

**Know Your Customer (KYC) Form for
- Trusts & Foundations -**

Name of the Trust

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____

Name of the Trustee/ Settler/ Beneficiary/ Signatory

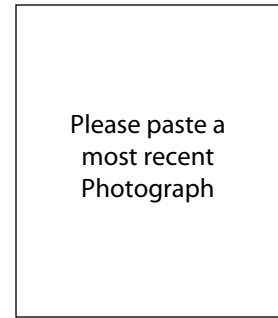
Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____



Name of the Founder/Director/Manager

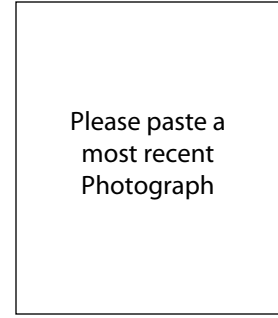
Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____



Documents Required

- Registration Certificate
- Power of Attorney
- Resolution of managing body
- Valid ID & Address proof (Trustees/Beneficiaries/Settlers)
- Telephone Bill

Name of the Founder/Director/Manager/Trustee/ Settler/ Beneficiary

Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____

Please paste a most recent Photograph

Name of the Founder/Director/Manager/Trustee/ Settler/ Beneficiary

Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____

Please paste a most recent Photograph

Name of the Founder/Director/Manager/Trustee/ Settler/ Beneficiary

Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____

Please paste a most recent Photograph

Name of the Founder/Director/Manager/Trustee/ Settler/ Beneficiary

Date of Birth _____ Sex _____

Address _____

City _____ State _____

Telephone _____ Mobile _____

Fax _____ Email _____

Please paste a most recent Photograph