

**CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual**

**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) 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** (To be filled by 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** (Please refer instruction **A** at the end)

Name\* (Same as ID proof) Prefix  First Name  Middle Name  Last Name

Maiden Name (If any\*)

Father / Spouse Name\*

Mother Name\*

Date of Birth\*  DD -  MM -  YYYY

Gender\*  M- Male  F- Female  T-Transgender

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)  O-Others ( Professional  Self Employed  Retired  Housewife  Student)  B-Business  X- Not Categorised

**PHOTO**

Signature / Thumb Impression

**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 (PoI)\*** (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  DD -  MM -  YYYY

B- Voter ID Card

C- PAN Card

D- Driving Licence  Driving Licence Expiry Date  DD -  MM -  YYYY

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  please specify

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\*



## ALL EXCHANGES RUNNING ACCOUNT AUTHORISATION - VOLUNTARY

(Kindly note that these additional clause(s)/ documentation(s) are voluntary and at the discretion of the stock broker/ trading member and the client. The same are required in order to ensure running on a day to day basis between the stock broker/ trading member and the client. The client need not execute this document if he / she does not wish to. The client has the right to terminate the document)

To,  
**NDA Securities Ltd.**  
1002A, Arunachal, 19, Barakhamba Road,  
New Delhi-110001

Date \_\_\_\_\_

Sir(s),

### Re: Running Account Authorisation

We are aware that as per the SEBI/ Exchange requirements, the settlement of funds/securities shall be done within one working day of the payout. However, we request you to kindly keep my account as a running account, which will entail that all securities and funds due to us on payout shall be withheld with yourselves and given to us only on demand. Since the transactions are very frequent for purchase and sale of Securities, therefore I/We authorise you to retain my/our payment of funds and securities to meet our/my margin and pay-in requirement. I/We will advise you to release the funds and securities as per my/our requirement from time to time. I request you to retain credit balance in any of my account and to use the idle funds towards my margin/future obligations at the exchange unless I instruct you otherwise. I request you to retain securities in your demat account for our margin/ future obligation at both the exchanges unless I instruct you to transfer the same to my account. I request you to please settle my statement of account for funds and securities on following intervals unless I instruct you otherwise.

Quarterly basis

Monthly basis

**At the time of periodical settlement of funds and securities, I further authorized you to please retain funds up to Rs. 10,000/- or such amount as specified by regular, in my trading account for the smooth running of the trading and to avoid administrative of operational difficulties for transfer of funds and securities.**

**I hereby state that all the above declaration will be valid until and unless I revoke the authorization in writing and I can revoke the same at any time.**

### I understand that :

As per SEBI requirements, the authorization shall be renewed at least once a year and shall be dated and the manner of renewal will be as per the policies on your website **ndaindia.com** which under all circumstances shall be conforming to the norms prescribed by SEBI/ Exchanges:

1. As per SEBI requirements, the authorization shall be renewed at least once a year and shall be dated.
2. The manner of renewal will be as per the policies on your website **ndaindia.com** which under all circumstances shall be conforming to the norms prescribed by SEBI/ Exchanges.
3. We can revoke this running account authorization at any time
4. You shall transfer the funds / securities lying in our credit within one working day of the request if the same are lying with you and within three working days from the request if the same are lying with the Clearing Member/ Clearing Corporation

Thanking you

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

Client Code : \_\_\_\_\_



\_\_\_\_\_  
(Signature of Client)

**Note:** The authorization shall be signed by the client only and not by any authorised person on his behalf or any holder of the Power of Attorney.

**CLIENT DECLARATION ABOUT MOBILE NO. / EMAIL ID**

To,  
**NDA Securities Limited**  
1002A, Arunachal, 19, Barakhamba Road,  
New Delhi-110001

Date \_\_\_\_\_

Dear Sir,

**Sub: Declaration about E- mail ID and Mobile No.**

**Ref: Existing/ New Client Code** \_\_\_\_\_

I/We hereby request you to update the Mobile No. and E-mail ID number for sending SMS & Other Communication including but not limited to Contract Notes pertaining to my/our Trading Account opened with you for trading in various segments of exchanges.

**Mobile Number:** \_\_\_\_\_

**Email ID. :** \_\_\_\_\_

I/we do hereby declare that the aforesaid details pertain to me/us or my/ our family members


(means Self  , Spouse  , Dependent Children  and Dependent Parents  only. The detail of which is given below:

S.No.	Client Name	Trading Code (UCC)

You can register the same to Exchange (s) or register null details on UCC/ UCI platforms. The information sent/ communicated on the aforesaid email ID & or mobile number shall be deemed to be due intimation to me/us in full discharge of your obligations as part of services rendered with respect to my/our trading account.

I/ We further undertake that the said declaration shall be valid and shall apply unless and until I/We communicate in writing about any changes therein to you at registered address to The Compliance Officer, NDA Securities Limited, 1002A, Arunachal, 19, Barakhamba Road, New Delhi-110001. I/We hereby undertake to indemnify you and shall keep you indemnified against all losses, damages and actions which may suffer or face as a consequence of you acting on my/ our this request and or my/ our failure to inform you in writing about the change.

Thanking you,  
Yours faithfully,

 \_\_\_\_\_

**Signature of Client**

Name of Client \_\_\_\_\_

