







### Document Code Description

1. Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
2. Letter issued by a gazetted officer, with a duly attested photograph of the person.

#### D Clarification / Guidelines on filling 'Proof of Address [PoA] - Current / Permanent / Overseas Address details' section

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
3. In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4. 1.

### Document Code Description

1. Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
2. Property or Municipal Tax receipt.
3. Bank account or Post Office savings bank account statement.
4. Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
5. Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation.
6. Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India.

#### E Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'

#### F Clarification / Guidelines on filling 'Contact details' section

1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
2. Do not add '0' in the beginning of Mobile number.

#### G Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

#### H Clarification / Guidelines on filling 'Related Person details – Proof of Identity [PoI] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

### List of two – digit state / U.T codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code	State / U.T	Code	State / U.T	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

## 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	AI	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	BH	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	BO	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	IO	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	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
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	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		



DP ID : IN301516

Application Type\*  New  Update

KYC Number

**Annexure A1**

**Correspondence / Local Address**

Please read the Instructions before filling the form.

**1. CORRESPONDENCE / LOCAL ADDRESS DETAILS (Please see instruction E at the end)**

Same as Current / Permanent / Overseas Address details

Line 1\*

Line 2

Line 3

District\*

Pin/Post Code\*

City/ Town/ Village\*

State/U.T Code\*

ISO 3166 Country Code\*

**2. CONTACT DETAILS (All communications will be sent on provided Mobile no./ Email-ID) (Please refer instruction F at the end)**

Tel.(Off) FAX

Tel.(Res) Email ID

Mobile

FAX

Email ID

**3. APPLICANT DECLARATION**

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake 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 aware that I may be held liable for it.

Signature / Thumb Impression

Date:

Place:

Signature / Thumb Impression of Applicant



DP ID : IN301516

Application Type\*  New  Update  
 KYC Number

**Annexure B1**

**Related Person**

Please read the Instructions before filling the form.

**1. DETAILS OF RELATED PERSON (Please refer instruction G at the end)**

Addition of Related Person  Deletion of Related Person

KYC Number of Related Person (if available\*)

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative

Name  
 Prefix    First Name               Middle Name              Last Name

(If KYC number and name are provided, below details of section 6 are optional)

PROOF OF IDENTITY [PoI] OF RELATED PERSON\* (Please see instruction (H) at the end)

A- Passport Number           Passport Expiry Date

B- Voter ID Card

C- PAN Card (Mandatory)

D- Driving Licence                 Driving Licence Expiry Date

E- UID (Aadhaar) (Mandatory)

F- NREGA Job Card

Z- Others (any document notified by the central government)           Identification Number

S- Simplified Measures Account - Document Type code Identification Number

**2. APPLICANT DECLARATION**

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake 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 aware that I may be held liable for it.

Signature / Thumb Impression

Date:           Place:

Signature / Thumb Impression of Applicant

**3. ATTESTATION / FOR OFFICE USE ONLY**

Documents Received  Certified Copies  Original Verified and Self-Attested Document Copies Received

IPV AND KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Emp. Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Emp. Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	[Institution Stamp]
Emp. Designation <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Emp. Branch <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
[Employee Signature]	





Date  DP ID  Client ID

- I/We wish to make a nomination. [As per details given below]
- I/We wish to cancel the nomination made by me/ us earlier and consequently all rights and liabilities in respect of beneficiary ownership in the securities held by me / us in the said account shall vest in me/ us. [Strike off the nomination details below]

Nomination Details			
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all securities held in the Depository by me / us in the said beneficiary owner account in the event of my / our death.			
Nomination can be made upto three nominees in the account.		Details of 1st Nominee	Details of 2nd Nominee
1	Name of the nominee(s) (Mr./Ms.)		
2	Share of each Nominee	Equally [If not equally, please specify percentage]	% % %
<i>Any odd lot after division shall be transferred to the first nominee mentioned in the form.</i>			
3	Relationship With the Applicant ( If Any)		
4	Address of Nominee(s)		
	PIN Code		
5	Mobile/Telephone No. of nominee(s)		
6	Email ID of nominee(s)		
7	Nominee Identification details – (Please tick any one of following and provide details of same)		
	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID		
Sr. Nos. 8-14 should be filled only if nominee(s) is a minor:			
8	Date of Birth {in case of minor nominee (s)}		
9	Name of Guardian (Mr./Ms.) {in case of minor nominee(s) }		
10	Address of Guardian(s)		
	PIN Code		
11	Mobile/Telephone no. of Guardian		
12	Email ID of Guardian		
13	Relationship of Guardian with nominee		
14	Guardian Identification details – [Please tick any one of following and provide details of same]		
	<input type="checkbox"/> Photograph & Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity <input type="checkbox"/> Demat Account ID		
<b>Name(s) of holder(s)</b>			<b>Signature(s) of holder</b>
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)			X
Second Holder (Mr./Ms.)			X
Third Holder (Mr./Ms.)			X
<b>Signature of Witness for Nomination (Mandatory)</b>			
Name of the Witness		Address	Signature of witness
			X

