

## **CENTRAL KYC REGISTRY** KNOW YOUR CUSTOMER (KYC) Application Form / Individual

## **Important Instructions:**

- A) Fields marked with (\*) are mandatory fields.
  B) Please fill the form in English and in BLOCK letters.
  C) Please fill the date in DD-MM-YYYY format.
- KYC number of the applicant is mandatory for update application.
- E) For particular section updates, please tick (  $\checkmark$  ) in the box available before the section number and strike off the sections not required to be updated.

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