

CUSTOMER MASTER FORM / KNOW YOUR CUSTOMER (KYC) /CKYCR FORM FOR INDIVIDUALS

INSTRUCTIONS: MUST BE TAKEN FROM ALL APPLICANTS SEPARATELY														
FOR FILLING THE FORM:														
A) Fields marked with "*" are mandatory fields. B) Self-Certification of documents is mandatory C) Please fill the form in English and in BLOCK letters. D) Please fill the date in DD-MM-YYYY format. E) Please read section wise detailed guidelines / instructions at the end. J) In case of 'Small Account type' only personal details in section 1 and 6, photograph, signature and self-certification of documents is required						F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end. G) List of two character ISO 3166 country codes is available at the end. H) KYC number of applicant is mandatory for update application. I) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.								
For Office Use Only (To be filled by Bank/Branch)														
CUSTOMER ID														
APPLICATION TYPE: <input type="checkbox"/> NEW <input type="checkbox"/> UPDATE						ACCOUNT TYPE: <input type="checkbox"/> NORMAL <input type="checkbox"/> SMALL								
KYC NUMBER (As per CKYCR)														
(KYC NUMBER is Mandatory for KYC Update request) (If KYC number and name are provided, below details of section are optional)														
<input type="checkbox"/> 1.PERSONAL DETAILS (Please refer instruction A at the end) (Mr./Mrs/Ms/ others.....)														
Prefix First Name Middle Name Last Name														
Name* (Same as ID proof)														
Maiden Name* (If any) For Married Women (Same as ID proof)														
Father Name*														
Spouse Name* (If married)														
Mother Name*														
Guardian name* (For Minor)														
Relationship of Guardian with Minor														
Date of Birth*				D D M M Y Y Y Y				Gender* : <input type="checkbox"/> M-Male <input type="checkbox"/> F-Female <input type="checkbox"/> TG- Transgender						
Marital Status*		<input type="checkbox"/> Married, <input type="checkbox"/> Unmarried <input type="checkbox"/> others (pl..Specify)						Photo						
Nationality*		<input type="checkbox"/> IN-Indian <input type="checkbox"/> Others (ISO-3166 Country Code <input type="text"/> <input type="text"/>) (if national of more than one country, please mention all the countries separated by a comma)												
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												
Occupation Type*		<input type="checkbox"/> S-Service (<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector) <input type="checkbox"/> O- Others (<input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired) <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> B-Business <input type="checkbox"/> X- Not Categorized Pl. Specify												
Government Sector		State		Central		Defense		Railway		Others				
Profession*		Doctor		Architect		CA/CS		IT Consultant		Engineer Lawyer Others (pl.Specify)				
Business		<input type="checkbox"/> Manufacturing		<input type="checkbox"/> Real Estate		<input type="checkbox"/> Antique		<input type="checkbox"/> Service Provider		<input type="checkbox"/> Trader <input type="checkbox"/> Arms Dealer				
		<input type="checkbox"/> Agriculture		<input type="checkbox"/> Stock Broker		<input type="checkbox"/> Other Pl.Specify								
PAN/GIR NO*														
If PAN/GIR not available , Please Fill Form 60 * Separately														
Category*														
General <input type="checkbox"/>			OBC <input type="checkbox"/>			SC <input type="checkbox"/>			ST <input type="checkbox"/>			Minority <input type="checkbox"/>		
Designation*														
Profession*														
Doctor		Architect		CA/CS		IT Consultant		Engineer		Lawyer Others (pl.Specify)				
Annual Income (Rs.)*		< 60,000		60,001 - 1 Lakh		1 - 5 Lakh		5 - 15 Lakh		> 15 Lakh				
Annual Turnover/ Receipt *from business (Rs.Lakh)														

Customer Type*	a. Minor <input type="checkbox"/> b. Sr.Citizen <input type="checkbox"/> c.Pensioner <input type="checkbox"/> d. Staff (PF No. _____) <input type="checkbox"/>
	e. Ex-Staff <input type="checkbox"/> (Emp.No.) <input type="checkbox"/> f.NRI <input type="checkbox"/> g. Other General <input type="checkbox"/>
	h. illiterate <input type="checkbox"/> i. Pardanashin <input type="checkbox"/> j.Blind <input type="checkbox"/> k. Physically Handicapped <input type="checkbox"/>
	i. Others (Specify _____) <input type="checkbox"/>
OPTIONAL INFORMATION :/ We Wish to share following information (YES/ NO), if yes, Fill in the following information	
a. Educational Qualification	<input type="checkbox"/> a. Under Graduate <input type="checkbox"/> b. Graduate <input type="checkbox"/> c. post Graduate/Others
b. Religion	<input type="checkbox"/> a. Hindu <input type="checkbox"/> b. Muslim <input type="checkbox"/> c. Sikh <input type="checkbox"/> d. Christian <input type="checkbox"/> e. Others

