



Sangli Urban Co. Op. Bank Ltd. Sangli

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Firm/Company/HUF/ Societies/Trust/AOP

'SUB' का साथ, आपका विकास!

Know Your Customer (KYC) Application Form - Controlling Person / Related Person

Controlling Person

KYC No. of Controlling Person

Type of Control*

- In case of legal Person: Ownership, Other Means, Senior Managing Officials
In case of Trust: Settlor, Trustee, Protector, Beneficiary, Other
In case of other Legal Arrangement: Settlor-Equivalent, Trustee-Equivalent, Protector-Equivalent, Beneficiary-Equivalent, Other-Equivalent

Related Person

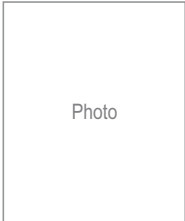
KYC No. of Related Person

Related Person Type*

- In case of legal Person: Director, Promoter, Karta, Trustee, Partner, Authorised Signatory, Court Appointed Official, Beneficiary

Personal Details

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 PAN Number
Gender* Male Female Transgender
Marital Status* Married Unmarried Others
Citizenship* Indian Others (Country)
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 Agriculturist X-Not Categorised
Politically Related * Yes No
Annual Family Income* Below 3 lakhs 3 lakhs - 5 lakhs 5 lakhs - 10 lakhs Above 10 lakhs
Religion* Cast Sub-Cast
Educational Qualification
Name of any other Organization if working



Additional Details - Residence for Tax purpose in jurisdiction(s) outside India

Residence Country*
Tax Identification Number or equivalent (if issued by jurisdiction)
Place / City of Birth* Country Birth*

Proof of Identity

A-Passport	<input type="text"/>	Passport Expiry Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-UID (Aadhaar)	<input type="text"/>								
F-NREGA Job Card	<input type="text"/>								
Z-Others (any document notified by the Central Government)	<input type="text"/>	Identification No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
S-Simplified Measures Account - Document Type Code	<input type="text"/>	Identification No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Proof of Address

Permanent Address

Certified copy of any one of the following proof of address (POA) needs to be submitted)

Address Type*	<input type="checkbox"/> Residential / Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business	<input type="checkbox"/> Registered Office	<input type="checkbox"/> Unspecified
Proof of Address*	<input type="checkbox"/> Passport	<input type="checkbox"/> Driving Licence	<input type="checkbox"/> UID (Aadhaar)		
	<input type="checkbox"/> Voter ID Card	<input type="checkbox"/> NREGA Job Card	<input type="checkbox"/> Others		
	<input type="checkbox"/> Simplified Measures Account - Document Type Code	<input type="text"/>			

Address proof Document No.*

Address proof expiry date

Address

Line 1*	<input type="text"/>				
Line 2*	<input type="text"/>				
Line 3*	<input type="text"/>				
District	<input type="text"/>	State	<input type="text"/>	Country*	<input type="text"/>
Pin / Post Code*	<input type="text"/>				

Correspondence / Local Address

Line 1*	<input type="text"/>				
Line 2*	<input type="text"/>				
Line 3*	<input type="text"/>				
District	<input type="text"/>	State	<input type="text"/>	Country*	<input type="text"/>
Pin / Post Code*	<input type="text"/>				

Address In The Jurisdiction Details Where Applicant Is Resident Outside India For Tax Purpose

Line 1*	<input type="text"/>				
Line 2*	<input type="text"/>				
Line 3*	<input type="text"/>				
District	<input type="text"/>	State	<input type="text"/>	Country*	<input type="text"/>
Pin / Post Code*	<input type="text"/>				

Contact Details

Tel. (Off.)	<input type="text"/>	-	<input type="text"/>	Tel. (Res)	<input type="text"/>	-	<input type="text"/>	Mobile	<input type="text"/>	-	<input type="text"/>
FAX	<input type="text"/>	-	<input type="text"/>	Email ID	<input type="text"/>						

APPLICANT 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 misrepresenting I/We am/are aware that I/we may be held liable for it.
- My/our personal KYC details may be shared with Central KYC Registry.
- I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email ID.
- I/We hereby authorise bank to send notice and other correspondence at my correspondence address as currently I/We are staying at correspondence address. In case of any change in correspondence address, I/We agree to inform you the change in address within 15 days of address change.

Date :

Place :

Signature/Thumb impression of Applicant

Attestation for Office Use Only

Documents Received Self-Certified True Copy Notary

Risk category* High Medium Low

In Person Verification Carried Out By

Identity Verification Done Date

Customer ID*

Emp. Name*

Emp. Code*

Emp. Designation*

(Employee Signature)

Document Type Codes for Simplified Measures Account

Identity Proof -

- 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.
Letter issued by a gazetted officer, with a duly attested photograph of the person.

02

Address Proof -

- 01 Utility bill which is not more than two months old of any service provider. (Electricity, Telephone, Post-Paid Mobile Phone, Piped Gas, Water Bill.)
- 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 Undertakings, if they contain the address.
- 05 Letter of allotment of accommodation from employer issued by State or Central Government Departments, Statutory or Regulatory Bodies, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and Listed Companies. Similarly, leave and licence agreement with such employers allotting official accommodation.
- 06 Documents issued by Government Departments of Foreign Jurisdictions and letter issued by Foreign Embassy or Mission in India.

FATCA & CRS Related Declaration cum undertaking

- 1) I/We hereby certify that I/We have declared my/our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No.S.O.2155(E) dated 7 August 2015 and RBI Circular Ref. No. RBI-2015-2016/165 DBR.AML.BC.No. 36/14.01.001/2015-16, dated 28 August 2015 in this regard.

- 2) I/We understand and acknowledge that as per the provisions Income Tax Act. Rules made thereunder and guidelines issued by the RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the bank may have to report the details in respect of our account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the inter Governmental Agreements (IGA) and Common Reporting Standards (CRS) and or any other similar arrangements.

I/We certify that the information provided by me/us above as applicable to me/us and signed by me/us as well as in the documentary evidence provided by me/us are to the best of my/our knowledge and belief, true, correct and complete and I/We have not withheld any material information that may affect the assessment / categorization of my account as a us Reportable Account or Other Reportable Account or otherwise.

3)

