THE KARAD URBAN CO-OPERATIVE CENTRAL KYC REGISTRY Know Your Customer (KYC) Application Form Indi	ividua
BANK ITD, KARAD	
Branch Code Branch Name	ersai
Important Instructions: A) Fields marked "*" are mandatory fields F) Please read section wise detailed quidelines / instructions at the end	a Lieund as
A) Fields marked "*" are mandatory fields. B) Tick \(\sigma\) wherever applicable. C) Please fill the form in English and in BLOCK letters D) Please fill the date in DD-MM-YYYY format. E) For particular section update, please tick (\(\sigma\) in the box E) For particular section wise detailed guidelines / instructions at the end. G) List of State / U. T. code as per Indian Motor Vehicle Act. 1988 is available at the list of two character ISO 3166 country codes is available at the end. E) For particular 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. E) For particular 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. E) List of two character ISO 3166 country codes is available at the end. E) The OTP based E-KYC check box is to be checked for accounts opened using	e end.
E) For particular section update, please lick (>) in the box	OTP
section number and strike off the sections not required to be updated. based E-KYC in non-face to face mode.	
Application Type* : New Update Customer ID	
(To be filled by financial institution) KYC Number (Mandatory for KYC update request)	
Application Type*: Normal Minor Adhar OTP based E-KYC (in non-face to face mod	le)
1. PERSONAL DETAILS* (Please refer instruction A at the end)	
Prefix First Name Middle Name Last Name	П
Maiden Name	\forall
Father / Spouse Name	$\overline{\Box}$
Mother Name	Ħ
Date of Birth*	
Gender* M-Male F-Female T-Transgender	
PAN* Form 60 furnished	
2. PROOF OF IDENTITY AND ADDRESS* (Please refer instruction B at the end)	
I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)	
A- Passport Number	
B- Voter ID Card	
C- Driving Licence	
D- NREGA Job Card	
☐ E- National Population Register Letter	
☐ F- Proof of Possession of Aadhaar XXXXXXXXXX	
II. \square E- KYC Authertication $\boxed{X X X X X X X}$	
III. Offline verification of Aadhaar XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
Address	
Line 1*	#
Line 2 City/Town/Village*	+
District* Pin/Post Code* State/U.T. Code* ISO 3166 Country Code*	\pm
3. CURRENT ADDRESS DETAILS (Please refer instruction B at the end) ☐ Same as above mentioned address (in such cases address details as below need not be provided)	
I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)	
A- Passport Number	
B- Voter ID Card	
C- Driving Licence	
☐ D- NREGA Job Card ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	
F- Proof of Possession of Aadhaar XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
II. \square E- KYC Authertication $\boxed{X X X X X X}$	
III. Offline verification of Aadhaar	
IV. Deemed Proof Address - Document Type code Address	
Line 1*	