## Declaration

The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/we hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake 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. In case non-resident account, I/we also declare that I/we have complied and will continue to comply with FEMA regulations. I/we acknowledge the receipt of copy of the document, "Rights and Obligations of the Beneficial Owner and Depository Participant".

	Name(s) of holder(s)	Signature(s) of holder
Sole/ First Holder/ Guardian (in case sole holder is minor) (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

### STANDING INSTRUCTION FOR DEBITING CHARGES

Operative Bank Account No

RBI Approval date

Whether SB- staff Account ? [ Applicable only to Federal Bank Employee accounts ] :  YES  NO

THE MANAGER

BRANCH:.....

**The Manager**

Depository Services Division  
Federal Towers, First Floor,  
Marine Drive , Kochi – 682 031.

Dear Sir ,

We hereby authorise you to debit my/our operative Bank A/c with the Federal Bank Ltd. for all the charges relating to my /our Demat Account. Please treat this authorisation as irrevocable till further instruction from our side is received in writing and duly acknowledged by you.

### SCHEDULE OF CHARGES FOR DEPOSITORY PARTICIPANT SERVICES

ACTIVITY	PROPOSED CHARGES FOR INDIVIDUAL ACCOUNTS	
	Regular Services Demat Account(RSDA)	Basic Services Demat Account(BSDA)
Account Opening	Nil	Nil
Account Closing	Nil	Nil
Demat	Rs.5/- per certificate plus mailing charge Rs. 100/- per request.	Rs.5/- per certificate plus mailing charge Rs. 100/- per request.
Remat	(a) Rs. 25/- per certificate per request (b) Rs.25/- for every hundred securities or part thereof subject to max fee of Rs 500000/- whichever is higher plus mailing charge Rs.100/-	(a) Rs. 25/- per certificate per request (b) Rs.25/- for every hundred securities or part thereof subject to max fee of Rs 500000/- whichever is higher plus mailing charge Rs.100/-
Custody fee	Nil	Nil
Transaction Charge	Credit	Nil
	Debit	(a) Rs 25/- per instruction (b) Rs 15/- per instruction for resident Fed-e-Trade customers
Pledge Creation / confirmation*	Rs. 75/- per transaction (per ISIN)	Rs. 75/- per transaction (per ISIN)
Pledge Closure/ Closure confirmation	Rs. 75/- per transaction (per ISIN)	Rs. 75/- per transaction (per ISIN)
Pledge Invocation	Rs. 75/- per transaction (per ISIN)	Rs. 75/- per transaction (per ISIN)
Annual Maintenance charge	a) Rs.400/- per annum collected quarterly for individual accounts	a) Nil for holding value up to Rs.50,000/- b) Rs.100/- p.a. for holding value from Rs.50,001 to Rs.2,00,000/- c) For holding value above Rs.2,00,000/- the tariff for Regular Service Demat Accounts (RSDA) will be applicable.

\*No charge for same DP (w.r.t. pledge confirmation)

### Charges for Ideas & Speed-e

IDEAS	NIL		
SPEED-e @	Password User	Rs. 30/- Per Quarter	
	Smart Card/E- token	<i>No. of instructions submitted through SPEED-e facility during the quarter</i>	<i>User fee per quarter</i>
		>=50,000	1000
		>=5,000 and <50,000	750
	<5,000	500	
Freeze Instructions	Rs 125/- per Instruction		

- A onetime charge of Rs 1,000/- (minimum) towards the cost of Smart Card/E-token will be charged extra for those who opt for Speed-e operating through Smart card /E-token.
- All charges are exclusive of taxes, levies and other statutory charges
- Schedule of charges is in tune with NSDL guidelines and is subject to change as and when NSDL revises the rates, giving 30 days notice to the client.
- An individual having more than one depository accounts as a sole / first holder across depositories is not eligible to opt for BSDA facility.
- The charges are also subject to revision at the discretion of the Bank.
- Value of holding will be calculated in accordance with rates provided by NSDL.
- Transaction charges, Custody charges, Demat and Remat charges are payable on a quarterly basis.
- Pledge charges are payable at the time of respective request.
- Mailing charges are payable at the time of request.

