

PART I - KNOW YOUR CLIENT (KYC) APPLICATION FORM (For Individuals)

BAJAJ CAPITAL MARKETS LIMITED (MIID-P2148)
 formerly known as **Just Trade Securities Limited**
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 Website: www.justtrade.in
CIN - U67120DL2004PLC130803

Photograph
 Please affix your recent
 passport size photograph

Signature Across photograph

NEW **CHANGE REQUEST** (Please tick ✓ the appropriate)

* Separate KYC Application forms must be filled by each applicant i.e. (2nd Holder, 3rd Holder & Guardian)

Please fill this form in ENGLISH and in BLOCK LETTERS

A. IDENTITY DETAILS

Name of the Applicant (as per PAN)																														
Father's / Husband Name																														
Mother's Name																														
a) Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender	b) Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others _____	c) DOB	D	D	M	M	Y	Y	Y	Y																		
a) Nationality/Citizenship	<input type="checkbox"/> Indian <input type="checkbox"/> Others (Please specify _____)																													
b) Status	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin																													
a) PAN															b) Aadhaar Number															
Specify the proof of identity submitted		<input type="checkbox"/> PAN Card <input type="checkbox"/> Any other (Please specify _____ Please refer instructions)																												

B. ADDRESS DETAILS

<input type="checkbox"/> Residence / <input type="checkbox"/> Correspondence Address															
	City/Town/Village									PIN Code					
	State									Country					
Specify the proof of address submitted for Residence / Correspondence address															
Contact Details	Mobile No.							E-mail ID							
	Tel. (Off.)							Tel. (Res.)			Fax No				
Permanent Address (If different from above. Mandatory for Non-Resident Applicant to specify overseas address)															
	City/Town/Village									PIN Code					
	State									Country					
Specify the proof of address submitted for Permanent address															

C. DECLARATION

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. I/We are also aware that for Aadhaar OVD based KYC, my KYC shall be validated against my Aadhaar. I/We hereby consent to sharing my/our masked Aadhaar with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I/We or BCML have a business relationship for KYC nly. I/We hereby consent to receiving information from CVL KRA & C-KYC Registry through SMS/Email on the above registered number/Email ID.	Signature of the Applicant												
	Date	D	D	M	M	Y	Y	Y	Y				

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<input type="checkbox"/> Originals verified & Self-Attested documents copies received													
Name of the person doing IPV ⁵ & Interview										Designation			
Date of IPV	D	D	M	M	Y	Y	Y	Y	STAMP OF THE ORGANIZATION				
Name of the Organization													