Pin/Post Code*

City/Town/Village*

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

Line 2

Line 3

District*

4. CONTACT DETAILS	(All communications will be sent to Mobil	e number / Email ID Provided) (Please refer instruction C at the end)							
Tel. (Off.)	Tel. (Resi.)	Mobile Mobile							
Email ID									
5. CUSTOMER DETAIL	_S								
Member	Yes No Member No	. Anniversary Date							
Religion	☐ Hindu ☐ Muslim ☐ Christian ☐	Buddhist Parsi Shikh Others							
Caste	Open S.C. S.T. O.B.	C. Others							
Edu. Qualification Non SSC SSC/HSC U. G. Graduate P. G. Professional Others									
Monthly/Yearly Income	☐ Upto Rs. 10000 ☐ Rs. 10001 to	20000 Rs. 20001 to 50000 Above Rs. 50000							
House	Ancestral Owned Rented	Provided by Employer Others							
Vehicle	☐ Two Wheeler ☐ Four Wheeler ☐	Three Wheeler Others							
Other Information	Personal Computer Medical Ins	surance in force Life Insurance							
6. ALERTS ON MOBIL	E (Chargeable Service) Email (Free	e Service)							
I / We would like to receiv SMS on this mobile. I also security codes etc. on this	ve the account information through o hereby authorised to bank send SMS s mobile number.	alerts, +91							
OR Email ID									
2) 'KUCB', 'bank' means 3) Push messages are th	te bank). e.g. Transaction Alert etc. Pull mes information. Charges are applicable (service g. account balance enquiry etc. e that the bank chooses to send out to a cust the bank). e.g. Transaction Alert etc. ans, specified account's statement is send o	s) signing this document comer's registered mobile phone number. Charges are applicable stages are those that are initiated by the customer, using a mobile charges of the bank & customers service provider/mobile network comer's registered email address. Charges are applicable but to a customer's registered email address. Charges are							
7. REMARKS (If any)									
8. APPLICANT DECLA	ARATION								
 I hereby declare that to inform you of any of misleading or misrep. I hereby consent to readdress. 	the details furnished above are true an changes therein, immediately. In case a resenting, I am aware that I may be heleceiving information from Central KYC Re	d correct to the best of my knowledge and belief and I undertake ny of the above information is found to be false untrue d liable for it. egistry though SMS/Email on the above registered Number / Email							
Date D D M M	Y	Signature / Thumb Improceion of Applicant							
Signature / Thumb Impression of Applicant If Customer is an illiterate - Witnesses									
1. Name :		2. Name :							
Address :		Address :							
Signature :		Signature :							

9. RISK CATEGORIZATION DETAIL	S (T	o Filled in by branch o	fficial only)						
Purpose of opening the Account :_									
Source of Funds (Please tick 🗸 wh	niche	ever applicable)							
Salary Income Existing Busine		Pension / Agricultur	re Income / Commission	on &	Fees Donation /Gifts /Deposits by third p	arties			
Professional Receipts Casual receipts		☐ Investment Income			Others (Please specify)				
Expected Annual Turnover in the Acco									
Considering Risk Parameters given in the fo	llowi	ng table, I certify to allot	following Risk Cate	gory	to this Account. (Please tick 🗸 whichever appli	cable)			
HIGH RISK		MEDIUM RI			LOW RISK				
Contractors / Builders & Developers		Dealers in Pharmace Chemists & Druggist	'		Agriculturist / Farmer				
Dealers In Antiques / Arms / Lottery		High Net Worth Indivi	duals		Co-op Housing Society (CHS)				
Jewelers, Bullion Dealers, Gems Dealers		Non Scheduled Urban (Co-op Banks		Dairy / Poultry / Fishers				
Money Changers / Remitters / Private Money Lender		Partnership Firm all F are Close Relatives	artners		Pensioner				
Non Resident of India		Professional (Advt, C DR, Engg., Arch. Etc.	A, CS,)		Housewife				
Petrol Pumps / Gas Agencies / Toll Naka		Advertising Agencies			Mathadi Kamgars / Workers / Hawkers				
Private Limited / Public Limited / LLP		Manufacturing			Staff of Our Bank				
Trusts / NGO / Clubs / Dharmadaay Sanstha	Wholesaler / Commis	sion Agent		Salaried Person					
Primary Co-op Society/Credit Co-op Society/Patsanstha/Pathpedhis	' I I Minor				Self Employed				
Restaurants, Lodging & Boarding, Permit Room & Bars		Transport / Logistics			Self Help Groups / Bachat Gat / JLG				
Share Brokers / Stock Brokers		MSME			Students				
Travel Agents / Real Estate Brokers & Agents				Dealers, Distributor, Sub-Dealer, Franchisee, C & F Agent					
Educational / Medical Institutions					Retail Shop				
Power of Attorney Holder					General Business				
Persons with Criminal Background					Basic Saving Bank Account, AADHAR Enabled Accounts				
Politically Exposed Persons									
Multi Level Marketing Firm (MLM)									
Risk Categorization of the Account:] High	m Low						
10. ATTESTATION / FOR OFFICE US	SE (ONLY							
Documents Received \square Certified Copies \square E-KYC date	a rece			□Di	gital KYC Process □ Equivalent e-document □ Video Bas	ed KYC			
			TIFICATION			. ,,			
I Mr/Ms			anch Official Name		In person at hi				
residence / office / others (please specify)			•	-	· · · · · / •	jainst			
originals as produced by the applicant. I also			een signed the applic						
KYC VERIFICATION CARRIED OUT BY INSTITUTION DETAILS									
Emp. Name Code I N 1 9 3 2 Concluded Saline									
Emp. Code									
Emp. Designation BRANCH MANAGER									
Emp. Branch					Institution Stampl				
					[Institution Stamp]				
[Branch Manager Sig	ınat	ure]							