2. TDS DETAILS

TDS, If applicable : Yes/No If no, exemption reference No
 If, Yes, Whether Form15G/H* submitted: YES NO
 *Form15G for general category 15H for Senior Citizen

3. PROOF OF IDENTITY (POI)* (Please refer instruction C at the end)
 (Certified copy of any one of the following proof of identity (POI) needs to be submitted)

TICK	TYPE(Name of POI)	Document No	Date of Issue DD-MM-YYYY	Date of Expiry DD-MM-YYYY
	A-Passport Number (MUST FOR NRI)			
	B-Voter Id Card			
	C- PAN Card			
	D-Driving Licence			
	E-UID (Aadhaar)			
	F- NREGA Job Card			
	Z- Others-\$(Any document notified by Central government)		Identification No	

\$ — As Simplified measures for Low risk categorized customers , the following documents deemed to be “officially valid documents” for verifying the identity of customers
 (i) Identity Card with applicant’s photograph issued by Central / State Government. Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
 (ii) Letter issued by a gazetted officer, with a duly attested photograph of the person.
(Refer - ANNEXURE - CKYC R-IV - KYC DOCUMENTS)

4. PROOF OF ADDRESS (POA)*

Current Permanent Overseas Address Details (Please refer instruction D at the end)
 (Certified copy of any one of the following Proof of Address (POA) needs to be submitted)

Address Type* Residential/ Business Residential Business Registered Office
 Unspecified
 Proof of Address Passport Number Voter Id Card Driving Licence UID (Aadhar)
 NREGA Job Card Others Pl. Specify.....

\$ - Where ‘simplified measures’ are applied for verifying for the limited purpose of proof of address the following additional documents are deemed to be ‘officially valid documents’ (OVDs) :
 (I) Utility bill which is not more than two months old of any service provider (electricity, telephone, postpaid mobile phone, pipedgas, water bill);
 (ii) Property or Municipal Tax receipt;
 (iii) Bank account or Post Office savings bank account statement;
 (iv) Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address;
 (v) Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation; and
 (vi) Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.
(Refer - ANNEXURE - CKYC R-IV - KYC DOCUMENTS)

7.DETAILS OF RELATED PERSON (In case of additional related persons, please fill Annexure B1) (please refer instruction **G** at the end)

Addition of Related Person Deletion of Related Person

KYC Number of Related Person (if available*)																				
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Related Person Type* Guardian of Minor Nominee Assignee Authorized Representative
 Beneficial Owner Beneficiary

Prefix	First Name	Middle Name	Last Name
Name*			
KYC NUMBER			

(If KYC number and name are provided, below details of section....are optional)
PROOF OF IDENTITY [POI] OF RELATED PERSON* (Please see instruction **(H)** at the end)

TICK	TYPE (Name of POI)	Document No	Date of Issue					Date of Expiry						
			D	D	M	M	YYYY	D	D	M	M	YYYY		
	A-Passport Number (MUST FOR NRI)													
	B-Voter Id Card													
	C- PAN Card													
	D-Driving Licence													
	E-UID (Aadhar)													
	F- NREGA Job Card													
	Z- Others-\$ (Any document notified by Central government													

\$-- As Simplified measures for Low risk categorized customers , the following documents deemed to be "officially valid documents" for verifying the identity of customers
 (i) Identity Card with applicant's photograph issued by Central / State Government. Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
 (ii) Letter issued by a gazetted officer, with a duly attested photograph of the person.

8. APPLICANT DECLARATION

I hereby declare that the details furnished above in this form including details in Annexure A1 , Annexure B1 are true and correct to the best of my/our 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/We am/are aware that I/we may be held liable for it. I/we agree to be bound by the terms & conditions, Instruction etc as outlined in the Annexure CKYCR (I) to (IV) & Annexure FATCA (I) &(II) and by the rules of Punjab National Bank and RBI and any subsequent amendment(s).

