



KYC Updation form for Individuals

Date:

To,
Standard Chartered Bank,
KYC Cell, No 19, Rajaji Salai, Chennai-600001
Dear Sir/Madam

Ref: Account / Loan / Credit Card Numbers*	
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I undersigned Account Holder / Power of Attorney of above mentioned account/s hereby declare that the information given below, in respect of the above-mentioned bank account/s is true and correct

Full Name*																								
Residence Address*																								
																			District					
City																			State					
Country																			PIN					

***** For changes to your Name or Residence address, request you to approach our nearest branch with original documentary proof**

Mobile*											Residence contact No										
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PAN Number*											-										
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Nationality*											Date of Birth*										
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***** Please fill above, if any changes, request you to approach our nearest branch with original documentary proof**

Email																								
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Occupation* <small>(Please tick as appropriate)</small>	<input type="checkbox"/> Salaried	<input type="checkbox"/> Professional	<input type="checkbox"/> Self Employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Unemployed
	<input type="checkbox"/> Business	Employer / Business Entity Name*					

Nature of Business* <small>(Please tick as appropriate)</small>	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Trading	<input type="checkbox"/> Export/Import	<input type="checkbox"/> Service	<input type="checkbox"/> Retailing	<input type="checkbox"/> Wholesaler
	<input type="checkbox"/> Other					
	Industry in which the client's Business entity or Employer Operates (e.g. Jewellery, diamond, textile, chemicals, law/accounting firm etc) *					

In the event of change in address due to relocation or any other reason, I shall intimate the new address to the Bank within two weeks of such a change.

Account Holder Signature*	
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- Note:**
1. In the event of any change to your KYC information, please send this declaration in original along with self-attested documentary proof to any of our Branches or to "Standard Chartered Bank, KYC Cell, No.19, Rajaji Salai, Chennai-600001". If not, the same can be sent on e-mail from your registered e-mail ID with us, to scbindia.kyc@sc.com .
 2. For joint accounts or accounts operated under a power of attorney, a separate declaration should be completed for each joint account holder or constituted attorney.
 3. The details mentioned above will be applicable to all relationships / accounts that you hold with the bank
 4. * Mandatory fields