

Know Your Customer (KYC) Application Form (Non Resident Individuals)

Please fill the information in BLOCK Letters and

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The information is sought under Prevention of Money Laundering Act, 2002, the rules notified thereunder and NHB's guidelines on Know Your Customer, Anti Money Laundering and Reporting requirements under Section 285 BA of the Income-Tax, 1961. For existing Depositor, the information furnished herein will supersede the information available in the records of HDFC.

Customer's Details (as appearing in your supporting identification document)

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CKYC Identifier	Gender Date of Birth (Compulsory)				
(Skip if not alloted) Prefix	M/F/T				
Name					
Guardian's Name (in case of Minor)	D D M M Y Y				
Maiden Name (if any) Father/Spouse					
Mother Name	Paste latest passport size				
Address	photograph with signature (DO NOT STAPLE)				
Line 1 Line 2	IGNORE if already				
Line 3	submitted earlier				
City Pin	Country				
City of Birth Country of Birth	th				
Nationality Citizenship					
Country/Countries of Tax Residence i)	ii) iii)				
Tax Payer Identification Number or functional equivalent i)					
Annual Income ☐ Below ₹ 2 Lacs ☐ ₹ 2 Lacs ☐ ₹ 5 Lacs ☐ ₹ 5 Lacs ☐ ₹ 10 Lacs < ₹ 25 Lacs ☐ ₹ 25 Lacs ☐ ₹ 50 Lacs < ₹ 10 Crore & above Occupation ☐ Private Sector Service ☐ Public Sector Service ☐ Govt. Sector Service ☐ Self Employed ☐ Business ☐ Professional ☐ Retired ☐ Housewife ☐ Student ☐ Others (Please specify)					
	Proof of Address				
Proof of Identity					
PAN Card	UID (Aadhaar)				
(Mandatory) UID (Aadhaar) No.	Expiry Date Passport Number				
Passport No.	Driving Licence				
Driving Licence No.	D D M M Y Y				
Voter ID Card No.	Telephone/ Electricity / Gas Bill				
	Bank account Statement				
DECLARATION					
I hereby declare that the information provided by me above as well as in the documentary evidence provided by me are to the best of my knowledge and belief, true, correct and complete. In case any of the above information is found to be false, untrue, misleading or misrepresenting, I am aware that I may be held liable for it. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I certify that the information provided above is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income Tax Rules, 1962. I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I permit/authorise HDFC Ltd to collect, store, communicate and process information relating to the account and all transactions therein, by HDFC Ltd. and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign. I undertake to inform you immediately of any changes that may take place in the information provided above as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide revised self-certification along with documentary evidence. I also agree that my failure to disclose any material fact known to me, now or in future, may invalidate my application and HDFC Ltd. but the within its right to put restrictions in the operations of my account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by HDFC Ltd. If the deficiency is not remedied by me within the stipulated period, thereby accept and acknowledge that HDFC Ltd shall have the right and authority to carry out investigations from the inf					
Place:	Signature :				
Date: D D M M Y Y					
Attestation/For Office Use Only					
Documents Received Certified Copies	Scan Sr. No. Checked by				
KYC VERIFICATION CARRIED O	UT BY INSTITUTION DETAILS				
Emp. Name :	Name: HOUSING DEVELOPMENT FINANCE				
Emp. Code :	CORPORATION LIMITED				
Designation :	n IN2294				
Emp. Branch :	Institution storms				
Date :	Institution stamp				
Employee signature					