

KYC FORM – INDIVIDUALS (FIRST HOLDER)									
KYC Mode*		☐ Normal ☐ EKYC OTP ☐ EKYC Biometric ☒ Online KYC ☐ Offline EKYC ☐ DigiLocker							
IDENTITY DETAILS									
Name of the Applicant*		M/S ANITA ASHOK JOGANI							
Maiden Name (if any)		M/S							
Father / Spouse Name*		MR NAVRATANMAL HASTIMALJI JAIN							
Mother Name*		M/S LAD KANWAR							
Date of Birth*		12/09/1970		PAN*		AAEPJ7859G			
Gender*		☐ Male ☒ Female ☐ Transgender				Marital Status*		☐ Single ☒ Married	
Nationality*		☒ IN-Indian ☐ Others _____							
Residential Status*		☒ Resident Individual ☐ Non-Resident Indian ☐ Foreign National ☐ Person of Indian Origin (Passport mandatory for NRIs and Foreign Nationals. PIO selection is only for CKYC and not for KRA KYC. Select NRI or Foreign National based on Nationality of the individual)							
Occupation*		☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculture ☐ Retired ☒ Housewife ☐ Student ☐ Others (please specify) _____							
City of Birth				Country of Birth		INDIA		ISO 3166 Country Code	
Proof of Identity (POI)*						Identification number*		Expiry Date (if Any)	
☐ Aadhaar Card (only last 4 Digits) ☐ Voter ID Card ☐ Passport ☐ Driving license ☐ NPR ☐ NREGA Job Card ☒ Others (Any document notified by Central Government) AS PER EXISTING KRA								DD/MM/YYYY	
ADDRESS DETAILS									
Permanent Address*		BUNGLOW NO 2 EDEN HALL WORLI MUMBAI DR ANNIE BESANT ROAD City/ Town/Village* MUMBAI District* MUMBAI State* MAHARASHTRA Country* INDIA Pin code* 400018 ☐ Residential/Business ☒ Residential ☐ Business ☐ Registered Office ☐ Unspecified							
Doc submitted as POA*		☐ Aadhaar Card ☐ Voter ID Card ☐ Passport ☐ Driving license ☐ NPR ☐ NREGA Job Card ☒ Others AS PER EXISTING KRA							
		Document number*				Expiry Date (if Any)		DD/MM/YYYY	
Correspondence Address*		☒ Same As Permanent Address BUNGLOW NO 2 EDEN HALL WORLI MUMBAI DR ANNIE BESANT ROAD City/ Town/Village* MUMBAI District* MUMBAI State* MAHARASHTRA Country* INDIA Pin code* 400018 ☐ Residential/Business ☒ Residential ☐ Business ☐ Registered Office ☐ Unspecified							
Doc submitted as POA*		☐ Aadhaar Card ☐ Voter ID Card ☐ Passport ☐ Driving license ☐ NPR ☐ NREGA Job Card ☒ Others AS PER EXISTING KRA							
		Document number*				Expiry Date (if Any)		DD/MM/YYYY	
Address type to be used for communication				☒ Permanent ☐ Correspondence					
CONTACT DETAILS (to be used for all necessary reporting / communication purposes)									
Residence Phone				Office Phone				Mobile* 9833995454	
Fax Details				Email ID*		ANITAJOGANI@GMAIL.COM			
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 hereby consent to receive information from Central KYC and/or KRA registry through SMS/Email on above registered number/email address. I am also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I hereby consent to sharing my masked Aadhaar card 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 have a business relationship for KYC purposes only I hereby give consent to download/fetch my records/details from CKYCR/KRA to Nuvama Wealth and investment limited, for the purposes of establishing an account-based relationship/modification of the existing records.									
E-sign				FOR OFFICE USE ONLY					
				In-Person Verification (IPV) & Self-Attested copies received by					
Wet - Sign Sign Here Date: _____ Place: _____ Signature / Thumb Impression of the Applicant				Company Name: QODE ADVISORS LLP Emp Name: VAIBHAV JAIN Emp Code: 005 Designation: OPERATIONS ANALYST Date: 28 APR 2025 Signature: 					

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

ANITA ASHOK JOGANI

NAVRATANMAL HASTIMALJI JAIN

12/09/1970

Permanent Account Number

AAEPJ7859G

Anita jogani

Signature



23072016



SPECIMEN SIGNATURE

NAME : ANITA ASHOK JOGANI

PAN : AAEPJ7859G

Anita Jogani