KNOW YOUR CUSTOMER FORM

1.	Name of Company f Partnership firm (name of all partners)				
2	Year of Establishment	Year of Establishment			
3	Nature of Company Own	e of Company Ownership		 ☐ Individual/Proprietary firm ☐ Company ☐ Trusts/Foundations ☐ Partnership firm 	
4	Name of Promoters / D	irectors Contac			
5	Contact Persons	Designation	Mobile No.	E-mail Identities	Signatory to Bank A/c. (Y/N)
		Partner/M.D.			
6	Nature of Business				
7	Permanent or Registered	address			
	Telephone				
	Fax number				
	Mobile Number				
	E-mail address				
	Website				
8	Branch address (if any)				
	Telephone				
	Fax number				
	E-mail address				
9	In case of CHA / NVOC	C / Consolidator			
	(a) License No. (Cop	py)			
	(b) Member of BCH	AA			

10	PAN No. (Mandatory)	
11	TAN No.	
12	Service Tax No.	
12	TIN No.	
14	IEC No. (Not mandatory for individuals)	
15	Bank Name	
16	Accounts Number	
17	Branch	
18	IFSC CODE	
19	Provision GSTN No.	
20	ARN No.	
	I/We hereby declare that the particulars given herein a best of my/our knowledge and belief, the documents so genuine and obtained legally from the respective issuin the aforementioned particulars, I/we undertake to notif particulars may be relied upon including all shipments individual so authorized and mentioned in above. I/we particulars to the customs and other regulatory authori order to transport and customs clear my/our shipments	abmitted in support of this Form KYC are ag authority. In case of any change in any of y you in writing failing which the above documents executed and tendered by the hereby authorize you to submit the above ies on my/our behalf as may be required in
	Place: Si	gnature
	Date: N	ame:
	O	ficial Seal (for all other than individuals)

**Documents required for Customers / Vendor Registration: 1 Individual (i) Passport (ii) PAN card (minimum two (iii) Voter's Identity card documents (iv) Driving licence required) (v) Bank account statement (vi) Ration card 2 (i) Certificate of incorporation Company (ii) Memorandum of Association (all docs required) (iii) Articles of Association (iv) Power of Attorney granted to its managers, officers or employees to transact business on its behalf (v) PAN (or) Copy of PAN allotment letter (vi) Copy of telephone bill for address proof 3 Partnership firm (i) Registration certificate, if registered (ii) Partnership deed (iii) Power of Attorney granted to a partner or an employee of the firm to transact business on its behalf (all docs required) (iv) Any officially valid document identifying the partners and the person holding the Power of Attorney and their addresses (v) Telephone bill in the name of firm/ partners

FOR INTERNAL USE:

1	WEBSITE: a) Has the website been checked?	YES / NO
	b) Does the details on website tally with the above information?	YES / NO
2	Have we visited the office? (Please mention the person visited).	YES / NO
		Person Name :

4	Remarks / Notes, If any :	