	SION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM - Private Secto	r
	tean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.)	
How did you hear about NPS F	nd / family Social media News paper / magazines TV / Radio Financial advisor / apps	Employer
PRAN Card & Kit* (refer sl no. 1 of instructions) eF	PRAN Card (please tick($$)) ii. Account Opening Kit (please tick ($$)) N Card Physical PRAN Card Through Email Physical Kit (Courier / post)	
Print my PRAN in Hindi	Ves Ne léves elses subseit details es es Assesures I	Paste ecent
Please select your category*	(`ornorato All (`itizon	sport size otograph
То,	(3.5 cm	× 2.5 cm size)
National Pension System Trust Dear Sir/Madam,		sign across stapple / clip
	e form in English and BLOCK letters (Refer general guidelines at instructions page.)	
CKYC Identifier	RA Code	
1. PERSONAL DETAILS: (Refer	No. 1 of the instructions) Use Annexure II if name exceeds the space	e provided below
Salutation*	Shri Smt. Kumari	
Applicant Name*		
Father's Name		
Mother's Name		
Either Father's or Mother's na		other's Name
Date of Birth*	d d m m y y y y	
Place of Birth*		
Country of Birth*		
Gender*	Male Female Transgender Nationality*	
Marital Status*	Unmarried Married Widow/Widower Divorcee	
Spouse Name* (if married)		
PAN*	or Form 60 furnished Submission of PAN or Form 6	_
Income Range (per annum)	Below 1 lac 1 lac to 5 lac 5 lac to 10 lac 10 lac to 25 lac 10 lac to 25 lac to 1 Cr	Above 1 Cr
Occupation Details*	Public Sector Private Sector Professional Self Employed Homemaker Others	
Please Tick if Applicable	Politically exposed person Related to Politically exposed person (Please refer inst	ruction no. 1)
2. PROOF OF IDENTITY AND A	DRESS* (Refer Sr. No. 2 of the instructions)	
Passport	Passport Expiry Date d d m m y y y	У
Driving License	Driving License Expiry Date d d m m y y y	У
Voter ID Card	Proof of possession of Aadhaar Provide la	st four digits
NREGA Job Card		PoP Certificate
National Population Register		refer section 12)
3. ADDRESS DETAILS* (As per	e proof submitted)	
Line 1		
Line 2		
District	State/U.T.	
Country	PIN Code	
4. CONTACT DETAILS*		
Mobile*	9 1 Telephone with STD code	
Email ID*		
E DANK DETAIL S* (Droof to be or	itted Defer Cr. No. 2 of the instructions)	
	itted - Refer Sr. No. 3 of the instructions)	
Account Type	Saving A/c Current A/c	
Bank A/c Number		
Bank Name	IFS Code III	
6. NOMINATION DETAILS* (Ref		
	of one or more persons belonging to his/her family. For nominating more than one person, submit Anne	exure III
	e by the subscriber on his/her marriage. se refer Nomination relationship matrix provided on instructions page.	
Nominee Name	FlilrIsItI	
		t
Relationship Name of Guardian	Age Date of Birth (In case of Minor) d d / m m /	y y y y y

