**KYC Form (Individual)**

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| Date: Click or tap to enter a date. | Customer ID:  Dedicated A/C manager:  Mobile:  Email:  (For office use) |

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| **A. Point of Contact (POC)** |

Full Name: Click or tap here to enter text.

National Identity Number/ Passport Number: Click or tap here to enter text.

Date of birth: Click or tap to enter a date.

Phone: Click or tap here to enter text. Phone (Alt.): Click or tap here to enter text.

Email: Click or tap here to enter text. Email (Alt.): Click or tap here to enter text.

Electronic Tax/TIN Number (if applicable): Click or tap here to enter text.

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| **B. Nominee Details** |

Full Name: Click or tap here to enter text.

National Identity Number/ Passport Number: Click or tap here to enter text.

Date of birth: Click or tap to enter a date.

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| **B.**  **Address Details** |

Address for Correspondence: Click or tap here to enter text.

City: Click or tap here to enter text. State/Province: Click or tap here to enter text.

Postal/Zip Code: Click or tap here to enter text. Country: Click or tap here to enter text.

**Proof of Address to be Attached:**  Passport  Driving License  Latest Telephone Bill  Latest Gas Bill

Latest Electricity Bill  National Identity Card  Latest Bank Statemen

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| **F.**  **Declaration** |

I hereby declare that the information provided in this form is accurate and complete. I confirm that any information is found incorrect and/or incomplete that leads a violation of regulations may initiate legal actions, and I accept that I am the responsible party for any and all charges, penalties and violations.

Signature



Name: Click or tap here to enter text.

Date Signed: Click or tap to enter a date.