

NOBLE CO-OPERATIVE BANK LTD.

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

Important Instructions:

- A) Fields marked with* are mandatory.
- B) Self-Certification of documents is mandatory
- C) Please fill the form in English and in BLOCK letters.
- D) Please fill the date in DD-MM-YYYY format.
- E) Please read section wise detailed guidelines / instructions at the end.

F) List of State/U.T code as per Indian Motor Vehicle Act. 1988 is available at the end.

G) List of two character ISO 3166 country codes is available at the end.

H) KYC number of applicant is mandatory for update application.



For office use only:	Application Type*	New □ Update	Account Type* ☐ Normal	☐ Small			
(To be filled by financial inst	titution) KYC Number		(Mandatory for K	(YC update request)			
1. PERSONAL DETAILS	Please refer instruction A at the end						
	Prefix First Name	Э	Middle Name	Last Name			
Name* (Same as ID proof)							
Maiden Name (If any*)							
Father/Spouse Name*							
Mother Name*							
Date of Birth*	DD MM YYYY			РНОТО			
Gender*	☐ M-Male	☐ F-Female	☐ F-Female ☐ T-Transgender				
Marital Status*	☐ Married	Unmarried	☐ Unmarried ☐ Others				
Nationality*	☐ IN-Indian	Others (ISO 316	6 Country Code ()				
Residential Status*	Resident Individual	☐ Non Resident Inc	dian				
	☐ Foreign National	☐ Person of Indian	Origin	CHARLEST SECURIORS			
Occupation Type*	☐ S-Service ☐ Private Sector	☐ Public Sector	☐ Government Sector	1 1 2 2 2 2 2 2			
	O-Others Professional	☐ Self Employed	☐ Retired ☐ Housewife ☐ Studen	nt			
	B-Business	IND DAY O					
	☐ X-Not Categorised `			and the second			
Place/City of Birth* 3 PROOF OF IDENTITY (F (Certified copy of any one of the	Pol)* (Please refer instruction C at the following proof of Identity [Pol] needs	ISO 3166 Count	ry code of Birth* Passport Expiry Date				
☐ A-Passport Number ☐ B-Voter ID Card ☐ ☐ C-PAN Card			Passport Expiry Date D D M	W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
☐ D-Driving Licence [☐ E-UID (Aadhaar)			Driving Licence Expiry Date	D MM YYYY			
☐ F-NREGA Job Card · ☐ Z-Others (any document notified)	fied by the central government)		Identification Number				
4. PROOF OF ADDRESS	(PoA)*						
	NT/OVERSEAS ADDRESS DETAILS the following Proof of Address (PoA) in		the end)	on the second			
Address Type*	Residential/Business	Residential	esidential Business Registered Office Unspecified				
		Driving Licence	☐ UID (Aadhaar)				
		NREGA Job Card Others					
Address							
Line1*				Timmin			
Line2							
Line3			City/Town/Village*				
State/U.T code*	Pin/Post Code	*	ISO 3166 Country Code*				