11.	11. ACCOUNTS ON INDIVIDUALS : LIST OF KYC DOCUMENTS (one document from each list) :											
	LIST 1 Documents accepted as proof of identity		LIST 2 Documents accepted as proof of residence									
	Passport Aadhaar Card		Ration Card Aadhaar Card									
	PAN Card Uvoter's Identity Card		Electricity Bill Telephone Bill									
	Driving Licence		Bank Account Statement									
	Job card issued by NREGA duly signed by an officer of the State Government		Letter from employer (to the satisfaction of the Bank)									
_	(for Small Account)		Letter from any recognized public authority (to the satisfaction of the Bank)									
	The letter issued by UIDAI containing details of name, address and Aadhaar		Credit Card statement - not more than 3 months old.									
	Number. Identity card (subject to the bank's satisfaction)		Income / Wealth Tax Assessment Order									
	Letter from a recognized public authority or public servant verifying the identity and		Letter from Public sector employer.									
ш	residence of the customer to the satisfaction of bank.		Letter from any recognized public authority having proper and verifiable record of									
	Government / Defense ID Card.		issuance of such certificates.									
	ID Cards of reputed Public Sector employers.		Voter ID Card (only if it contains the current address)									
	Pension Payment Orders issued to the retired employees by Central / State		Pension Payment Orders issued to the retired employees by Government Departments/									
_	Government Departments, Public Sector Undertaking.		Public Sector Undertaking, if they contain current address.									
	Photo ID cards issued by Post Office.		Copies of Registered Leave & Licence agreement / Sale Deed / Lease Agreement.									
	Photo identity cards issued to bonafide students by a university, approved by the		Certificate and also proof of residence, incorporating local address as well as									
	University Grants Commission (UGC) and/or an institute approved by All India		permanent address, issued by the Hostel Warden of the University/Institue, where									
	Council for Technical Education (AICTE)		the student resides, duly countersigned by the Registrar / Principal / Dean of									
	Photo identity issued by any public authority having proper record of issuance of		Student Welfare. Such accounts shall however, be required to be closed on									
	identity proof which is verifiable from records.		completion of education/leaving the University/Institue provided the constituent									
	Ex-Servicemen Card with photograph.		does not give any other acceptable proof of residence to the Bank.									
	Bar Council/Medical Association/ICAI/ICWAI Card with photograph.		For students residing with relatives, address proof of relatives, along with their									
	Student Identity Card with photo issued by reputed colleges with validity during the		identity proof, can also be accepted provided declaration is given by the relative that									
_	course period.		the student is related to him/her and is staying with him/her.									
	Defense Department's Card with photograph.		In respect of officials of Central/Sate Governments and Public Sector undertaking,									
	Married woman identity proof with maiden name, if supported with a verified true copy of marriage certificate.		who are low risk customers for Bank, Branch Heads may verify the photo/identity									
	Credit card with photo together with statement of such card, not more than three		and confirm residential address of such officials from independently verifiable									
ш	months old.		sources, to their satisfaction, and permit opening of accounts. This facility is									
	Registered Property document with photo identity		extended only to the Gazetted officials of Central/Sate Government and Senior									
	Arms Licence issued by Sate/Central Government of India.		Management and above functionaries of Public Sector Undertakings.									
	Freedom fighter's pass issued by Ministry of Home Affairs, Government of India		Latest telephone bills from any telephone service providers and mobile service									
_	with photograph of applicant.		providers not more than 2 month old, postpaid.									
	Employee State Insurance Card (ESIC) with photograph supported by latest		Consumer gas connection card/book/Pipe gas bill									
	month's pay slip.		Certificate from ward / equivalent rank officer, maintaining election roll certifying									
	Talati / Patwari (a local govt. official) attestation by way of putting rubber stamp and		address of the applicant.									
	signature. Gram Sarpanch / Mukhiya attestation by way of putting rubber stamp		Post Office Saving Pass Book									
	and signature (For Small Accounts)		Domicile Certificate with communication address and photograph.									
			Certificate by Village Extension Officer (VEO) / Village Head or equal or higher rank									
need	Note: If passport having current address is given as proof of identity, there is $$ n $$ o d to give separate proof for address from list 2 $$		officer. Branch to confirm the authentity of the certificate and that it has been issued by the person who is holding the said office.									

