

CUSTOMER PROFILE FORM (Individual KYC)

FOR OFFICE USE ONLY



NKGSB Co-operative Bank Ltd.
(Multi-State Scheduled Bank)

Application Type*: ☐ NEW ☐ UPDATE

DOCKET Number :

Customer ID :

CKYC Number :

PHOTO

IMPORTANT INSTRUCTIONS :

- A) Please fill in the form in English and in BLOCK letters only.
B) Fields marked with '*' are compulsory. C) Please fill the date in DD-MM-YYYY format.
D) Please furnish valid proof of identity & address for KYC Compliance

1. PERSONAL DETAILS*

Name* (same as appear on ID Proof)

Prefix First Name Middle Name Last Name

Maiden Name (Name before marriage)

Father Name / Spouse Name (For married women)*

Mother Name*

Date of Birth*

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

(Date on which turned Non Resident Indian :

☐ Foreign National ☐ Person of Indian Origin

Occupation Type* ☐ S - Service : ☐ Private Sector ☐ Public Sector ☐ Government Sector

☐ O - Others : ☐ Retired ☐ Housewife ☐ Student ☐ Professional

☐ Business ☐ Self Employed ☐ Unemployed ☐ Not Categorised

2. CONTACT DETAILS

Tel (Off)

Tel (Res)

Mobile

FAX

Email ID

3. DOCUMENTS TO BE SUBMITTED*:

PAN Card OR FORM 60 ☐ Yes (If PAN not available)

PROOF OF IDENTITY *

(Self attested copy of any one of the following Proofs of identity needs to be submitted)

A - Passport Number

Passport Expiry Date

B - Voter ID Card

C - Driving Licence

Driving Licence Expiry Date

D - UID (Aadhaar)

E - NREGA Job Card

Z - Other (Any other document notified by the Central Government) :

Identification No.

S - Simplified Measures Account Document Type Code Identification No.



4. ADDRESS DETAILS*

4.1 CURRENT/ PERMANENT/ OVERSEAS ADDRESS DETAILS *

(Self attested copy of any one of the following Proofs of address needs to be submitted)

Address Type ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Proof of Address ☐ UID (Aadhaar) ☐ Voter Identity Card ☐ Passport
☐ Driving Licence ☐ NREGA Job Card ☐ Others
☐ 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*

4.2 CORRESPONDENCE/ LOCAL ADDRESS DETAILS *

☐ Same as Current/ Permanent/ Overseas Address details mentioned above.

☐ Not same as Current/ Permanent/ Overseas Address details mentioned above.

I declare that my permanent address is as mentioned in 4.1 above, However, at present I am residing at the below mentioned address. I request Bank to send all my correspondence on this address.

Address

Line 1*

Line 2

Line 3 City/ Town/ Village*

District* Pin/ Post Code*

State/ U.T Code* ISO 3166 Country Code*

☐ I am submitting self attested xerox copy of _____ as a proof of this present address.

☐ I do not have any proof of my present address. I hereby authorise the Bank to verify my address.

DECLARATION BY CLOSE RELATIVE

(To be filled in by the applicant if he/she does not have any address proof)

Name of the Declarant _____

Declarant having NKGSB Account : ☐ Yes ☐ No If yes, Customer ID _____


I hereby confirm that _____ who wish to open an account with your Bank is my _____. He/She is residing with me since (Month) / (Year) at _____

PIN Code _____ State _____ Tel. Number _____

The applicant does not hold a documentary address proof in his/her independent name. Since the applicant is residing with me, the address proof in my name is being provided to the Bank for the purpose of address verification. I have no objection towards receiving any correspondence from the Bank in the name of applicant at my above mentioned address. I enclose herewith the below.

Identity Proof (self attested) : _____

Address Proof (self attested) : _____

Signature of Declarant 



4.3 ADDRESS IN THE JURISDICTION WHERE APPLICANT IS RESIDENT OUTSIDE INDIA (FOR TAX PURPOSE)*

☐ Same as Current/ Permanent/ Overseas Address details ☐ Same as Correspondence/ Local Address details

Address

Line 1*																							
Line 2																							
Line 3											City/ Town/ Village*												
District*											Zip/ Post Code*												
State/ U.T Code*																					ISO 3166 Country Code*		

5. PERSONAL INFORMATION *

- Qualification _____
- Are you politically exposed person (PEP) ☐ YES ☐ NO
- Occupation Details :
 - If salaried, Name of the employer _____
 - Address _____
 - Designation _____ Monthly Gross Income (Rs.) _____
 - Self employed / Professional (Please specify) _____
 - Business (Please Specify) _____
- Annual Income (Rupees per annum) _____

6. FATCA/CRS DETAILS (FOR TAX PURPOSE RESIDENCE IN JURISDICTIONS OUTSIDE INDIA)

Are you a citizen/national/ tax-Resident of any country outside India? <input type="checkbox"/> NO <input type="checkbox"/> YES		If YES, please fill the "FATCA/CRS Declaration Form and provide the information shown below.		I hereby declare that the information provided by me is true. In case of any change, I will inform the Bank within 30 days.	
Country of Tax Residency*			Foreign Tax Identification Number or equivalent*		
Country of Birth*	[If not India, please fill the "FATCA/CRS Declaration Form"]		Place/City of Birth*		

7. DETAILS OF RELATED PERSON (In case of Minor)

☐ Addition of Related Person ☐ Deletion of Related Person

Customer ID of Related Person (If available*)

Related Person Type* ☐ Guardian of Minor ☐ Assignee ☐ Authorized Representative

Prefix	First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PROOF OF IDENTITY of RELATED PERSON*

(Self attested copy of any one of the following Proofs of identity needs to be submitted)

A - Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>
B - Voter ID Card	<input type="text"/>		
C - Driving Licence	<input type="text"/>	Driving Licence Expiry Date	<input type="text"/>
D - UID (Aadhaar)	<input type="text"/>		
E - NREGA Job Card	<input type="text"/>		
Z - Other (Any other document notified by the Central Government) :			

Identification No.	<input type="text"/>
S - Simplified Measures Account Document Type Code	<input type="text"/>
Identification No.	<input type="text"/>

& SIGNATURE MISMATCH DECLARATION

The signature on the ID Proof/Address/Cheque provided is different from my signature on the account opening form. Please consider the signature on the account opening form as my updated signature in your Bank record.

Old signature
as per documents/
Existing Cust Id

New Signature
as per Account
Opening form



9. APPLICANT DECLARATION*

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any change therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresentating, I am aware that I may be held liable for it.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.


Date :

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[illegible]

Signature/ Thumb Impression of Applicant 

10. FOR OFFICE USE ONLY

Check List

- | | | | |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | Proof of identity received | <input type="checkbox"/> | All copies verified & signed by Bank Official |
| <input type="checkbox"/> | Proof of permanent address received | <input type="checkbox"/> | KYC check done at branch level |
| <input type="checkbox"/> | Proof of correspondence address / declaration received | <input type="checkbox"/> | Checked whether applicant is already our customer |
| <input type="checkbox"/> | All copies self attested by customer | | |

KYC VERIFICATION CARRIED OUT BY

Date

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Emp. Name	
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Emp. Code	
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Emp. Designation	
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Emp. Branch	
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Stamp & Signature of Branch Official 

INSTITUTION DETAILS

Name	NKGSB Co-op. Bank Limited
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Code	I	N	0	5	8	8
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KYC documents audited & found correct
& Account opening confirmed

Stamp & Signature of KYC Checker at CPC 

11. SIMILAR NAMES CHECKED

Name Screening Done on

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Employee / Officer Signature _____

[illegible]

Employee Code

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