



Goldmine Stocks Pvt Ltd

"Goldmine" House, 4, Niranjn 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 Individuals)

Please fill this form in ENGLISH and in BLOCK LETTERS

A. IDENTITY DETAILS

1		Name of the Applicant				Photograph Please affix your recent passport size photograph <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;">Signature Across photograph</div>							
2		Father's / Husband's Name											
3		a) Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	b) Marital status	<input type="checkbox"/> Single <input type="checkbox"/> Married	c) Date of Birth							
						D	D	M	M	Y	Y	Y	Y
4		a) Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify, _____)	b) Status	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National (Passport copy Mandatory for NRI & Foreign National)								
5		a) PAN											
				b) Aadhaar Number, if any									
6		Specify the proof of identity submitted		<input type="checkbox"/> PANcard <input type="checkbox"/> Any other (Please specify; _____)									

B. ADDRESS DETAILS

1	Residence / Correspondence Address	<input type="checkbox"/> Residence Address		<input type="checkbox"/> Correspondence Address								
		_____		_____								
		_____		_____								
		City/town/village										
State												
Country												
2		Specify the proof of address submitted for residence / 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 document copies received	
Name & Signature of the Authorised Signatory	Seal/Stamp of the intermediary
Date	
	D D M M Y Y Y Y

3	Permanent Address (If different from above. Mandatory for Non Resident Applicant to specify overseas address)											
		City/town/village				PIN Code						
		State				Country						
4	Contact Details	Tel. (Off.)				Tel. (Res.)						
		Fax No.				Mobile No.						
		EmailID										

C. DECLARATION

- I hereby declare that the aforesaid mobile number or E-mail Id belongs to Me or My family (spouse, dependent children and dependent parents).
- 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 of the Applicant _____	Date	D	D	M	M	Y	Y	Y	Y
----------------------------------	------	---	---	---	---	---	---	---	---