Ver 2.1					CSRF-F
7. SELECTION OF PENSION FUND (PF) AND INVESTMENT CHOICE* (Refer Sr no. 5 of the instructions) 1. The maximum permitted Equity Investment is 75% of the total asset allocation.					
2. All Citizen: Selection of one PF is mandatory else form will be rejected. If no investment choice is selected, funds will be invested in Auto Choice (LC 50). 3. Corporate Model: The PF / Investment Choice may be exercised in consultation with your Employer.					
· .	* (Please Tick (√) one)	, , , , , , , , , , , , , , , , , , ,		nvestment Choice (Plea	ase Tick (√) one)
Aditya Birla Sunlife Pension Mgmt Ltd	Axis Pension Fu	nd Management Limited	Active Ch	noice mention the % s	hare in applicable asset class below
DSP Pension Fund Managers Private	Ltd HDFC Pension	Mgmt Co Ltd	_ · · · · · ·	Upto 100%) G (Upto 100	· · · · · · · · · · · · · · · · · · ·
ICICI Prudential Pension Funds Mgmt Co		Pension Fund Ltd	% Equity % 0	Corp Bonds % Govt. Se	ec. % Alt. Assets 100%
LIC Pension Fund Limited SBI Pension Funds Private Limited		on Fund Mgmt Ltd Inagement Private Limited	Auto Cho	Auto Choice Select one life cycle fund below	
UTI Retirement Solutions Limited			Conservative (LC25)) Moderate (LC50	Aggressive (LC75)
8. Activate my Tier-II account (pleat With the same bank, nominee & inve	.,,	·	,	etails as per Annexure I\	Providing PAN is mandatory
	9. FATCA* (Foreign Account Tax Compliance Act) & CRS DECLARATION (Refer Sr no. 6 of the instructions):				
I am a tax resident of India and not re US Person Yes No.	• /		of the country/ies me	,	
Particulars Country/countries of Tax Residency		Country (1)	Country (2)	Country (3)
	Address Line 1				
Address in the jurisdiction for Tax Residence	City/Town/Village State				
Tax Identification Number (TIN)/Functional equivale	ZIP/Post Code				
TIN/ Functional equivalent Number Issuing Country	1				
Validity of documentary evidence provided (Where	ver applicable)	ddmmyyyy	/	ddmmyyyy	ddmmyyyy
I have understood the information requirement of hereby confirm that the information provided by	,				: / Thumb Impression* of Applicant (refer instructions)
10. DECLARATION BY APPLICANT	•	,			(refer instructions)
furnished by me are true and correct, to the be informed to CRA / NPS Trust. I do not hold a submission of any false or incorrect information. Declaration under the Prevention of Money. I here by declare that the contribution paid by no fincome. I understand that NPS Trust has government authorities. I further agree that N	I have read and understood the terms and condition sof the National Pension System. The information and documents furnished by me are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to CRA / NPS Trust. I do not hold any pre-existing account under NPS. I understand that I shall be fully liable for submission of any false or incorrect information or documents. Declaration under the Prevention of Money Laundering Act, 2002 I here by declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the				
provisions of any law relating to prevention of money laundering. Date: d d m m y y y y y Place: Signature / Thumb Impression* of Applicant (*LTI in case of males and RTI in case of females to provided. Toe impression in case no hands)			es and RTI in case of females to be		
11. DECLARATION BY EMPLOYER	(All Details are Mandato	orv)			,
Date of Retirement d d	m m y y y y	,			
Employee Code/ID			Non-man	datory if not available	
CHO Registration Number			CBO Reg	istration Number	
It is certified that					the address and employment details
provided above are as per the service record us and got confirmed by him/her. Name of the Authorised Person	of the employee maintaine	d with us. It is further cer	tified that he/she has	read entries/entries hav	e been read over to him/herby her by
Designation of the Authorised Person					
Date	d d m m y y	VV			
Place			Signatur	re of Authorised person	Rubber stamp of the Employer
12. TO BE FILLED BY POP					
Receipt No. (17 digits)					
POP Registration Number	POF	P-SP Registration Number	<u> </u>		
Documents Received.		Or registration running	/1		
Existing Customer: I/ we hereby certify/confi					
branch/ccompliance with PMLA Rules. I/We further co	office. The KYC documents	available with us for th	is customer/client ma	atches the requirement	for opening NPS account and are in
Account (applicable in case of Bank PoP) Name of the Authorised Person					
Designation of the Authorised Person					
Date	d d m m	V V V			
	d d m m	у у у	Signatu	re of Authorised person	Rubber stamp of the Pop
Place					
		ACKNOWLEDGE	MENT		
Name of the Subscriber					
Application Receipt Date:	d d m m	у у у	У		
Initial contribution amount Mode of payment	Check/ DD	Debit Instruction	Cash	Stamp and S	ignature of PoP
			_		

Instructions for filling the subscriber registration form

General guidelines

- Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by PoP/PoP-SP are liable to be rejected. Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed / stamped by the PoP/PoP-SP office.