☐ 4.2 CORRESPONDE	NCE / LOCAL ADDRESS DETAILS* (Please see instruction E at the end)
☐ Same as current / Perma	nent/Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')
Line1*	
Line2	
Line3	City/Town/Village*
State/U.T code*	Pin/Post Code* ISO 3166 Country Code*
4.3 ADDRESS IN THE J	JURISDICTION WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)
☐ Same as current /Permar	nent/Overseas Address details Same as Correspondence / Local Address details
Line1*	
Line2	
Line3	City/Town/Village*
State*	ZIP / Post Code* ISO 3166 Country Code*
5. CONTACT DETAI	ILS (All communication will be sent on provided mobile no./Email-ID) (Please refer instruction F at the end)
Tel. (Off)	Tel.(res) Mobile
FAX	Email ID Email ID
☐ 6. DETAILS OF REL	LATED PERSON* (In case of additional related persons, please fill 'Annexure B1') (Please refer instruction G at the end)
☐ Addition of Related Pers	son Deletion of Related Person KYC Number of Related person (if available*)
Related Person Type*	☐ Guardian of Minor ☐ Nominee ☐ Assignee ☐ Authorized Representative ☐ Beneficial Owner ☐ Beneficiary
	Prefix First Name Middle Name Last Name
Name*	Thou that terms wildle traine Last raine
Trains	(If KYC Number and name are provided, below details of section 6 are optional)
PROOF OF IDENTITY [Pol	I] OF RELATED PERSON* (Please see instruction (H) at the end)
☐ A-Passport Number	Passport Expiry Date D D MM Y Y Y Y
☐ B-Voter ID Card	Passport Expiry Date Of Digital William Transport
☐ C-PAN Card	Driving Licence Expiry Date DO MM Y Y Y Y
□ D-Driving Licence	Driving Licence Expiry Date DD MM YYYYY
☐ E-UID (Aadhaar)	
☐ F-NREGA Job Card	
☐ Z-Others (any document	notified by the central government) Identification Number
7. REMARKS (If any)	
+	
8. APPLICANT DECLA	RATION
	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 In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that
I/we may be held liable for it.	. In case any of the above information is found to be false of diffuse of misrepresenting, if we arrive that
	ay be shared with Central KYC Registry. ving information from central KYC Registry through SMS/Email on the above registered number/email address.
Date: DD MM Y	Place: Signature/Thumb Impression of Applicant
9. ATTESTATION/ FOR	OFFICE USE ONLY
Documents Received	□ Self-Certified □ True Copies □ Notary Risk Category □ High □ Medium □ Low
IN PERSON	VERIFICATION CARRIED OUT BY INSTITUTION DETAILS
Identity Verification	Done Date Date Name Name
Emp. Name	Code TITITITITITITITITITITITITITITITITITITI
Emp. Code	
Emp. Designation	
Emp. Branch	
Linp. Dranch	
	Supply if the second code in the

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

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	1	Punjab	PB 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
Soa	GA	Mizoram	M	Other	X
Gujarat	GJ	Nagaland	NL		
Harvana	HR	Orissa	OR		