My personal / KYC details may be shared with Central KYC Registry

I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address

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 Date: _____ Signature/Thumb Impression of Applicant Place: _____

9. ATTESTATION(FOR OFFICE USE ONLY)

Documents Received Self-Certified True Copies Notary
 RiskCategory: High risk Medium risk Low Risk

	Name	GBPA/ PF NO	Signature
1. In person verification carried out by/ Identity			
2. Details furnished in the form including, Annexure A1 & duly checked, copies of documents (POI & POA and others) obtained & verified from original , Photo verified, Customers name checked with the barred list and Risk category verified & due diligence done by.			
3. Information entered in the system by			
4. Entered Information Verified by			

Annexure A1-CORRESPONDENCE /LOCAL ADDRESS DETAILS (In case of multiple correspondence /local addresses)

For Office Use Only (To be filled by Bank/Branch)

APPLICATION TYPE*:	<input type="checkbox"/> NEW <input type="checkbox"/> UPDATE	ACCOUNT TYPE:	<input type="checkbox"/> NORMAL <input type="checkbox"/> SMALL
KYC NUMBER*			

(KYC NUMBER is Mandatory for KYC Update request)

1. PROOF OF ADDRESS (POA)*

- 1.1 CORRESPONDENCE /LOCAL ADDRESS DETAILS*** : (Please see instruction E at the end)
 Same as Current / Permanent /Overseas Address details

Line 1*																			
Line 2*										City/Town/Village*									
State/UT																			
State/UT Code*										Pin/Post Code*									ISO 3166 country code*

- 2. CONTACT DETAILS** (All communications will be sent on provided Mobile No/ Email ID)
(Please refer instruction F at the end)

Tel.(Off) - STD										Tel.(Res) STD									
Mobile No										Fax / STD									
Email ID																			

Annexure B1 - DETAILS OF RELATED PERSON (In case of additional related persons)

For Office Use Only (To be filled by Bank/Branch)

APPLICATION TYPE*:	<input type="checkbox"/> NEW <input type="checkbox"/> UPDATE	ACCOUNT TYPE:	<input type="checkbox"/> NORMAL <input type="checkbox"/> SMALL
KYC NUMBER*			

(KYC NUMBER is Mandatory for KYC Update request)

1. DETAILS OF RELATED PERSON (please refer instruction G at the end)

- Addition of Related Person Deletion of Related Person

KYC Number of Related Person (if available*)																			
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

- Related Person Type*** Guardian of Minor Nominee Assignee Authorized Representative
 Beneficial Owner Beneficiary

	Prefix	First Name	Middle Name	Last Name
Name*				
KYC NUMBER				

(If KYC number and name are provided, below details of section are optional)

PROOF OF IDENTITY [POI] OF RELATED PERSON* (Please see instruction (H) at the end)

TICK	TYPE (Name of POI)	Document No	Date of Issue				Date of Expiry							
			D	M	M	YYYY	D	M	M	YYYY				
	A- Passport Number													
	B-Voter Id Card													
	C- PAN Card													
	D-Driving Licence													
	E-UID (Aadhar)													
	F- NREGA Job Card													
	Z- Others (Any document notified by Central government)													
						Identification No								



Date : _____

Signature/Thumb Impression of Applicant

Place : _____

Instruction:

(1) Documents which can be produced in support of identity and address (not required if applied for PAN and item 20 is filled): -