SI	Item No	Item Details		Instructions		
			In case a subscriber opts not to have a physical PRAN Card			applicable as under :
1	1	Option for PRAN Card	Account opening with Physical PRAN card in (Rs.)		eWelcome kit (Email)	
'	'	and kit	₹ 40.00	₹ 35.00	₹ 18.00	
			In case, subscriber has not selected any option (for PRAN ca not provided, physical PRAN kit will be sent.	, , ,	PRAN & eWelcome kit will I	pe sent. If Email ID is
		Fathers Name,	(a) If the name has more than 30 digits, fill Annexure II for the			
<u> </u>		Mother's Name	(b) If the applicant is an Orphan, he/she may leave the fields			
		Politically Exposed Person	Politically Exposed Person's (PEPs) are individuals who are the government, senior politicians, senior government, judicia			
		'	party officials.		·	, , ,
2	2	Proof of Idenity and Address	If the applicant is submitting Aadhaar as proof of Identity and submitted copy.	Address, the first 8 digits of the Aadh	haar number should be reda	cted / masked on the
3	5	Bank Details	For Tier I & Tier II account, bank details and documentary prestatement / bank certificate / letter from Bank containing app			
4	6	Nomination Details	(a) If a subscriber has family at the time of making a nomination, the nomination shall be in favor of one or more persons belonging to his/her family. Any nomination made in favour of a person not belonging to family shall be invalid; A fresh nomination shall be made by the subscriber upon marriage and any nomination made before such marriage shall deemed to be invalid; If at the time of making a nomination the subscriber has no family, the nomination may be in favour of any person or persons but if the subscriber subsequently acquires a family, such nomination shall forthwith be deemed to be invalid and the subscriber shall make a fresh nomination in favour on one or more persons belonging to his family. (b) In case of more than one nominee, the percentage share for each nominee should be in whole numbers and must be equal to 100. (c) Please refer Nomination relationship matrix provided below.			
5	7	Selection of Pension Fund (PF) & Investment Choice	Corporate applicants may exercise these choices if the optio	n is extended to them by the employe	er or else may be ignored.	
6	9	FATCA & CRS Declaration	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India: Jurisdiction(s) of Tax 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. 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). In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided. In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form.			
7	8	Tier-II activation	Asset Class A is not available under Tier-II. In case Subscrib details that of Tier-I where as he/she has chosen allocation Annexure IV for Tier-II mentioning the asset allocations.	in Asset Class A for Tier-I account	t, the applicant would be re	quired to submit the
8	9 & 10	Declaration / Signature by Applicant	In case the applicant is unable to affix signature, Left Thumb affixed and in case there is no hands, toe impression of the all one of whom should be the authorised official of PoP attestin	plicant to be provided. The thumb / to	oe impression should be atte	

Applicable CRA Charges (Excluding taxes)	Protean CRA
Account Opening Charges	Please refer sr. no. 1 above
Account Maintenance Charges (p.a.)	₹ 69
Charge per transaction	₹ 3.75

For more details on CRA charges, please refer NPS Trust website (www.npstrust.org.in)

		Nomination Relationship Matrix (Please mention relationship as per details given below)				
Marital Status	Male	Female	Transgender			
Unmarried	Mother And ther Rease specify the relationship if any other person	Mother Reference Reference Please specify the relationship if any other person	Mother Father Please specify the relationship if any other person			
Married	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Daughter in Law 7. Grandson 8. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter	1. Spouse 2. Son 3. Daughter 4. Mother 5. Father 6. Mother in Law 7. Father in Law 8. Daughter in Law 9. Grandson 10. Granddaughter			
Widow/ Widower	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter			
Divorcee	1. Son 2. Daughter 3. Mother 4. Father 5. Daughter in Law 6. Grandson 7. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter	1. Son 2. Daughter 3. Mother 4. Father 5. Mother in Law 6. Father in Law 7. Daughter in Law 8. Grandson 9. Granddaughter			

