

KYC FOR INSTITUTIONAL ACCOUNT

										Γ	Oate:		
										मि	गति:		
Account Number (खाता नं):													
Account Name :													
(खाताको नाम)		D 14							. 1.				
Legal Status (संस्थाको प्रकार):		Proprieto	orsnip				L	∃Par	tnership			□ P	rivate Ltd.
		Public Li	mited					Otl	ners				
Other Details R	egistration N	lo:		R	Registi	ratio	n Da	te:			No of Bran	ches:	
V	AT/PAN no:			R	Registe	ered	with	:					
Nature of Business (Please	specify):		ufactu	ring, Tra	ading,	 Imp	 ort/I	Expo	rt, Servic	e, Tour	ism, NGO/IN	VGO etc	 :.)
Beneficial Owner If any):	Name:									Rel	ation:		
	A 3 3									C-	44 NT		
Pro	Address: esent Addres	g•							Ţ.		ntact No: ed Address:		
110	CSCIIL TAULI CS	. <u></u>							<u> </u>	register	cu municis.		
Ward No: House No	o: Tol	le:			W	ard l	No:		House N	(o:	Tole:		
Municipality:	Dis	strict:			M	unic	ipalit	y:			District:		
Contact No:							Fax	No:					
E-mail:) Box					
Name of key contract officia	al (मुख्य सम्पर्क व	यक्तिको नाम)	:										
Type of Account	\Box D	emand		Flex	ible A	Accou	ınt		Otl	hers			
Identification details of Pro	prietorship/I	Partners a	nd Coi	nmittee]	Memb					ing 10%	share or mo	ore shar	
Name	Address & No		Citi	zenship		Fat	ther's	s Nar	ne	Gra	ndfather's N	ame	Share %
	110	•											

Details of Account Operators

Name	Designation	Address & Contact No	Citizenship	Father's Name	Grandfather's Name

Details of Sister Concern

Name of Sister Concern	Name of business	Address & Contact No.

Details of Director Affiliated with Firms/Companies/Institutions

Name of Director	Name of Institution	Address of Institution & Contact No	Designation	Yearly Income

Transaction Volume	
Purpose of account detail	Maximum Amount per transaction amount
Expected monthly transaction (अनुमानित मासिक कारोबार)	Expected Annual transaction (अनुमानित बार्षिक कारोबार)

Supporting Documents (enclosed as applicable

- Supporting document of any material change in shareholding pattern, entity etc.
- Latest audited financial statement.
- Tax clearance certificate.
- Renewed registration certificate.
- Photograph and copy of Citizenship Certificate of Account Operator.
- Photograph and copy of citizenship Certificate of Board of Directors.
- Copy of PAN registration.
- Copy of memorandum of association & articles of association.
- Original verified copy of board resolution to open/transact & mandate to operate the account.

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Authorized Signatur				
Authorized Signatur	c & Stamp			
BANK'S USE ONLY				
Account Risk Grading Information Upgraded in Bank Syste	<u>m</u>			
☐ High risk ☐ Medium risk ☐ Low risk ☐ Yes ☐ No				
Any Further information/Remarks: Date Updated on:	Date Updated on:			
VVC Officers				
KYC Officer: CSD staff: Date: Date:				