

HDFC E	BANK			the information																				
The information i	e enlight i	ınder Preven	tion of Money Launc								<u> </u>											Direction	ne 20	016
For existing Dep	ositor, th	e information	n furnished herein v	vill supersede t	he inf	orma	ation a	vaila	able i	n the	reco	ords	of e	rstw	hile F	IDFC	Ltd.	Toul (Justoi	ilei (K	10)) 1	Directi)IIS, Z(110.
1. Customer	Details	(as appearing	in your supporting ide	entification docum	ent)																			
CKYC Identifier (Skip if not alloted)							HDFC (If KYC is a												Gend	er*				
(Out in not anototy)	(Prefix	()	(First Name)	(Midd	le Na		(111110101	inouuy	, compin	ouj	(1	Last	Nar	ne)					M/F/T		Date	e of Bir	th*	
Name*																								
Guardian's Name (in case of Minor)																								
Guardian's Custon	ner No.																			Age Pı	roof			
(in case of Minor) Maiden Name (if any*))																							
Father/Spouse																								
Name* Mother's Name*																								
Current/Permanent																				Paste	latest	passp	ort size	
Address* Line 1*																				(DC		graph STAF	I E)	
Line 2																				(DC) INO I	SIAF	LE)	
Line 3																								
City*									Pin Co	ode*														
State/U.T.*								_ (Count	trv		ı	,	١	D	A								
	Local Addr	ess* Please t	tick if same as Current/Perman	nent Address						,														
Line 1*																								
Line 2																								
Line 3 City*									Pin Co	odo*														
· —												٠.	١.											
State/U.T.*									Count	•	.	'			D	Α								
City of Birth*										try of	Birth	_ '	1			Α								
PAN No.* (If PAN is not available, su	bmit Form 60)								Natio	nality		ı	1	1	D	ΙΑ	N	Citiz	enship	I	N I	D I	Α	N
☑ I am not a ta	ax-reside	nt of any coເ	untry other than Inc	dia. (In case yo	u are	a ta	x-resia	lent	of ar	ту со	untry	oth/	er ti	han	India	, kina	lly su	ıbmit	sepa	rate K`	YC fo	rm.)		
CUSTOMER	PROFIL	E DETAILS	5																					
Occupation		Salaried	Self-employed	Retired		Self-e	employe	d pro	of.	House	ewife		I	Politic	ian		Stude	ent	C	thers_				
If salaried, employ	ed with	Private Ltd.	Partnership	Proprietorsh	ip	Publi	c Ltd.			Public	c sect	or	(Gove	rnmen	t	Multir	nationa	I C	thers_				
Self Employed sine	ce	Years	Months																					
Nature of Business	S	Manufacturir	ng Service Provider	Agriculture	Bul	lion/G	Gold/Jew	ellery	/	Stock	Broke	er	Rea	al Est	ate	Trad	er	Mone	y Lend	er (Others			
Date of incorporati	ion																							
Type of Company/l	Firm	Sole Proprie	torship	Partnership		Publi	c Ltd. Co	0.		Privat	te Ltd.	. Co.	(Others	s									
Self Employed Profe	essional	Doctor	CA/CS	Lawyer		Archi	tect			IT Co	nsulta	ant	(Others	s									
Source of funds		Salary	Business Income	e Agriculture		Inves	stment In	ncom	е	Other	rs													
Gross Annual inco	me (₹)	< 50,000	50,000 < 1 lakh 1	< 3 lakh 3 < 5	lakh	5 <	7.5 lakh		7.5 <	10 lak	h	10 <	15 la	kh	15	< 25 la	kh	25 <	50 lakh	50) lakh <	1 CR	>= '	1 CR
Qualification:	-			_ Marital Status*	: 🗆	Unm	narried		1 Mar	ried		Others	S											
Residence type		Owned	Rented/Leased	Ancestral/Fa	,		mpany p																	
Please tick () If	the followi	ng is addition	ally applicable to you	u ☐ Politically Ex	posed	Pers	on (PEI	P) L	」 Rel	lative	of PE	Р												
			ent / Permanent	Address* (Pl	ease atta	ach sel	lf-attested	сору	of any	one of t	the follo	owing (Officia	Ily Vali	id Docu	ments (OVD) a	and carry	origina origina	l docume	nt for ve	erification	.)	