General Information for Subscribers

- The Subscriber can obtain the status of his/her application from CRA and respective Point of Presence (PoP). Subscribers are advised to retain the acknowledgement slip signed/ stamped by PoP/PoP-SP where they submit the application. For more information / clarifications, contact CRA:

Website: https://www.npscra.nsdl.co.in Call: 022-4090 4242

Address: Central Recordkeeping Agency (CRA)
Protean eGov Technologies Limited
(formerly NSDL e-Governance Infrastructure Limited)
1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
Lower Parel (W), Mumbai - 400013

Annexures - Subscriber Regis	tration Form for Private Sector applicants (Tick and fill applicable annexures below)
Annexure I - Print PRAN Card in Hindi (Fil	I the details in Devnagri script)
Applicant's First Name	
Middle Name	
Last Name	
Father / Mother's First Name	
Middle Name	
Last Name	
	ded the space provided on page 1 of the application form
Applicant's First Name	
Middle Name	
Last Name	
Father's First Name	
Middle Name	
Last Name	
Mother's First Name	
Middle Name	
Last Name	
Annexure III - Additional Nomination	For Tier - I For Tier - II For both Tier - I & Tier - II
Percentage Share Nominee I	Nominee II Total should be equal to 100%
Nominee I - Name F i r s t	Middle Last
Nominee I - Name Relationship Name of Guardian Relationship	Age Date of Birth (in case of Minor)
Name of Guardian F i r s t	Middle Last
(if nominee is a minor)	
Nominee II - Name F i r s t	Middle Last
Relationship	Age Date of Birth (in case of Minor)
Nominee II - Name Relationship Name of Guardian (f province is a piece)	Middle Last
(if nominee is a minor)	
Nominee III - Name F i r s t	Middle Last
Nominee III - Name Relationship Name of Guardian F i r s t	Age Date of Birth (in case of Minor) DDD/MM/YYYY
	Middle Last
Z (if nominee is a minor)	
Annexure IV - Activate Tier-II (with Differen	t Bank/Nomination/Investment Details - tick and fill as applicable)
PAN* copy o	f PAN to be attached
No change in Bank details Bar	nk details for Tier-II are as under:
Account Type Saving A/c	Current A/c
Bank A/c Number	
Bank Name	IFC Code
No change in Nominee details Nor	minee details for Tier-II are as under:
Nominee - Name First	
Relationship	Age Date of Birth (in case of Minor)
Name of Guardian	M i d d l e L a s t
(if nominee is a minor) In case you desire to nominate more than one person, fill	Appayura III abaya
	Investments details for Tier-II are as under:
Pension Fund* (Please Tic	
	xis Pension Fund Management Limited Active Choice mention the % share in applicable asset class below DFC Pension Mgmt Co Ltd E (upto 100%) C (Upto 100%) G (Upto 100%) Total
	otak Mahindra Pension Fund Ltd
	lax Life Pension Fund Mamt Ltd
	ATA Pension Management Private Limited
UTI Retirement Solutions Limited	Conservative (LC25) Moderate (LC50) Aggressive (LC75)
Name of the Applicant	<u>'</u>
Name of the Applicant Place	
Date D / D/ M/ M/	Signature / Thumb Impression* of Applicant
	(refer instructions)



Stock Holding Corporation of India Limited

Regd. Office: 301, Centre Point, Dr. Babasaheb Ambedkar Road, Parel, Mumbai - 400 012.

Phone: 91-22-6177 9400 to 09 Fax: 91-22-6177 9058 Website: www.shcil.com CIN: 67190MH1986GOI040506

