Know Your Client (KYC) <u>Application Form (For Individuals Only)</u>



B-50, Pravasi Industrial Estate, Goregaon (E), Mumbai - 400063 Telephone: +91-22-62434343, Email: sales@prostocks.com

Of the intermediary

Application No:

Please fill in ENGLISH and in BLOCK LETTERS with BLACK ink A.Identify Details (please see guidelines overleaf) 1.Name of Applicant (As appearing in supporting identification document) Middle Name Last Name Maiden Name (If any) **PHOTOGRAPH** Father's/Spouse Name _ Please affix the Recent passport size 2.Gender Male Female Transgender B.Marital Status Single Married C.Date Of Birth _____/ ___ photograph and Sigh 3.Nationality Indian Other ______ B.Country of Birth Indian Other _____ across it. 4.Status Please(✓) ☐ Resident individual ☐ Non Resident ☐ Foreign National (Passport copy mandatory for NRI's & Foreign Nationals) Please enclose a duly attested copy of your PAN Card Unique Identification Number (UID)/ Aadhaar, if any ___ 6. Proof of identity Submitted for PAN exempt Cases Please Tick (✓) Please see guideline 'D' overleaf) UID (Aadhaar) ☐ Passport ☐ Voter ID Driving License Other B. Address Details (please see guidelines overleaf) 1. Address for Correspondence or Overseas Address (Mandatory) For Non-Resident Applicant. City/ Town/Village* ______ District _____ Pin Code* -_____ Country* ___ State* -2. Proof of Address to be provided by Applicant. Please Submit ANY ONE of the following valid Document & tick (🗸) against the document attached. Passport Registered Lease/Sale Agreement of Resident ☐ Voter Identity Card ☐ Driving License Adhaar Card NREGA Job Card * Not more than 3 Months old Validity/Expiry Date of address Submitted. 3.Contact Details Tel (Off) (ISD)(STD) _____Tei (Res) (ISD) (STD) Mobile No. * (ISD) (STD) 4.Permanent Address of Resident Application If different from above B1 Line 1* _ Line 2 — _____ District _ Pin Code* _ City/ Town/Village* _____ ______ Country* _____ 5 . Proof of Address to be provided by Applicant. Please Submit ANY ONE of the following valid Document & tick (✓) against the document attached. Passport Registered Lease/Sale Agreement of Resident Voter Identity Card Driving License Adhaar Card ■ NREGA Job Card
■ NPR Other * Not more than 3 Months old Validity/Expiry Date of address Submitted. DECLARATION SIGNATURE OF APPLICANT I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take 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/We are aware that I/We may be held liable for it. I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. 2 🗷 FOR OFFICE USE ONLY Verified in Person ProStocks (Sunlight Broking LLP) Name of the organization: Staff / AP / SB / Name: ___ (Originals Verification) Self Certified Document Copies received. AP / SB Reg. No.: (Attested) True Copies of documents received Main Intermediary Designation: ____ Seal/Stamp Signature

Account Details Addition / Modification / Deletion Request Form

SUNLIGHT BROKING LLP B-50 PRAVSI INDUSTRIAL ESTATE, GOREGAON (E), MUMBAI-400063														
Application No.					Date	D	D	M	M	Υ	Υ		Υ	Υ
Please fill all the details in DP ID 1	Block Lett	ers in En		0 0	Clien	t ID								
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Account Holder's Detail														
Name of First / Sole Holder Name of Second Holder														
Name of Second Holder Name of Third Holder														
☐ I/We request to carry out the change of address / signature in the demat account ☐ I/We request to carry out the change of address / signature in the KRA and demat account I/We request you to make the following additions / modifications / deletions to my/our account in your records.														
DETAILS (Please specify change of address, bank details, telephone number etc.) Addir Modi Deleter (Please Specify Change of the Addir				E	Existing Details			New Details						
Attach an Annexure (with signature(s)) if the space above is found insufficient.														
First/Sole Holder				S	econd l	Holder				Thi	rd H	olde	r	
Name														
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Application No.	iddition /	iviounicat	lion / De	letions re	Date	D D	D D	M	M	Υ	Υ		Υ	Υ
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Name of Third joint Holde														
Modification requested for:														
[Specify reason]														

Depository Participant Seal and Signature

FATCA / CRS DECLARATION / SELF CERTIFICATION FOR INDIVIDUAL

To Sunlight Broking LLP

	First/Sole Holder	Second Holder (if any)	Third Holder (if any)				
Client Code:		NA	NA				
Demat Account No.							
1 Are you U.S. person	Yes No	Yes No	Yes No				
2 Country of tax residency (if resident of more than one country, please provide all)							
3 Country of citizenship (if citizen of more than one country, please provide all)							
4 Tax Identification Number (if tax resident of more than one ountry, please provide for all)							
5 Specify country of birth							
6 Specify city of birth and pin code							
7 Source of wealth	☐ Salary ☐ Business ☐ Gift ☐ Ancestral Property ☐ Rental Income ☐ Prize money ☐ Royalty ☐ Other(Please specify	☐ Salary ☐ Business ☐ Gift ☐ Ancestral Property ☐ Rental Income ☐ Prize money ☐ Royalty ☐ Other(Please specify	☐ Salary ☐ Business ☐ Gift ☐ Ancestral Property ☐ Rental Income ☐ Prize money ☐ Royalty ☐ Other(Please specify				
Declaration							

I/We hereby declare, agree and confirm the following:

- a) The details furnished above are true to the best of my knowledge and belief and shall undertake to inform you within 30 days, in case of any change in the above given status in future;
- b) If I/we am/are U.S. person or tax resident of a reportable foreign jurisdiction (other than U.S.), my account details, would be reported by you to the relevant tax authority, or information may be shared with concerned Asset Management Companies(AMCs) or such other product providers, to whom FATCA/CRS norms are applicable or to any of the Government Agencies/ Tax authorities/Regulators/Exchanges/Depositories of India or of any country other than India;

	First Holder Signature	Second Holder Signature	Third Holder Signature
Signature			
Name			
Date			