



Know Your Client Application Form (For Individuals only)

(Please fill the form in English and in BLOCK Letters) Fields marked with '**' are mandatory fields

Application Type*

 New

 Update KYC No.

KYC Mode*

 Normal

 EKYC OTP

 EKYC Biometric

 Online KYC

 Offline KYC

 Digilocker

1 Identity Details (Please refer instruction A at the end)

PAN Please enclose a duly attested copy of your PAN Card

Name* (same as ID Proof)

Maiden Name (If any*)

Father / Spouse Name*

Mother Name*

Date of Birth*

Place of Birth*

Country of Birth*

Gender* Male

Female

Transgender

Marital Status* Married

Unmarried

Others _____

Citizenship* Indian

Others - Country Country Name

Residential Status* Resident Individual

Non Resident Indian

Foreign National

Person of Indian Origin



2 Proof of Identity (PoI)* (for PAN exempt Investor)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

Aadhaar No.

Voter ID Card

Passport Number

Passport Expiry Date

Driving Licence

Driving Licence Expiry Date

as per Indian Motor Vehicle Act, 1988

NREGA Job Card

Others (any document notified by the central government)

Identification No

3 Proof of Address (PoA)* 3.1 Current / Permanent / Overseas Address Details

Address

City / Town / Village*

District*

Pin Code*

State*

Country*

Address Type* Residential / Business

Residential

Business

Registered Office

Unspecified

(Certified copy of any one of the following Proof of Address [PoA] need to be submitted)

Proof of Address*

Document Type

Proof Number

Proof Expiry Date

3.2 Correspondence / Local Address Details

Same as Current / Permanent / Overseas Address details

Address

City / Town / Village*

District*

Pin Code*

State*

Country*

(Certified copy of any one of the following Proof of Correspondence Address need to be submitted)

Proof of Address*

Document Type

Proof Number

Proof Expiry Date

4 Contact Details (All communications will be sent on provided Mobile no. / Email-ID)

Email ID

Mobile

Tel. (off)

Tel. (Resi)

*Please provide family declaration page number 6 if Email ID/Mobile already exist in other Client Code

Cont....

5 Other Details

Gross Annual Income Details

Income Range per annum : Upto Rs. 1,00,000 Rs. 1,00,001 to Rs. 5,00,000 Rs. 5,00,001 to Rs. 10,00,000 Rs. 10,00,001 to Rs. 25,00,000
 Rs. 25,00,001 to Rs. 100,00,000

[Net worth should not be older than 1 year] Net worth as on (Date) _____

Occupation:

Private / Public Sector Govt. Service Business Professional Agriculture Retired
 Housewife Student Self Employed Others (Specify) _____

Please tick, if applicable:

Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP)

Source of Wealth /Income :

6 Related Person Deletion of Related Person KYC Number of Related Person (if available*) _____

Related Person Type* Guardian of Minor (where sole holder is a minor) Assignee Authorized Representative

Name* _____

Relationship of Guardian with Minor _____

Proof of Identity (PoI) of Related Person*

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

Aadhaar No. _____ PAN Card No. _____
 Passport Number _____ Passport Expiry Date _____
 Driving Licence _____ Driving Licence Expiry Date _____ as per Indian Motor Vehicle Act, 1988
 NREGA Job Card _____ Voter ID Card _____
 Other (any document notified by the central government) _____ Identification No _____

7 Remarks (If any)

8 Applicant Declaration

- 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 hereby consent to receiving information from CVL KRA & Central KYC Registry 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.

[Signature / Thumb Impression]

2/2

Date _____ Place _____

Signature / Thumb Impression of Applicant
Signature correct as per our Record

9 FOR OFFICE USE ONLY

UCC Code allotted to the Client: _____
Client ID 1 2 0 3 3 5 0 0
 I N 3 0 1 4 7 7

Risk Category: Low Medium High

In Person Verification done by Employee/ Branch Authorise Person only.

(Original Verified) True Copy of documents received
 (Self - Attested) Self Certified documents copies received

Name of the Organization	BONANZA PORTFOLIO LTD.
NSE / BSE / AP Registration Number	
Person name doing IPV / docs / PAN verification	
Date of IPV Done / Document Verification	
Signature of the Person	
Employee Designation	
Employee code	
Employee Name	



I/We undertake that we have made the client aware of 'Policy and Procedures', tariff sheet and all the non-mandatory documents. I/We have also made the client aware of 'Rights and Obligations' document (s), RDD, 'Do's and Dont's' and Guidance Note. I/We have given/sent him a copy of all the KYC documents. I/We undertake that any change in the 'Policy and Procedures', tariff sheet and all the non-mandatory documents would be duly intimated to the clients. I/We also undertake that any change in the 'Rights and Obligations' and RDD would be made available on company website www.bonanzaonline.com, for the information of the clients.

Authorised Signatory	For Bonanza Portfolio Ltd. Authorised Signatory	Place	Mumbai
Authorised Signatory Name		Date	