CENTRAL KYC REGISTRY	Know Your C	ustomer (KYC) Ap	plication Form	Individual	

Important Instructions:				
A) Fields marked with '√' are mar	ndatory fields.	F) Please read section	n wise detailed guidelines / instructions at the end.	
B) Tick '√'wherever applicable		G) List of State / U.T of	code as per Indian Motor Vehicle Act, 1988 is availa	able at the end.
C) Please fill the form in English a	and in BLOCK letters.	H) List of two character	er ISO 3166 country codes is available at the end.	
Please fill the date in DD-MM-YYYY format.				
 E) For particular section update, p section number and strike off the be updated. 	please tick (' \checkmark ') in the box he sections not required to		KYC' check box is to be checked for accounts oper in non-face to face mode.	ned using
For office use only (To be filled by financial institutio	Application Type*	New Upd		YC update request)
, ,	Account Type*	Normal Min		. ,
KYC Mode* : Please Tick (✓) ☐ Normal ☐ EKYC OTP [EKYC Biometric O	nline KYC	☐ Digilocker	
1. PERSONAL DETAILS*	(Please refer instruction A	at the end)		
PAN*	Form 60	0 furnished		
	Prefix	First Name	Middle Name	Last Name
Name* (Same as ID proof)				
Maiden Name				
Father / Spouse Name				
Mother Name	DD (1444 (1000))			
Date of Birth*	DD / MM / YYYY			
Gender*	☐ M- Male	☐ F- Female	☐ T-Transgender	
Nationality*	Indian	Others (Please specify)		
Residential Status	Resident Individual	Non Resident Indian	Foreign National Person of Indian Ori	gin
Marital Status*	(Passport mandatory for Married	NRIs, PIOs and Foreign Nationals Unmarried		
Marital Status	□ Iviamed	□ Offinamed	Understand (Please specify)	_
2. PROOF OF IDENTITY AN	ND PERMANENT ADDRES	SS* (Please refer instruction I	3 at the end)	
I. Certified copy of OVD or equiva	alent e-document of OVD o	r OVD obtained through digita	al KYC process needs to be submitted (anyone of t	he following OVDs)
A- Passport Number				
☐ B- Voter ID Card				□ PHOTO*
C- Driving Licence				
D- NREGA Job Card				Affix recent passport size
E- National Population R	legister Letter			photograph & sign across
F- Proof of Possession o	f Aadhaar			Sign across
II E- KYC Authentication				
III Offline verification of Aad	lhaar			
Address				
Line 1*				
Line 2				

Pin/Post Code*

Business

Registered Office

Residential

Line 3
District*

Address Type* Residential / Business

City / Town / Village*_

ISO 3166 Country Code*

State/U.T Code* _

Unspecified

3. CURRENT / CORRESPONDENCE AD	DRESS DETAILS (Please refer instru	uction B at the end)
☐ Same as above mentioned address (In such cas	es address details as below need not be p	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		
E- National Population Register Letter		
F- Proof of Possession of Aadhaar		
II E- KYC Authentication		
III Offline verification of Aadhaar		
IV Deemed Proof of Address - Document Type	code	
V ☐ Self Declaration		
Address		
Line 1*		
Line 2		
Line 3		City / Town / Village*
District*	Pin/Post Code*	State/U.T Code* ISO 3166 Country Code*
Address Type* Residential / Business	Residential Business Registe	ered Office Unspecified
4. CONTACT DETAILS (All communications will	be sent to Mobile number/ Email-ID provid	ded) (Please refer instruction C at the end)
Tel. (Off)	Tel. (Res)	Mobile
Email ID		
5. REMARKS (if any)		
J. REMARKS (II ally)		
6. APPLICANT DECLARATION		
WAY I A SECOND I SECO	and the second and the first of the feet	the delice of the Continue
 "I/We hereby declare that the KYC details furnished be undertake to inform you of any changes therein, imm 	ediately. In case any of the above information	
misleading or misrepresenting, I am/We are aware that I/We hereby consent to receiving information from K	•	hove registered number / Fmail
address.	To the often anough one / Email on the as	5000 Togotorou Hullion / Elliuli
 I am/We are also aware that for Aadhaar OVD based consent to sharing my/our masked Aadhaar card with 		
and as applicable, with KRA and other Intermediaries v	•	
 I/We accord my/our voluntary consent for sharing/fet Registration Agency. 	ching/verifying my/our records maintained in	
Date: DD-MM-YYYY	Place:	Signature / Thumb Impression of Applicant
	. 18001	
7. ATTESTATION / FOR OFFICE USE ONLY		
Documents Received	☐ E-KYC data received from UI	IDAI Data received from Offline verification Digital KYC Process
Equivalent e-docu		DAI Data received from Offinite Verification Digital KTO Frocess
	_	
IPV DONE / KYC VERIFICATION O	CARRIED OUT BY	INSTITUTION DETAILS
Date	Y Y Y Na	ame
Emp. Name	Co	ode
Emp. Code		
Emp. Designation		
From Donate la		
Emp. Branch		
Emp. Branch		
(Employee Signature	>)	

