



# Goldmine Stocks Pvt Ltd

"Goldmine" House, 4, Niranjan Nirakar Society, Nr. Shreyas Railway Crossing, Ambawadi, Ahmedabad - 380 007. Phone : +91 79 2660 7287-88

APPLICATION Ref. NO. - \_\_\_\_\_

NEW  CHANGE REQUEST

## PART I - KNOW YOUR CLIENT (KYC) APPLICATION FORM (For Non-Individual)

Photograph

Please affix the recent passport size photograph and sign across it

Please fill this form in ENGLISH and in BLOCK LETTERS

### A. IDENTITY DETAILS

1	Name of the Applicant												
2	Date of incorporation	D	D	M	M	Y	Y	Y	Y	Place of incorporation			
3	Date of commencement of business	D	D	M	M	Y	Y	Y	Y				
4	a) PAN									b)Registration No. (e.g. CIN)			
5	<b>Status (please tick any one):</b>												
	<input type="checkbox"/> Private Limited Co.	<input type="checkbox"/> Bank	<input type="checkbox"/> Partnership										
	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> Government Body	<input type="checkbox"/> FI										
	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Non Government Organization	<input type="checkbox"/> FII										
	<input type="checkbox"/> Trust	<input type="checkbox"/> Defense Establishment	<input type="checkbox"/> HUF										
	<input type="checkbox"/> Charities	<input type="checkbox"/> Society	<input type="checkbox"/> AOP										
	<input type="checkbox"/> NGO's	<input type="checkbox"/> LLP	<input type="checkbox"/> BOI										
	<input type="checkbox"/> Others (please specify) _____												

### B. ADDRESS DETAILS

1	Correspondence Address	_____									
		City/town/village		PIN Code							
		State		Country							
2	Specify the proof of address submitted for correspondence address Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.										
	<input type="checkbox"/> Passport	<input type="checkbox"/> Ration Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> Voter Identity Card							
	<input type="checkbox"/> * Latest Electricity Bill	<input type="checkbox"/> * Latest Gas Bill	<input type="checkbox"/> Latest Bank A/c. Statement / Passbook								
	<input type="checkbox"/> * Latest Telephone Bill (only Land Line)	<input type="checkbox"/> Registered Lease / Sale Agreement of Residence									
	<input type="checkbox"/> Others _____										
	* Not more than 3 months old. Validity / Expiry date of proof of address submitted ___ / ___ / ___										

### FOR OFFICE USE ONLY

<input type="checkbox"/> Originals verified and Self Attested Documents copies received											
<b>Name and Signature of the Authorised Signatory</b> _____											
<b>Date</b>	D	D	M	M	Y	Y	Y	Y	<b>Seal/Stamp of the intermediary</b>		

3	Contact Details	Tel. (Off.)		Tel. (Res.)	
		FaxNo.		Mobile No.	
		Email ID			
4	Registered Address if (different from above) :				
		City/town/village		PIN Code	
		State		Country	

**C. OTHER DETAILS**

1	Name, PAN residential address and photographs for Promoters/Partners/Karta/Trustees and whole time directors:	If space is insufficient, enclose these details separately <i>[Illustrative format enclosed]</i>
2	DIN of whole time directors:	
3	Aadhar Number of Promoters / Partners / Karta	

**D. 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 un false or true or misleading or misrepresenting, I am/we are aware that I/we may be held liable for it.

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<b>Name &amp; Signature of the Authorised Signatory(ies)</b>	<b>Date</b>	D	D	M	M	Y	Y	Y	Y
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