List of ISO &wo- digit Country Code

		The same of the sa	THE PERSONNELS AND THE PERSONNEL	THE RESERVE OF THE PROPERTY OF	Country	Country	Country
Country	Country	Country	Country	Country	Country	Country	Code
	Code		Code		Lone	Saint Pierre and Miguelon	PM
Afghanistan	AF	Dominican Republic	DO	Libya	U	Saint Vincent and the Grenadines	VC
Aland Islands	AX	Ecuador	EC	Liechtenstein	STATE OF THE PARTY	Samoà Samoà	WS
Albania	AL	Egypt	EG	Lithuania	LU	San Marino	SM
Algeria	DZ	El Salvador	SV	Luxembourg	M	Sao Tome and Principe	51
American Samoa	A5.	Equatorial Guinea	GQ	Macao	M	Saudi Arabia	5A
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MG		SN
Angola	AO	Estonia	EE	Madagascar	M	Senegal Serbia	RS
Anguilla	Al	Ethiopia	ET	Malawi			SC
Antarctica	AQ	Falldand Islands (Malvinas)	E	Malaysia is the state of the st	MY	Seychelles.	SL
Antigua and Barbuda	AG	Faroe Islands	F	Maldives	MV -	Sierra Leone	5G
Argentina	AR.	FILE	F	A Mail of the same	ML	Singapore	SX
Armenia	AM	Finland	FI	Malta	M	Sint Maarten (Dutch part)	3A
Aruba	AW	France	FR	Marshall Islands	MH	Slovakla	
Australia	AU.	French Guiana	GF	Martinique	MQ	Slovenia	5)
Austria	AT	French Polynesia	PF.	Mauritania	MR	Solomon Islands	\$8
Azerbaijan	AZ	French Southern Territories	T	Mauritius	M	Somalia	SO
Bahamas	85	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	M	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	THE RESERVE	South Sudan	55
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LX
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Bellie	8Z	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	5.1
Bermuda	BM	Grenada	GD	Moracca	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	M	Sweden	SE
Bolivia, Plurinational State of	80	Guam	GU	Myanmar William Balland Balland	M	Switzerland	CH
	BQ	Guatemala	GT	Namibia	NA.	Syrian Arab Republic	SY
Bonaire, Sint Eustatius and Saba	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	T
Bosnia and Herzegovina			GN	Nepal	NP	Tajikistan	T
Botswana	BW	Guinea	GW	Netherlands	NE NE	Tanzania, United Republic of	300000000000000000000000000000000000000
Bouvet Island	BV	Guinea-Bissau	GY	New Caledonia	NC	Thailand	TH
Brazil	BR	Guyana	HT	New Zealand	N2	Timor-Leste	72
British Indian Ocean Territory	10	Haiti A B. L. C. C. L. C.	HM		NI	Togo	TG
Brunel Darussalam	BN	Heard Island and McDonald Islands	VA	Nicaragua	NE NE	Tokelau	STATE OF STREET
Bulgaria	8G	Holy See (Varican City State)		Niger	NG	Tonga	T
Burkina Faso	BF	Honduras	HN	Nigeria	NU	Trinidad and Tobago	T
Burundi	BI	Hong Kong	HK	Nice Mining the Sales Sales Sales	NF	Tunisia	TN
Cabo Verde	CV	Hungary	HU	Norfolk Island	Mo	Turkey	TR.
Cambodia	KH	Iceland	IS	Northern Mariana Islands	NO	Turkmenistan	T
Cameroon	CM	India	- IN	Norway			TC-
Canada	CA	Indonesia	10	Oman	0	Turks and Calcos Islands	TV
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	UG
Central African Republic	CF	Traq	10	Palau	P'W	Uganda	UA
Chad	TD	Ireland	IE.	Palestine, State of	PS	Ukraine	AE I
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	
China	CN	Israel	IL.	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PV	United States	US
Cocos (Keeling) Islands	CC	Jamaica	1	Peru	PE	United States Minor Outlying Islands	U
Colombia	CO	Japan Japan	18	Philippines	PH	Uruguay	UY
Comeros	K	Jersey	JE	Pitcairn	PN	Uzbekistan	U
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Congo, the Democratic Republic of the	CD	Kazakhstan	K	Portugal	PT	Venezuela, Bolivarian Republic of	VE
	CK	Kenya	KE.	Puerto Rica	PR	Viet Nam	VN
Cook Islands	CR	Kiribati	KI .	Qatar	QA	Virgin Islands, British	VG
Costa Rica	Ct Ct	Korea, Democratic People's Republic of	KP	Reunion IRéunion	RE	Virgin Islands, U.S.	y.
Cote d'Ivoire ICôte d'Ivoire			KR	Romania	RO	Wallis and Futuna	W
Croatia	HR	Korea, Republic of	K	Russian Federation	RU	Western Sahara	EH
Cuba	CU	Kuwait	KG	Rwanda	RW	Yemen	VE.
Curação Curação	CW	Kyrgyzstan		Saint Barthelemy Saint Barthélemy	BL	Zambia	Z
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy Isaint Barthelemy Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	7
Czech Republic	CZ	Latvia	LV		KN	THE PARTY OF THE P	
Denmark	DK	Lebanon	-18	Soint Kitts and Nevis	LC	the state of the s	-
Djibouti	Di	Lesotho	LS	Saint Lucia	M	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	Discount of the last
Dominica	DM	Liberia	LR	Saint Martin (French part)	WI.		

CENTRAL KYC REGISTRY I Instructions/Check list/ Guldelines for filling individual KYC Application Form

Ceneral Instructions:

- 1 Field marked with * are mandatory fields.
- 2 Tick () wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- 6 Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor vehicle, 1988 and ISO 3166 country code respectively, details of which are available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- 8 For particular section update, please tick () in the box available before the section number and strike off the sections not required to be updated.
- 9 In case of "Small Account Type" only personal details in section 1 and 2, photograph, signature and self-certification of documents is required.

A Clarification / Guidelines on filling "Personal Details" section.

- 1 Name Please state the name with Prefix (Mr/Mrs?Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) out side India

- 1 Jurisdiction(s) of Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
- 2 Tax indentification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction, However, if the said jurisdiction has issued a hight integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number)

C Clarification / Guidelines on filling 'Proof of Identity [Pol] section

- 1 If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2 Mention identification/reference number if 'Z-Others (any document notified by the central government)' is ticked.

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 or address as per PoI is invalid or not in force.
- 2 State / U.T. Code and Pin / Code will not mandatory for Oversease address.

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 address, 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 91-999999999)
- 2 Do not add 'O' in the beginning of Mobile number.

G Clarification / Guidelines on filling 'Details of Related Person' section

1 Provide KYC number of related person if available.

H Clarification / Guidelines on filling 'Related Person details-Proof of Identity [Pol] of Related Person' section

- 1 In case of nominees, proof of identity is not required.
- 2 Mention identification/reference number if 'Z'-Others (any document notifiesd by the central government)' is ticked.