CENTRAL KYC REGISTRY | Instructions / 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, Spouse'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 PoI does not have current address or address as per PoI is invalid or not in force.
- 3 State / U.T. Code and Pin / Post Code will not be mandatory for Overseas addresses
- 4 In Section 2, one of I, II and III is to be selected. In case of online E-KYC authentication, II is to be selected.
- 5 In Section 3, on of I, II, III and IV is to be selected. In case of online E-KYC authentication, II isto 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 9electricity, telephone, post-paid mobile phone, pipe gas, water bill)
- 02 Property or Municipal tax receipt.
- Pension or family pension payment orders (PPOs) issued or retired employees by Government Department or Public Sector Undertakings, it they contain the address.
- Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector Undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.
- 7 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from 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 the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Provide 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 'Contract 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	
Andaman & Nicobar	AN	Hin
Andhra Pradesh	AP	Jan
Arunachal Pradesh	AR	Jha
Assam	AS	Kar
Bihar	BR	Ker
Chandigarh	CH	Lak
Chattisgarh	CG	Ma
Dadra and Nagar Haveli	DN	Ma
Daman & Diu	DD	Ma
Delhi	DL	Me
Goa	GA	Miz
Gujarat	GJ	Na
Harvana	HR	Ori

State / U.T	Code
Himachal Pradesh	HP
Jammu & Kashmir	JK
Jharkhand	JH
Karnataka	KA
Kerala	KL
Lakshadweep	LD
Madhya Pradesh	MP
Maharashtra	MH
Manipur	MN
Meghalaya	ML
Mizoram	MZ
Nagaland	NL
Orissa	OR

State / U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarakhand	UA
West Bengal	WB
Other	XX
	701

List of ISO 3166 two- digit Country Code

Country	Country Code	Country	Country Code	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 of	MK	Saudi Arabia	SA
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
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	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	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	то
Burundi	BI	Hong Kong	НК	Niue	NU	Trinidad and Tobago	П
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 Panama	PA PA	United Arab Emirates	AE
China	CN	Israel	IL	Panama Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CN	Italy	IT	Paraguay Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Paraguay Peru	PF PE	United States United States Minor Outlying Islands	UM
Colombia	CO	Jamaica Japan	JIVI	Peru Philippines	PH	United States Minor Outlying Islands Uruguay	UY
Comoros	KM	Japan Jersey	JE	Pitcairn	PH	Uzbekistan	UZ
Congo	CG	Jordan	JO JE	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
the Cook Islands	CK	Vanua	KE	Puerto Rico	DD	Viot Nam	VN
Cook Islands Costa Rica	CR CR	Kenya Kiribati	KE KI	Oatar	PR QA	Viet Nam Virgin Islands, British	VN VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	of Koroa Ropublic of	KR	Pomania	RO	Wallis and Futuna	WF
Cuba	CU	Korea, Republic of	KK	Romania Russian Federation	RU	Wallis and Futuna Western Sahara	WF EH
	CW	Kuwait	KW	Russian Federation Rwanda	RW	Yemen	YE
Curação !Curação		Kyrgyzstan					
Cyprus Czech Republic	CY CZ	Lao People's Democratic Republic Latvia	LA LV	Saint Barthelemy !Saint Barthélemy Saint Helena, Ascension and Tristan da Cunha	BL SH	Zambia Zimbabwe	ZM ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Denmark Djibouti	DK DJ	Lesotho	LS	Saint Lucia	LC KN		
Dominica	DM	Liberia	LR		MF		
Dominica	DIVI	LIDEIIA	LN	Saint Martin (French part)	IVIF		