

AP KYC REGISTRATION FORM

Part A – Details of Applicant (NON – INDIVIDUAL)

1.Name of Applicant: (As Per PAN Card)		
2. Registered Office Address:	3.Correspondence Address:	
City/Town:Pincode:	City/Town:Pincode:	
State:Country:		
4.Contact Details: Mobile:		
6.PAN:	8.CIN No:	
10.Bank Details: Bank Name: Account No: IFSC Code:	Bank Branch: MICR Code:	
11. Directors Details: I) Director Name:	12.Signature: I)	
II) Director Name:	II)	
III) Director Name:	III)	
13. Directors Address:	14. PAN NO: 15. DIN NO:	
	I) I)	
II)	11) 11)	
	III) III)	
III)	16. Aadhaar NO:	
	I)	
	II)	
	III)	



Part B - Business Details

1.Exchanges:		
	2.Terminal:	3.Certification:
		Derivatives NISM Cert. No:
BSE : Cash	BSE: Cash	
	<u></u>	Expiry Date:
NSE : Cash F&O	NSE : Cash F&O	Currency Certificate No:
CD	CD	
		Expiry Date:
MCX: Commodity	MCX: Commodity	
	e: AP: WS	:
(ii) Fix Slab Wise:		
		ery:
Currency:	Commodity:	-
5. Terminal Charges: Rs	/- Per Month (Segment Wise)	
Part C – Details of Introducer		
1 Name:	Designation:	
1.Name:		
1.Name:	Designation: Branch:	
1.Name: Employee Code:	Branch:	
1.Name:	Branch:	
1.Name: Employee Code: Signature:	Branch:	
1.Name: Employee Code:	Branch:	
1.Name: Employee Code: Signature:	Branch:	
1.Name: Employee Code: Signature:	Branch:	
1.Name: Employee Code: Signature:	Branch:	
1.Name: Employee Code: Signature: 2. Approved By:	Branch:	
1.Name: Employee Code: Signature:	Branch:	

Note: All fields are compulsory, incomplete applications shall not be processed.

^{*}Strike off whichever is not applicable.