



Roha Wellworth Securities Pvt. Ltd.
501, Akuriti Orion, Shradhdhanand Road Vile Parle
East Mumbai - 400057. | Tel: 022 67159000
Sebi No: INZ000329332 | CDSL: IN-DP-842-2026

Date	Application No.
BO ID*	Client Code*
1 2 0 2 5 5 0 0	

Know Your Client (KYC)

Application Form (Individual /Non Individual)

Application Type*

☐ Modification KYC ☐ REKYC# ☐ CKYC

KYC Mode*

☒ Normal

I/We request you to carry out the modification in my/our Demat & Trading A/c as per following: Please Tick (✓)

☐ Correspondence Address ☐ Permanent Address ☐ Email ID ☐ Mobile Number ☐ Bank Details ☐ Demat Details Other _____

I/We request you to carry out change of Address/Email-id/Mobile number in KRA.

1. Identity Details

Sole/First Holder Name* _____ (same as ID proof)		Photo is mandatory in case of change in address Pl. Sign Across the photo 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.
Fathers/Spouse's Name* _____		
PAN* _____	DOB _____	
Gender* ☐ Male ☐ Female ☐ Transgender		
Nationality* ☐ Indian ☐ Other _____		
Marital Status* ☐ Single ☐ Married		
Residential Status* ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin*		
Proof of Identity (POI) and Proof of Address (POA) (Please tick)		
☐ A — Aadhaar Card XXXX XXXX _ _ _ _ (QR Code must be clear on proof) ☐ B — Passport Number _____ (Expiry Date) _____ ☐ C — Voter ID Card _____ ☐ D — Driving License _____ (Expiry Date) _____ ☐ E — NREGA Job Card _____ ☐ F — NPR _____ ☐ Z — Others _____ Identification No.: _____ (any document notified by Central Government)		

2. Address Details*

Existing Details

New Details

A. Correspondence Address		
B. Permanent Address		
C. Both		
Address Type*	☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified	☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

3. Contact Details (in CAPITAL)

Existing Details		New Details
Email ID*		
Mobile*		

Above Email ID is registered in the name of Mr. / Mrs. _____ and related to me as ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

Above mobile number is registered in the name of Mr. / Mrs. _____ and related to me as ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents

4. Applicant 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 agree that any communication related to my trading and demat account should be sent to the above mentioned Mobile Number and E-mail id. I hereby consent to receiving information from Central KYC registry/ KRA through SMS/ Email on the above registered number/ email address. I am also aware that for Aadhar OVD based KYC, my KYC request shall be validated against Aadhar details. I hereby consent to sharing my masked Aadhar card with readable QR code or my Aadhar 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 my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry.

DATE: _____ (DD-MM-YYYY) PLACE: _____

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

5. For Office Use Only

In-Person Verification (IPV) & KYC carried out by*

Intermediary Details*

Emp. Name _____ Emp. Code _____ Emp. Designation _____ Name of Organization _____ Emp. Signature _____ KYC / IPV Date _____	AMC / Intermediary Name : Roha Wellworth Securites Pvt. Ltd. ☐ Self certified document copies received (OVD) ☐ True Copies of documents received (Attested)
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6. I understand that as per the guidelines prescribed by the SEBI, the client is required to share their financial information to the stock broker on periodic basis. In view of these guidelines, please find my financial details as mentioned below.

A. Income Range (Per Annum); (Tick where applicable)

☐ Below Rs.1 Lac ☐ Rs.1Lac to Rs.5Lacs ☐ Rs.5Lacs to Rs.10Lacs ☐ Rs.10Lacs to Rs.25Lacs ☒ Rs. 25Lacs to Rs. 1Cr
OR NETWORTH Rs. _____ **as on 31st March 20** _____ ☐ More than Rs. 1Cr

B. Attached any of the following documents for trading in derivatives and currency derivative segment.

☐ Copy of Demat A/c Holding statement ☐ Bank A/c statement for last 6 months ☐ Salary Slips ☐ Copy of Income Tax Returns/Form 16 ☐ Balance Sheet ☐ Any other relevant documents substantiating owner assests

7. Bank Details (Please attach self attested copy of pre-printed Cheque leaf or Passbook or Statement with bank stamp)

A/c Type	Existing	New
Saving/Current	Bank A/c Number	Bank A/c Number
☐ Default ☐ Optional	Bank Account No	Bank Account No
	MICR & IFSC Code	MICR & IFSC Code
	MICR	IFSC
Bank Name & Address		

8. Demat Details (Please attach self attested CMR copy duly stamped by your DP)

☐ Default ☐ Optional	☐ CDSL																
	☐ NSDL	I	N														
DP Name & Address																	

9. I/We would like to receive Contract Notes, bills, Statement of funds and securities, Electronic Transaction–cum–holding Statement, Annual Report etc.

☐ Physical ☐ Electronic (**Preferred**)

10. Applicant 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 agree that any communication related to my trading and demat account should be sent to the above mentioned Mobile Number and E-mail id. I hereby consent to receiving information from Central KYC registry/ KRA through SMS/ Email on the above registered number/ email address. I am also aware that for Aadhar OVD based KYC, my KYC request shall be validated against Aadhar details. I hereby consent to sharing my masked Aadhar card with readable QR code or my Aadhar 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 my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry.

DATE: _____ (DD-MM-YYYY) **PLACE:** _____

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

11. For Office Use Only

In-Person Verification (IPV) & KYC carried out by*

Intermediary Details*

Emp. Name _____ Emp. Code _____
 Emp. Designation _____
 Name of Organization _____
 Emp. Signature _____ KYC / IPV Date _____

AMC / Intermediary Name :
Roha Wellworth Securites Pvt. Ltd
☐ Self certified document copies received (OVD)
☐ True Copies of documents received (Attested)