Sl.	Nature of Document	Document Code	Proof of Identity	Proof of Address
A	For Individuals and HUF			
1.	AADHAR card	01	Yes	Yes
2.	Bank/Post office passbook bearing photograph of the person	02	Yes	Yes
3.	Elector's photo identity card	03	Yes	Yes
4.	Ration/Public Distribution System card bearing photograph of the person	04	Yes	Yes
5.	Driving License	05	Yes	Yes
6.	Passport	06	Yes	Yes
7.	Pensioner Photo card	07	Yes	Yes
8.	National Rural Employment Guarantee Scheme(NREGS)Job card	08	Yes	Yes
9.	Caste or Domicile certificate bearing photo of the person	09	Yes	Yes
10.	Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer as per annexure A prescribed in Form 49A	10	Yes	Yes
11.	Certificate from employer as per annexure B prescribed in Form 49A	11	Yes	Yes
12.	Kisan passbook bearing photo	12	Yes	No
13.	Arm's license	13	Yes	No
14.	Central Government Health Scheme Ex-servicemen Contributory Health Scheme card	14	Yes	No
15.	Photo identity card issued by the government./ Public Sector Undertaking	15	Yes	No
16.	Electricity bill <i>(Not more than 3 months old)</i>	16	No	Yes
17.	Landline Telephone bill <i>(Not more than 3 months old)</i>	17	No	Yes
18.	Water bill <i>(Not more than 3 months old)</i>	18	No	Yes
19.	Consumer gas card /book or piped gas bill <i>(Not more than 3 months old)</i>	19	No	Yes
20.	Bank Account Statement <i>(Not more than 3 months old)</i>	20	No	Yes
21.	Credit Card statement <i>(Not more than 3 months old)</i>	21	No	Yes
22.	Depository Account Statement <i>(Not more than 3 months old)</i>	22	No	Yes
23.	Property registration document	23	No	Yes
24.	Allotment letter of accommodation from Government	24	No	Yes
25.	Passport of spouse bearing name of the person	25	No	Yes
26.	Property tax payment receipt <i>(Not more than one year old)</i>	26	No	Yes
B	For Association of persons (Trusts)			
	Copy of trust deed or copy of certificate of registration issued by Charity Commissioner	27	Yes	Yes
C	For Association of persons (other than Trusts) or Body of Individuals or Local authority or Artificial Juridical Person)			
	Copy of Agreement or copy of certificate of registration issued by Charity commissioner or Registrar of Cooperative society or any other competent authority or any other document originating from any Central or State Government Department establishing identity and address of such person.	28	Yes	Yes

(2) In case of a transaction in the name of a Minor, any of the above mentioned documents as proof of Identity and Address of any of parents/guardians of such minor shall be deemed to be the proof of identity and address for the minor declarant, and the declaration should be signed by the parent/guardian.

(3) For HUF any document in the name of Karta of HUF is required.

(4) In case the transaction is in the name of more than one person the total number of persons should be mentioned in Sl. No.18 and the total amount of transaction is to be filled in Sl. No. 16.

In case the estimated total income in column 22b exceeds the maximum amount not chargeable to tax the person should apply for PAN, fill out item 21 and furnish proof of submission of application.

ANNEXURE –CKYC R-1 — DETAILED GUIDELINES / INSTRUCTIONS:

1. KYC number of applicant is mandatory for updation of KYC details.
2. For particular section update, please tick () in the box available before the section number and strike off the sections not required to be updated.
3. In case of 'Small Account type' only personal details in section 1 and 6, photograph, signature and self-certification of documents is required.

A Clarification / Guidelines on filling 'Personal Details' section

1. Name: Please state the name with Prefix (Mr/Mrs/Ms//etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Jurisdiction(s) of Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
2. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number)

C Clarification / Guidelines on filling 'Proof of Identity [Pol]' section

1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
2. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

1. PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
2. State / U.T Code and Pin / Post Code will not mandatory for Overseas addresses.

E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / local addresses, please fill 'Annexure A1'

F 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 91-9999999999).
2. Do not add '0' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Details of Related Person' section

1. Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1. In case of nominees, proof of identity is not required.
2. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

ANNEXURE -CKYC R-1I - 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	AN	Himachal Pradesh HP	HP	Pondicherry PY	PY
Andhra Pradesh AP	AP	Jammu & Kashmir JK	JK	Punjab PB	PB
Arunachal Pradesh AR	AR	Jharkhand JH	JH	Rajasthan RJ	RJ
Assam AS	AS	Karnataka KA	KA	Sikkim SK	SK
Bihar BR	BR	Kerala KL	KL	Tamil Nadu TN	TN
Chandigarh CH	CH	Lakshadweep LD	LD	Telangana TS	TS
Chattisgarh CG	CG	Madhya Pradesh MP	MP	Tripura TR	TR
Dadra and Nagar Haveli DN	DN	Maharashtra MH	MH	Uttar Pradesh UP	UP
Daman & Diu DD	DD	Manipur MN	MN	Uttarakhand UA	UA
Delhi DL	DL	Meghalaya ML	ML	West Bengal WB	WB
Goa GA	GA	Mizoram MZ	MZ	Other XX	XX
Gujarat GJ	GJ	Nagaland NL	NL		
Haryana HR	HR	Orissa OR	OR		