Annexure A1

Documents Received

Emp. Name

Emp. Code Emp. Designation Emp. Branch

Identity Verification

Done

☐ Self-Certified

IN PERSON VERIFICATION CARRIED OUT BY

Date

☐ True Copies

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Correspondence / Local Address

Important Instructions: A) Fields marked with* are mandatory fields. F) List of State/U.T code as per Indian Motor Vehicle Act. 1988 is available at the end. B) Self-Certification of documents is mandatory G) List of two character ISO 3166 country codes is available at the end. C) Please fill the form in English and in BLOCK letters. H) KYC number of applicant is mandatory for update application. D) Please fill the date in DD-MM-YYYY format. I) For particular section update, tick (\checkmark) in the box available before the E) Please read section wise detailed guidelines / instructions at the end. section number and strike off the sections not required to be update. For office use only: New ☐ Normal ☐ Small Application Type* ☐ Update Account Type* (To be filled by financial institution) KYC Number (Mandatory for KYC update request) ☐ 1. PROOF OF ADDRESS (PoA) ☐ 1.1 CORRESPONDENCE / LOCAL ADDRESS DETAILS* (Please see instruction E at the end) Same as current / Permanent / Overseas Address details Line1* Line2 Line3 City/Town/Village^{*} State/U.T code* Pin/Post Code* ISO 3166 Country Code* □ 2. CONTACT DETAILS (All communication will be sent on provided mobile no./Email-ID) (Please refer instruction F at the end) Tel.(res) Mobile FAX Fmail ID 3. APPLICANT DECLARATION I/We hereby declare that the details furnished above are true and correct to the best of my/our 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/We am/are aware that I/we may be held liable for it. . My personal / KYC details may be shared with Central KYC Registry. . I hereby consent to receiving information from central KYC Registry through SMS/Email on the above registered number/email address. Place: Signature/Thumb Impression of Applicant Date: DDMMYYYY 4. ATTESTATION/ FOR OFFICE USE ONLY

☐ Notary

Name

Code

Risk Category

☐ High

INSTITUTION DETAILS

Medium

☐ Low

Annexure B1

Documents Received

Emp. Name

Emp. Code Emp. Designation Emp. Branch

Identity Verification

Done

☐ Self-Certified

IN PERSON VERIFICATION CARRIED OUT BY

Date

□ True Copies

CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual | Related Person

Important check Instructions: A) Fields marked with* are mandatory field. F) List of State/U.T code as per Indian Motor Vehicle Act. 1988 is available at the end. B) Self-Certification of documents is mandatory G) List of two character ISO 3166 country codes is available at the end. C) Please fill the form in English and in BLOCK letters H) KYC number of applicants is mandatory for update application. D) Please fill the date in DD-MM-YYYY format. I) For particular section update, tick () in the box available before the E) Please read section wise detailed guidelines / instructions at the end. section number and strike off the sections not required to be update. ☐ Small For office use only: ☐ New □ Update Account Type* □ Normal Application Type* (Mandatory for KYC update request) (To be filled by financial institution) KYC Number ☐ 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*) □ Nominee ☐ Authorized Representative ☐ Beneficial Owner ☐ Beneficiary ☐ Guardian of Minor ☐ Assignee Related Person Type* First Name Middle Name Last Name Name (If KYC number and name are provided, below details of section 1 are optional) PROOF OF IDENTITY [Pol] OF RELATED PERSON* (Please see instruction (H) at the end) A-Passport Number Passport Expiry Date ☐ B-Voter ID Card C-PAN Card D-Driving Licence Driving Licence Expiry Date ☐ E-UID (Aadhaar) ☐ F-NREGA Job Card Z-Others (any document notified by the central government) Identification Number 2. APPLICANT DECLARATION • 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/We am/are aware that I/we may be held liable for it. My/Our personal KYC details may be shared with Central KYC Registry. • I/We hereby consent to receiving information from central KYC Registry through SMS/Email on the above registered number/email address. Signature/Thumb Impression of Applicant Date: D D M M Y Y Y Y Place: 3. ATTESTATION / FOR OFFICE USE ONLY ☐ Medium

□ Notary

Name

Code

Risk Category

☐ High

II Low