12. CENTRAL KYC REGISTRY | Instruction / Check List / Guidelines for filling Individual KYC Application Form

A. Clarification / Guidelines on filling 'Personal Details' section

- 1) Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2) One the following is mandatory: Mother's name, Supouse's name, Father's name.

B. Clarification / Guidelines on filling 'Current Address Details' section

- 1) In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
- 2) PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force
- 3) State / U.T. Code and Pin/Post Code will not be mandatory for Overseas address.
- 4) In Section 2, one of I, II and III is to be selected in case or online E-KYC authentication. It is to be selected
- 5) In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication. It is to be selected.
- 6) List of documents for 'Deemed Proof of Address'

Document Code Description

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

Pension or family pension payment orders (PPOs) issued to retired employees by Govt. Departments or Public Sector Undertakings.

Letter of allotment of accommodation from employer issued by State Govt. or Central Govt. Departments, statutory or regularly bodies public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence

public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements which such employees allotting official accommodation.

- 7) Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number form Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8) "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to be digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules 2016.
- 9) 'Digital KYC process' has to be carried out as stipulated in the PML Rules 2005

C. Clarification / Guidelines on filling 'Contact Details' section

- 1) Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999)
- 2) Do not add '0' in the beginning of Mobile number.

D. Clarification / Guidelines on filling 'Related Person Details' section

1) Provide KYC number of related person, if available

E. Clarification on Minor

- 1) Guardian details are optional for minors above 10 years of age for opening of bank account only
- 2) However, in case guardian details are available for minor above 10 years of age the same (or CKYCR number of guardian) is to be uploaded.

List of two – digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 two- digit Country Code

Country	Country	Country	Country	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic	MK	Saudi Arabia	SA
Alluolia	AD	Littlea	LN	of	IVIK	Saudi Al abia	
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	ВН	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
		Greece		=	ME	Suriname	
Belize	BZ	Greenland	GR	Montenegro Montserrat			SR
Benin	BJ		GL		MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	10	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	=	NE	Tokelau	TK
•				Niger			
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
		•		= :			
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA		VG
						Virgin Islands, British	
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curaçao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
		· ·					
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
	DJ	Lesotho	LS	Saint Lucia	LC		
Djibouti							
Djibouti Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

