


<b>Know Your Client (KYC) Application Form (For Individuals Only)</b>		 Moneylicious Securities Private Limited			
<ul style="list-style-type: none"> <li>• Please fill the form in ENGLISH and in BLOCK letters</li> <li>• Fields marked * are mandatory.</li> <li>• Fields marked * are pertaining to CKYC and mandatory only if processing CKYC also</li> </ul>		Application Number :		Application Type : <b>New KYC</b> <b>Modification KYC</b>	
<b>KYC Mode: (Please tick)</b>					
<input type="checkbox"/> Normal		<input type="checkbox"/> EKYC OTP		<input type="checkbox"/> EKYC Biometric	
		<input type="checkbox"/> Online KYC		<input type="checkbox"/> Offline KYC	
				<input type="checkbox"/> Digilocker	
<b>1. Identity Details (Please Refer Guidelines Overleaf)</b>					
PAN Number					
Client Name					
Maiden Name					
Father/Spouse Name					
Date Of Birth					
Gender		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender			
Marital Status		<input type="checkbox"/> Single <input type="checkbox"/> Married			
Nationality		<input type="checkbox"/> Indian <input type="checkbox"/> Others _____			
Residential Status		<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non-Resident Indian			
		<input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin			
		<small>(Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC, Select NRI or Foreign National based on Nationality of the individual)</small>			
<b>Proof of Identity (POI) submitted for PAN exempted cases (Please tick)</b>					
<input type="checkbox"/> A - Aadhaar Card		XXXX - XXXX - ____ ____			
<input type="checkbox"/> B - Passport No.					
<input type="checkbox"/> C - Voter ID					
<input type="checkbox"/> D - DL					
<input type="checkbox"/> E - NREGA Card					
<input type="checkbox"/> F - NPR					
<input type="checkbox"/> Z - Others					
<b>2. Address Details (Please Refer Guidelines Overleaf)</b>					
<b>A. Correspondence Address / Local Address</b>					
Address Line 1					
Address Line 2					
Address Line 3					
City / Town / Village		District		PIN	
State		Country			
Address Type		<input type="checkbox"/> Residential/Business <input type="checkbox"/> Residential <input type="checkbox"/> Business		<input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified	
<b>NAME OF THE ACCOUNT HOLDER</b>			<b>SIGNATURE OF THE ACCOUNT HOLDER</b>		
Place					
Date					

**B. Permanent Residence Address of applicant, if different from above A**

Address Line 1					
Address Line 2					
Address Line 3					
City / Town / Village		District		PIN	
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 - _ _ _ _
<input type="checkbox"/> B - Passport No.	
<input type="checkbox"/> C - Voter ID	
<input type="checkbox"/> D - DL	
<input type="checkbox"/> E - NREGA Card	
<input type="checkbox"/> F - NPR	
<input type="checkbox"/> Z - Others	

**3. Contact Details** (in CAPITAL)

Email ID			
Mobile Number	+91 -		
Tel No (Off)		Tel No. (Res)	

**4. Applicant Declaration**


I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take 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.



I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

NAME OF THE ACCOUNT HOLDER		SIGNATURE OF THE ACCOUNT HOLDER
Place		
Date		

**FOR OFFICE USE ONLY**

In-Person Verification (IPV) carried out by		Employee Signature	
Intermediary Name	Moneylicious Securities Pvt Ltd		
AMC / Intermediary Code	1200006593		
Employee Name			
Employee Code			
Employee Designation			
IPV Date			
Self Certified document copies received (OVD) True copies of documents received (Attested)			

**Documents: Proof of Identity (if submitted)**

Proof of Identity (Pol)	
<b>Name of Client:</b>	 <p>Stamp and Seal ( Moneylicious Securities Private Limited )</p>
<b>PAN of Client:</b>	
<b>Signature of the Client:</b>	
 Please sign here	

## DIGILOCKER VERIFIED E-AADHAAR

This document is generated from verified Aadhaar XML obtained from DigiLocker with due user consent and authentication

<b>Document Type</b>	e-Aadhaar generated from DigiLocker verified Aadhaar XML		
<b>Generation Date</b>		<b>Download Date</b>	
<b>Masked Aadhaar Number</b>			
<b>Name</b>			
<b>Date of Birth</b>			
<b>Gender</b>			
<b>c/o, s/o</b>			
<b>Address</b>			
<b>Landmark</b>		<b>District</b>	
<b>City</b>			
<b>Pincode</b>		<b>State</b>	

