
Bihar	BR
Chandigarh	CH
Chattisgarh	CG
Dadra and Nagar Haveli	DN
Daman & Diu	DD
Delhi	DL
Goa	GA
Gujarat	GJ
Haryana	HR

State / U.T	Code
Himachal Pradesh	HP
Jammu & Kashmir	JK
Jharkhand	JH
Karnataka	KA
Kerala	KL
Lakshadweep	LD
Madhya Pradesh	MP
Maharashtra	MH
Manipur	MN
Meghalaya	ML
Mizoram	MZ
Nagaland	NL
Orissa	OR

State / U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarakhand	UA
West Bengal	WB
Other	XX

List of ISO 3166 two- digit Country Code

Country	Country	Country	Country	Country	Country	Country	Country
***	Code		Code		Code	0.1.10	Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa Andorra	AS AD	Equatorial Guinea Eritrea	GQ ER	Macao Macedonia, the former Yugoslav Republic of	MO MK	Sao Tome and Principe Saudi Arabia	ST SA
Angola	AO AI	Estonia Ethiopia	EE ET	Madagascar Malawi	MG MW	Senegal Serbia	SN RS
Anguilla Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	ВН	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	10	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Denmark Djibouti Dominica	DK DJ DM	Lebanon Lesotho Liberia	LB LS LR	Saint Kitts and Nevis Saint Lucia Saint Martin (French part)	KN LC MF		

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling individual KYC Application Form

General Instructions:

- 1 Fields marked with '*' are mandatory fields.
- 2 Tick '✓' wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick '\$\sigma\$' in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of 'Small Account type' only personal detail at section number 1 and 2, photograph, silf-certification required.

A Clarification / guidelines on filling 'Personal Details'section

- 1 Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

3 Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1 Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number).

C Clarification / Guidelines on filling 'Proof of Identity (POI)' section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification / reference number if 'Z-Others (any document notified by the central government)' is ticked.
- 3 In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code	Description
01	Identity card with applicant's photograph issued by Central / State Government Departments, Statutory/Regulatory Authorities, Public Sector undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
02	Letter issued by a gazetted officer, with a duly attested photograph of the person.

D Clarification / Guidelines on filling 'Proof of Address (POA) - Current / Permanent / Overseas Address details' section

- 1 POA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2 State/ U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water
02	Property or Municipal Tax receipt
03	Bank account or Post Office savings bank account statement.
04	Pension or family pension payment orders (PPOs) issued to retired employees by Government departments, or Public Sector Undertaking they contain the address.
05	Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory be public sector undertakings, scheduled commercial banks, financial Institutions and listed companies. Similarly, leave and license agreen with such employers allotting official accommodation.
06	Documents issued by Government departments of foreign jurisdiction and letter issued by Foreign Embassy or Mission in I

E Clarification / Guidelines on filling 'Proof of Address (POA) - Correspondence / Local Address details' section

- 1 To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2 In case of multiple correspondence / local addresses, Please fill 'Annexure A1'.

F Clarification / Guidelines on filling 'Contact details' section

- 1 Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2 Do not add '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Related Person details' section

1 Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details - Proof if Identity (Pol) of Related Person' section

1 Mention identification / reference number if 'Z- Others (any document notified by the central government) is ticked.