

# AARON BENEFIT FUND NIDHI LIMITED

REG. NO. : U65990KL2017PLCO49383 REG. OFFICE : NERISSERIL BUILDING , NEAR PUTHUMANNEL AUDITORIUM,  
KARUNAGAPPLAYY WEBSITE : <http://aaronnidhi.com> EMAIL : aaronnidhilt@gmail.com Contact : 9746585846

## CUSTOMER APPLICATION FORM

### MEMBER DETAILS

TITLE :	MR / MRS / MS	MEMBER NAME :	
MEMBER TYPE :		FATHER / HUSBAND :	

### PERSONAL DETAILS

DATE OF BIRTH :		AGE :	
GUARDIAN MEM. NO :		GUARDIAN NAME :	
GENDER :		RELIGION :	
MOBILE :		EMAIL ID :	
OCCUPATION :		OCCUPATION ADD. :	
VOTER ID :		PAN NO. :	
AADHAR CARD NO :		PASSPORT NO. :	
CITY :		VILLAGE :	
TALUK :		DISTRICT :	
STATE :		PIN :	
PERMANENT ADD1 :			
PERMANENT ADD2 :			
PERMANENT ADD3 :			
CURRENT ADD1 :			
CURRENT ADD2 :			
CURRENT ADD3 :			

### NOMINEE DETAILS

TITLE :	MR / MRS / MS	NAME :	
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DATE OF BIRTH :		AGE :	
RELATIONSHIP :		ADDRESS :	
CITY :		STATE :	
PIN :			

### INTRODUCER DETAILS

MEMBER NO. :		NAME :	
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### KYC DETAILS ( PLEASE SELECT ATLEAST ONE KYC DETAILS )

PROOF OF IDENTITY	PROOF OF ADDRESS(OF CORRESPONDENCE ADDRESS)
PASSPORT : <input type="checkbox"/>	CREDIT CARD STATEMENT (NOT MORE THAN 3 MONTHS OLD) : <input type="checkbox"/>
VOTER ID CARD : <input type="checkbox"/>	INCOME/ WEALTH TAX ASSESSMENT ORDER : <input type="checkbox"/>
PAN CARD : <input type="checkbox"/>	ELECTRICITY BILL (NOT MORE THAN 6 MONTHS OLD) : <input type="checkbox"/>
GOVERNMENT/ DEFENCE ID CARD : <input type="checkbox"/>	TELEPHONE BILL (NOT MORE THAN 3 MONTHS OLD) : <input type="checkbox"/>
ID CARD OF REPUTED EMPLOYER : <input type="checkbox"/>	BANK ACCOUNT STATEMENT : <input type="checkbox"/>
DRIVING LICENSE : <input type="checkbox"/>	LETTER FROM REPUTED EMPLOYER : <input type="checkbox"/>
PENSION PAYMENT ORDER : <input type="checkbox"/>	LETTER FROM PUBLIC AUTHORITY : <input type="checkbox"/>
PHOTO ID CARD ISSUED BY POST OFFICE : <input type="checkbox"/>	RATION CARD : <input type="checkbox"/>
PHOTO ID CARD ISSUED BY UNIVERSITY : <input type="checkbox"/>	VOTER ID CARD (ONLY IF IT CONTAINS THE CURRENT ADDRESS) : <input type="checkbox"/>
PHOTO ID CARD ISSUED BY PUBLIC AUTHORITY : <input type="checkbox"/>	PENSION PAYMENT ORDER : <input type="checkbox"/>
AADHAAR LETTER / CARD : <input type="checkbox"/>	LEASE DEED/SALE DEED : <input type="checkbox"/>
NREGA CARD : <input type="checkbox"/>	PROOF OF RESIDENCE ISSUED BY UNIVERSITY* : <input type="checkbox"/>
	ADDRESS PROOF OF RELATIVES (FOR STUDENTS) : <input type="checkbox"/>
	ADDRESS PROOF OF CLOSE RELATIVES : <input type="checkbox"/>
	ADDRESS PROOF OF GAZETTED/ SENIOR PSU OFFICERS : <input type="checkbox"/>

#### **Declaration**

**I hereby apply for optionally fully Convertible aaronnidhi as per terms and conditions herein agree by me as individual/ as representative of the applicant.**

**Office Stamp & Signature of Authorized Officer**

**Name**

**E. code**

**Member Signature /  
Applicant Signature**