S.N	Country Name	Code	S.N	Country Name	Code	S.N	Country Name	Code	S.N	Country Name	Code
1	Afghanistan	AF	64	Dominican Republic	DO	127	Libya	LY	190	Saint Pierre and Miquelon	PM
2	land Islands	AX	65	Ecuador	EC	128	Liechtenstein	LI	191	Saint Vincent and the Grenadines	VC
3	Albania	AL	66	Egypt	EG	129	Lithuania	LT	192	Samoa	WS
4	Algeria	DZ	67	El Salvador	SV	130	Luxembourg	LU	193	San Marino	SM
5	American Samoa	AS	68	Equatorial Guinea	GQ	131	Macao	MO	194	Sao Tome and Principe	ST
6	Andorra	AD	69	Eritrea	ER	132	Macedonia	MK	195	Saudi Arabia	SA
7	Angola	AO	70	Estonia	EE	133	Madagascar	MG	196	Senegal	SN
8	Anguilla	AI	71	Ethiopia	ET	134	Malawi	MW	197	Serbia	RS
9	Antarctica	AQ	72	Falkland Islands	FK	135	Malaysia	MY	198	Seychelles	SC
10	Antigua and Barbuda	AG	73	Faroe Islands	FO	136	Maldives	MV	199	Sierra Leone	SL
11	Argentina	AR	74	Fiji	FJ	137	Mali	ML	200	Singapore	SG
12	Armenia	AM	75	Finland	FI	138	Malta	MT	201	Sint Maarten (Dutch part)	SX
13	Aruba	AW	76	France	FR	139	Marshall Islands	MH	202	Slovakia	SK
14	Australia	AU	77	French Guiana	GF	140	Martinique	MQ	203	Slovenia	SI
15	Austria	AT	78	French Polynesia	PF	141	Mauritania	MR	204	Solomon Islands	SB
16	Azerbaijan	AZ	79	French Southern Terr.	TF	142	Mauritius	MU	205	Somalia	SO
17	Bahamas	BS	80	Gabon	GA	143	Mayotte	YT	206	South Africa	ZA
18	Bahrain	BH	81	Gambia	GM	144	Mexico	MX	207	South Georgia/ South Sandwich Is.	GS
19	Bangladesh	BD	82	Georgia	GE	145	Micronesia	FM	208	South Sudan	SS
20	Barbados	BB	83	Germany	DE	146	Moldova	MD	209	Spain	ES
21	Belarus	BY	84	Ghana	GH	147	Monaco	MC	210	Sri Lanka	LK
22	Belgium	BE	85	Gibraltar	GI	148	Mongolia	MN	211	Sudan	SD
23	Belize	BZ	86	Greece	GR	149	Montenegro	ME	212	Suriname	SR
24	Benin	BJ	87	Greenland	GL	150	Montserrat	MS	213	Svalbard and Jan Mayen	SJ
25	Bermuda	BM	88	Grenada	GD	151	Morocco	MA	214	Swaziland	SZ
26	Bhutan	BT	89	Guadeloupe	GP	152	Mozambique	MZ	215	Sweden	SE
27	Bolivia	BO	90	Guam	GU	153	Myanmar	MM	216	Switzerland	CH
28	Bonaire, Sint Eustatius and Saba	BQ	91	Guatemala	GT	154	Namibia	NA	217	Syrian Arab Republic	SY
29	Bosnia and Herzegovina	BA	92	Guernsey	.	155	Nauru	NR	218	Taiwan, Province of China	TW
30	Botswana	BW	93	Guinea	GN	156	Nepal	NP	219	Tajikistan	TJ
31	Bouvet Island	BV	94	Guinea-Bissau	GW	157	Netherlands	NL	220	Tanzania	TZ
32	Brazil	BR	95	Guyana	GY	158	New Caledonia	NC	221	Thailand	TH
33	British Indian Ocean Territory	IO	96	Haiti	HT	159	New Zealand	NZ	222	Timor-Leste	TL