Self-Certification for Individual - FATCA/CRS Declaration Form

Customer ID :																
☐ Primary Holder ☐ Joint Holder ☐ Mandate Holder Residential Status : ☐ Resident ☐ Non-Resident																
Part I- Please fill in the country for each of the following:																
1	Со	untry of :														
a)	Bir	th														
b)	Cit	izenship														
c)	Re	sidence 1	or Tax	ι Pu	rposes											
2	US	Person	(Yes /	No)												
Part II	l - Ple	ease No	te :				-									
		elds abov or signatu		cor	ıntry m	enti	oned b	y yo	u is Ind	dia an	d if yo	ou do n	ot have	e US pe	rson sta	itus, please proceed to
b. If f	or an	√ of the a	bove t	field dent	, the co	ount n N	ry men umber (tion (TIN	ed by) or fui	you is nction	not li al equ	ndia ar uivalent	nd/or if t as iss	your US sued in t	S perso he spec	n status is Yes, please ific country in the table
i)	TI	N														
.,	Co	ountry of	Issue													
ii)	TI	N														
,	Co	ountry of	Issue													
рι	urpose	e and you	ı do n	ot ha	ave Tax	xpay	er Ider	tes t	that yo ation I	u are Numb	a US ers/fu	person nctiona	n or a p al equiv	erson re valent, p	esident o blease o	outside of India for tax complete and sign the
b. In	case	rtification you are de ishment o	eclarin	ng Ŭ:	Sperso	on st	atus as	'No	but yo	our Co	untry	of Birth	n is US, ing reli	please	provide	document evidencing
Please	also	fill Part IV	Self-C	Certi	fication	١.						iotriavi		riquioriii	101111001	imoato.
		stomer ty of perju				•	cable fo	or al	I Cust	omer	s):					
Onder	(i)	The app	licant	is (i) an apı	plica	ınt taxa	ble	as a U	Spers	on un	der the	e laws o	of the Ur	nited Sta	ates of America ("U.S.")
		the U.S	(ii) a	an e	state t	he i	ncome	of v	vhich i	s sub	iect to) U.S. 1	federal	l income	e tax re	a or any other states of gardless of the source
	(ii)	thereof. The app	olicant	is a	n appli	cant	taxabl	e as	a tax ı	reside	nt und	der the	laws o	of countr	y outsid	le India. (This clause is
		applical Urban (ole on Co-op	ly if Ban	the aco k Ltd_is	coui rel	nt holde /ing o <u>n</u>	er Is this	a tax inform	reside a <u>ti</u> on	ent ou for the	tside o e purpo	ose of) I/We u determ <u>i</u> i	indersta	and that the The Karad status of the applicant is not able to offer any
		tax advi	ce on	CRS	or HA	ince TCA	with FA or its in	ATC.	A/CRS ct on th	6. The e app	ا he ا .licant	Karad U . I/we sl	Urban (hall se	Co-op B ek advic	ank Ltd e from p	is not able to offer any professional tax advisor
	(iii)	for any t	ax que ree to	estic su	ons. bmit a	nev	v form	with	in 30	days	if any	inform	nation	or certif	ication	on this form becomes
	(iv)	incorrec	ct.													rad Urban Co-op Bank
	(v)	Ltd may	also b	oe re	quired	to re	eport, re	por	table o	letails	to CB	DT or o	close o	r susper	nd my ad	count.
	(vi)	certifica	tion is	true	, corre	ct, a	nd com Karad	plet	e inclu	ding t	he tax Bank	payeri	identific	cation no	umber c	of the applicant. nunicate and process op Bank Ltd and any of n and to the authorities
	(*.)	informa	tion re	latir	ig to the	e Ac	count a	nd a	III trans	sactio	ns the	rein, by	y The K	arad Ur	ban Co-	op Bank Ltd and any of
		in and/o	or out	side	maia	of a	ny con	fide	ntial in	forma	tion f	or com	nplianc	e with a	any law	or regulation whether
	(vii)	I / We he	ereby a	acce	ept and	ack	nowled	ge t	hat The	e Kara	ad Urb	an Co-	op Bar	nk Ltd sh	nall have	e the right and authority irming the information
	/:::\	provide	d by m	ne/u	s to Th	e Ka	arad Url	oan	Co-op	Bank	Ltd.	-				-
	(viii)	Bank Lt	d on a	ccou	int of p	rovi	ding inc	an corre	ct or in	Bank Icomp	lete in	r any io iformat	tion.	t may ar	ise to i	he Karad Urban Co-op
Signa	ture :							_ '	Name	:						
Place : Date :																
Part I\	/ - Se	If Certif	icatio	n To	be fill	led	only if	:								
(a) Name of the country in Part I is other than India and TIN or functional equivalent is not available, or(b) US person is mentioned as Yes in Part I, and TIN is not available																
I confirm that I am neither a US person nor a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India.																
Theref	ore, I	am provid	ling th	e fol	lowing	doc	ument a	as pi	roof of	my cit	izensl	hip and	d reside	ency in Ir	ndia.	Signature
Dogur	nent	Proof si	ıbmitt	ted	Please	e tic	k docu	mer	nt hein	a suh	mitte	d)				
Document Proof submitted (Please tick document being submitted) ☐ Passport ☐ Election ID Card ☐ PAN card ☐ Driving License ☐ UIDAI Letter ☐ NREGA Job card																