

Date:

Place: _____

AOF no.: _____

 LG Code

 LC Code

Please fill the information below as requested	First Account Holder	Second Account Holder
Application Type	<input type="checkbox"/> New <input type="checkbox"/> Update	<input type="checkbox"/> New <input type="checkbox"/> Update
*Account Type	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Simplified (For low risk customer) <input type="checkbox"/> Small	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Simplified (For low risk customer) <input type="checkbox"/> Small
KYC Number (Mandatory for KYC update request)	<input type="text" value=""/>	<input type="text" value=""/>
*Name (Same as ID proof) (write in block letter)	_____ First Name Middle Name Last Name	_____ First Name Middle Name Last Name
Maiden Name (if any*)	_____ First Name Middle Name Last Name	_____ First Name Middle Name Last Name
Mother Name*	_____ First Name Middle Name Last Name	_____ First Name Middle Name Last Name
Gender*	<input type="checkbox"/> M-Male <input type="checkbox"/> F-Female <input type="checkbox"/> T-Transgender	<input type="checkbox"/> M-Male <input type="checkbox"/> F-Female <input type="checkbox"/> T-Transgender
Marital Status*	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others
Citizenship*	<input type="checkbox"/> IN_Indian <input type="checkbox"/> Others_____	<input type="checkbox"/> IN_Indian <input type="checkbox"/> Others_____
Residential status *	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non-Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non-Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin

* Mandatory Fields

Applicant Declaration - Additional Information for CERSAI :

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 information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

I hereby consent to receiving information from Central KYC Registry through SMS/Email.

Applicant Preference for receiving Documents as part of Account Opening Kit

 # I / We wish to receive the following documents in Physical Form Electronic Form

1. Rights & Obligations of stock broker, sub-broker and client for trading on exchanges (including additional rights & obligations in case of internet/wireless technology based trading); (applicable for HDFC Securities Limited - Trading Account)
2. Rights and Obligations of beneficial owner and depository participant as prescribed by SEBI and depositories; (applicable for Demat account)
3. Uniform Risk Disclosure Documents (for all segments/ exchanges); and (applicable for HDFC Securities Limited - Trading Account)
4. Guidance Note detailing Do's and Don't for trading on stock exchanges. (applicable for HDFC Securities Limited - Trading Account)

Signature/Thumb Impression of First Applicant

Signature/Thumb Impression of Second Applicant

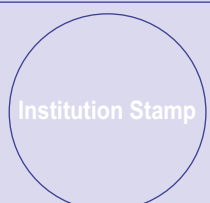
Institution Details

For HDFC Bank/Securities use only :

 DP ID :

 Client ID :

Sourcing Branch Name : _____

 Branch Code :


Signature verified and form approved by : BDA / BM employee Code : _____ Signature & Date : _____