S.N	Country Name	Code	S.N	Country Name	Code	S.N	Country Name	Code	S.N	Country Name	Code
34	Brunei Darussalam	BN	97	Heard Island and McDonald Islands	HM	160	Nicaragua	NI	223	Togo	TG
35	Bulgaria	BG	98	Holy See (Vatican City)	VA	161	Niger	NE	224	Tokelau	TK
36	Burkina Faso	BF	99	Honduras	HN	162	Nigeria	NG	225	Tonga	TO
37	Burundi	BI	100	Hong Kong	HK	163	Niue	NU	226	Trinidad and Tobago	TT
38	Cambodia	KH	101	Hungary	HU	164	Norfolk Island	NF	227	Tunisia	TN
39	Cameroon	CM	102	Iceland	IS	165	North Mariana Islands	MP	228	Turkey	TR
40	Canada	CA	103	India	IN	166	Norway	NO	229	Turkmenistan	TM
41	Cape Verde	CV	104	Indonesia	ID	167	Oman	OM	230	Turks and Caicos Islands	TC
42	Cayman Islands	KY	105	Iran	IR	168	Pakistan	PK	231	Tuvalu	TV
43	Central African Repub	CF	106	Iraq	IQ	169	Palau	PW	232	Uganda	UG
44	Chad	TD	107	Ireland	IE	170	Palestine, State of	PS	233	Ukraine	UA
45	Chile	CL	108	Isle of Man	IM	171	Panama	PA	234	United Arab Emirates	AE
46	China	CN	109	Israel	IL	172	Papua New Guinea	PG	235	United Kingdom	GB
47	Christmas Island	CX	110	Italy	IT	173	Paraguay	PY	236	United States	US
48	Cocos (Keeling) Island	CC	111	Jamaica	JM	174	Peru	PE	237	U S Minor Outlying Islands	UM
49	Colombia	CO	112	Japan	JP	175	Philippines	PH	238	Uruguay	UY
50	Comoros	KM	113	Jersey	JE	176	Pitcairn	PN	239	Uzbekistan	UZ
51	Congo	CG	114	Jordan	JO	177	Poland	PL	240	Vanuatu	VU
52	Congo	CD	115	Kazakhstan	KZ	178	Portugal	PT	241	Venezuela, Bolivarian	VE
53	Cook Islands	CK	116	Kenya	KE	179	Puerto Rico	PR	242	Viet Nam	VN
54	Costa Rica	CR	117	Kiribati	KI	180	Qatar	QA	243	Virgin Islands, British	VG
55	C' te d'Ivoire	CI	118	Korea, North	KP	181	R©union	RE	244	Virgin Islands, U.S.	VI
56	Croatia	HR	119	Korea, South	KR	182	Romania	RO	245	Wallis and Futuna	WF
57	Cuba	CU	120	Kuwait	KW	183	Russian Federation	RU	246	Western Sahara	EH
58	Curaçao	CW	121	Kyrgyzstan	KG	184	Rwanda	RW	247	Yemen	YE
59	Cyprus	CY	122	Lao People's Republic	LA	185	Saint Barth©lemy	BL	248	Zambia	ZM
60	Czech Republic	CZ	123	Latvia	LV	186	Saint Helena, Ascension and Tristan daCunha	SH	249	Zimbabwe	ZW
61	Denmark	DK	124	Lebanon	LB	187	Saint Kitts and Nevis	KN			
62	Djibouti	DJ	125	Lesotho	LS	188	Saint Lucia	LC			

ANNEXURE - CKYC R-IV - KYC DOCUMENTS

Description of Documents

*Certified copy of any **one** of the following officially valid document*

[A certificate to the effect that Self-Certified copy has been verified from the original must be appended on the Self-Certified copy of the OVD) and copy verified from the original will be kept on record with AOF].

Proof of Identity and Address ---

1. Passport
2. Permanent Account Number (PAN) Card
3. Voter's Identity Card issued by the Election Commission of India
4. Driving license
5. Job card issued by NREGA duly signed by an officer of the State Government.
6. The letter issued by the Unique Identification Authority of India (UIDAI) containing details of name, address and Aadhar number.

Where 'simplified measures' are applied for verifying the identity of customers (low risk categorized customers) the following documents shall be deemed to be 'officially valid documents':

- (iii) Identity Card with applicant's photograph issued by Central / State Government. Departments, Statutory / Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
- (iv) Letter issued by a gazetted officer, with a duly attested photograph of the person.

Where 'simplified measures' are applied for verifying for the limited purpose of proof of address the following additional documents are deemed to be 'officially valid documents' (OVDs) :

- (i) Utility bill which is **not more than two months old** of any service provider (electricity, telephone, postpaid mobilephone, piped gas, water bill);
- (ii) Property or Municipal Tax receipt;
- (iii) Bank account or Post Office savings bank account statement;
- (iv) Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address;
- (v) Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation; and
- (vi) Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission India.

Note: *A customer is required to submit only one OVD for both proof of identity and for proof of address as part of KYC procedure. If the OVD for proof of identity does not have the proof of address (for e.g. PAN Card), then the customer is required to submit another OVD for proof of address.*