	Name(s) of holder(s)	Signature(s) of holder
Sole/ First Holder/ (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

**Declaration - Same Mobile number or Email Address**
**\*\* In case of joint account , declaration should be obtained from each account holder .**

[Please tick (3) wherever applicable]

DP ID <input type="text" value="IN301516"/>	Client ID <input type="text"/>	Date <input type="text" value="DD"/> <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="MM"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/> <input type="text" value="YY"/>
Name of Account Holder <input type="text"/>		
Mobile Number <input type="text"/>	E-Mail <input type="text"/>	

 I hereby declare that the aforesaid mobile number or E-mail ID belongs to  
 Me or  My family (spouse, dependent children and dependent parents).

<b>Signature</b>  <b>Signature of account holder</b>
--

I /We want to avail Depository services for my/our Demat account under (Mandatory) <input type="text"/> BSDA <input type="text"/> RSDA status			
SIGNATURE	1st Holder	2nd Holder	3rd Holder
	X	X	X

- Notes :
1. All communication shall be sent at the address of the Sole/First holder only.
  2. Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
  3. Instructions related to nomination, are as below:
    - I. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non- individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly all joint holders will sign the nomination form.
    - II. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
    - III. The Nominee shall not be a trust, society, body corporate, partnership firm, karta of Hindu Undivided Family or a power of Attorney holder. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
    - IV. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
    - V. Transfer of securities in favour of a Nominee shall be valid discharge by the depository and the Participant against the legal heir.
    - VI. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate, partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
    - VII. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee.
  4. For receiving Statement of Account and copy of Rights and Obligations of the Beneficial Owner and Depository Participant in electronic form:
    - I. Client must ensure the confidentiality of the password of the email account.
    - II. Client must promptly inform the Participant if the email address has changed.
    - III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior Notice.
  5. Strike off whichever is not applicable.

AT THE BRANCH	AT DP OFFICE
Confirmed that all the relevant documents are completely verified and filled.	Verified by :
Manager (Signature with SP No.) X Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Authorised Signatory: Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>

DOCUMENTS CHECKLIST			
	Sole/First Holder	Second Holder	Third Holder
Pan & Aadhaar Copy - Self Attested and Branch Verified/attested	✓	✓	✓
Address Proof * - Self Attested and Branch Verified/attested	✓	✓	✓
Bank Account Statement- Self Attested And Branch Verified/attested	✓		
One Recent Passport Size Photograph for KYC	✓	✓	✓
<small>*Address proof mentioned in KYC form should be exactly matching in the proof given            *In case of joint account, separate KYC form and Declaration for same mobile number / Email ID should be obtained from each joint holder(s). [ Forms are available in Drisya - Reference-Depository Forms]            *For NRIs, FATCA &amp; FEMA declaration need to be obtained.[ Forms are available in Drisya - Reference-Depository Forms</small>			

SIGNATURE CHECKLIST				
Document	Page no	Client Signature	Witness	Branch Official Signature
Signature below photograph	1	✓		
Signature in KYC Application Form	3	✓		✓
Signature in Nomination page [Only if the client wish to make nomination ]	9	✓	✓	
Signature under Declaration	10	✓		
Schedule Of Charges	11	✓		
Declaration – Same Mobile/Email Id	11	✓		
Signature for Confirming BSDA/RSDA status	11			
Confirmation – At the branch	12			✓
Signature in proof of ID & Proof of address submitted		✓		✓

### Acknowledgement

The Manager

Branch:.....  
.....

Received the application from Mr./Ms..... as the sole/first holder alongwith ..... and .....as the second and third holders respectively for opening of a depository account. Please quote the DP ID & Client ID allotted to you in all your future correspondence.

Date

Branch Seal & Signature