

PART 1 - KNOW YOUR CLIENT (KYC) APPLICATION FORM (For Individuals)



Astha Credit & Securities

LINKING WAY TO PROSPERITY PRIVATE LIMITED

138/42, Usha Preet, Opposite Apex Bank, Malviya Nagar, Bhopal - 462003

☎ 0755-4220793, 4254499 Fax : 0755- 4220795, E-mail : asthainv@yahoo.com

Please fill this form in ENGLISH and in BLOCK LETTERS

A. IDENTITY DETAILS

1.	Name of the Applicant											Photograph Please affix your recent passport size photograph signature across it <input checked="" type="checkbox"/> (1) Signature of Client
2.	Father's/Husband's Name											
3.	a) Gender	<input type="checkbox"/> Male	b) Marital Status	<input type="checkbox"/> Single	c) Date of Birth							
		<input type="checkbox"/> Female		<input type="checkbox"/> Married								
4.	a) Nationality	<input type="checkbox"/> Indian	a) Status				<input type="checkbox"/> Resident Individual					
		<input type="checkbox"/> Other (Please specify, _____)				<input type="checkbox"/> Non Resident						
						<input type="checkbox"/> Foreign National						
5.	a) PAN		b) Adhaar, if any									
6.	Specify the proof of identity submitted	<input type="checkbox"/> PAN card <input type="checkbox"/> Any other (Please specify : _____)										

B. ADDRESS DETAILS

 Correspondence Address

 Residence Address

1.	Residence/ Correspondence Address												
		City/town/village	PIN Code										
		State	Country										
2.	Specify the proof of address submitted for Residence/correspondence address												
3.	Contact Details	Tel. (Off.)				Tel. (Res.)							
		Fax No.				Mob. No.							
		Email No.											
4.	Permanent Address (if different from above. mandatory for Non- resident Applicant to specify overseas address)												
		City/town/village	PIN Code										
		State	Country										

C. 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 changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.

Signature of the Client ✓ (2)

Name of Applicant: _____

Date									
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Place : _____

FOR OFFICE USE ONLY

Sr. No.	Particulars								
1	<input type="checkbox"/> Originals verified and Self-Attested Document copies received								
In-Person-Verification (IPV) details:									
2	a) Name of the person doing IPV								
	b) Designation								
	c) Name of Organization								
	d) Signature								
	e) Date								
<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>		D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Name & Signature of the Authorised Signatory									
Date	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Seal/Stamp of the intermediary									

INCOME RANGE (P.A.)

Below Rs. 1 Lac. Rs. 1 – 5 Lac Rs. 5 – 10 Lac Rs. 10 – 25 Lac Above Rs. 25 Lacs

OCCUPATION

Government Service Public Sector Private Sector Professional

Business Farmer Others.....