Proof of Identity*	Proof of Ad		of possession of Aadhaar (Biometric / OTP based) /	/ printout of e-Aadh		v	хх	v	·	v	Х	Х									_			
		(Please re	dact/blackout first 8 digits of Aadhaar l	Number)		^	^ ^	^	^	^	^	^								Expi	ry Da	ate		
			ort No. [not expired]																					
			nent Driving license N																					
		Comm	on /Voter's card issued iission of India	•																				
		Job ca	ard issued by NREGA	duly signed by an	office	r of tl	he State	Gov	/ernm	ent														
		Letter	issued by the Nationa	l Population Regi	ster co	ontair	ning det	ails d	of nan	ne & a	addres	ss												
			* (Please submit self-attested																					
3. CONTAC	T DET	AILS: (All co	ommunication will be	sent to Mobile nu	mber/	Emai	I-ID pro	vide	d belo	w. Ki	ndly e	ensur	re tha	at the	cont	act de	tails l	oelong	to the	above	custo	mer o	ıly.)	
Mobile* + 9	1			Email ID																				
Tel. (Res)							Tel. (Off)																
Tax to be de	ducted	☐ Yes	□ No If No, PI	ease submit	Form	າ 15	G OR	Fo	rm 1	15H	(for I)end	osite	ors a	ided	60 ve	ars	and a	bove)				
			other products off								•				igea ⊐ No		ais (and a	DOVC).				
DECLARATION:	I certify that th	ne information prov	ided above is in accordance	with section 285BA of	the Inco	me Ta	x Act, 196	i1 read	d with F	Rules 11	14F to 1						62. I ha	ave not v	vithheld	any mate	erial info	rmation t	hat may	affect
the assessment/categor affiliates wherever situat	rization of the ted including s	account as a Reposharing, transfer an	ortable account or otherwise d disclosure between them a	. I permit/authorise HE and to the authorities in	FC Ban and/or o	k to co outside	ollect, stor India of a	e, con	nmunic nfidenti	ate and al inforr	d proces mation t	ss info for con	rmation nplian	on rela ce with	iting to any la	the Ácci w or reg	ount an ulation	d all trai	nsaction domes	s therein, tic or forei	by HDI ign. It sh	FC Bank nall be my	and any respons	of its sibility
to educate myself and to I hereby submit voluntar	o comply at al ily at my own o	times with all rele	ided above is in accordance ortable account or otherwise d disclosure between them a vant laws relating to reporting for possession of Aadhaar to in connection with customer rany purpose other than me I store my KYC details from ly. In case any of the above ad numbar/gamail address	g under section 285BA HDFC Bank for the pu	of the A	establi	d with the ishing my	Rules	thereu ty/addre	inder. ess. I vo	oluntaril	ly give	my co	nsent	for verif	ication o	of my Aa	adhaar (whereve	r submitte	ed) to es	stablish it	genuine	eness
through such acceptable that my Aadhaar submit	e manner as s ted herewith s	stipulated by UIDAI shall not be used for	in connection with customer any purpose other than me	r identification and accentioned above, or as p	eptance er requi	tor HD	ts of law. I	The o	Consent Bank h	t and pu	urpose ormed n	ot coll ne that	ecting t this o	Aadha	aar has	been e	kplaine aar will	a to me be store	in local ed with h	anguage.	HDFC	Bank ha	s informe	d me
undertake to inform you	any changes	therein, immediate	ly. In case any of the above	oeksal Registry for t information is found to	be false	or unt	rue or mis	pilanc leadin	e. I her ng or mi	isrepres	ciare th senting	, I am	uetai aware	s turni that I	may be	held lia	ble for	it. I here	by cons	ent to rec	ily knov eiving ir	wieage a nformatio	n from C	entral
I hereby give my conser	nt to HDFC Ba	ink for sending OT	P (One Time Password) on r	my mobile number and	email id	to faci	ilitate prod	essin	g of my	,														
to time to comply with re	egulations.	mucauum. 1 aiso ag	ree to furnish such informati	on and/or documents a	ao HUF(dnkם כ	may requ	ine (LC	om urne	S	igna	ture	* :											
Place :			D	ate:	М	М	Y	Υ															P.	T.O.

For Office	Use Only											
Documents	s Received	Certified Copies	Scan Sr. No.		Application Type	New	Update					
	DETAILS	IN-PERSON VERIFICA	ATION & KYC DOCU	MENTS VERIFIED BY	CPU DETAILS							
	Empl. Name				Staff Name:							
	Empl. Code											
	Empl. Branch				Emp Code:		_					
	Date				DVU signature and Date		23/GP					
	Empl. Signature						93568/06/23/GPP					
Phone: 022-67546060 Email: deposits@hdfc.com												