



KNOW YOUR CUSTOMER (KYC) PROFILE –for individuals only

All the information as applicable in section A,B and C bellow is **mandatory for the Primary Applicant Only.**

| | |
|--------------------|----------------------|
| Date | <input type="text"/> |
| Name of Applicant | <input type="text"/> |
| NIC or Passport No | <input type="text"/> |

SECTION A – BASIC ACCOUNT INFORMATON

Client Type: **Individual:** **Joint:**

SECTION B - ADDRESS, CONTACT DETAILS OF THE APPLICANT & CITIZENSHIP

1. Proof of Residency document provided by the applicant

(Please submit any one of the following document and tick(v) against the document attached.)

- National Identity Card
- *Electricity
- *Telephone /Mobile Bill
- * Income Tax Receipt/Assessment Notice
- *Bank Account Statement/Credit card Statement
- * Grama Seakale Certificate
- Valid Tenancy agreement
- Registered Lease or Sale Agreement of Residency
- *Letter issued by the superintendent of a plantation estate in respect of Estate workers who have no other documentary proof.
- *other notices/letters issued by the Government authorities and institutions which will be deemed as acceptable to NAMAL (Please specify) _____

*These documents should be within three months as on the date of submission of the Unit Trust opening forms.

2. Status of Residency Address (Premises)

- Owner
- Parent's Other
- Lease/Rent
- Friends/Relatives
- Official
- Board/lodging
- Other Place – (Please Specify: _____)

3.Contact Details

Telephone (office)

Mobile No

Telephone (Res)

Fax No

E-Mail address

4. Citizenship

- Sri Lankan
- Sri Lankan with dual (Please specify the country of citizenship) _____
- Sri Lankan with Foreign citizenship _____
- Foreign Nationality (Please Specify the Country) _____

SECTION C – OTHER DETAILS

- 1. Employment Details
Occupation
Name of the Organization
Address of the Organization

- 2. Self Employed/professionals
Nature of business/ Profession
Registered Address

- 3. Expected Value of investment per Annum: Please Tick(v)

- | | | |
|------------------------------------------------|-----------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Less than Rs. 100,000 | <input type="checkbox"/> Rs. 100,000 to Rs. 500,000 | <input type="checkbox"/> Rs. 500,000 to 1mn |
| <input type="checkbox"/> Rs. 1mn to Rs. 2mn | <input type="checkbox"/> Rs. 2mn to Rs. 3mn | <input type="checkbox"/> Rs. 3mn to Rs. 4mn |
| <input type="checkbox"/> Rs. 4mn to Rs. 5mn | <input type="checkbox"/> Rs. 5mn to Rs. 10mn | <input type="checkbox"/> Over Rs. 10,000,000 |

- 4. Source of Fund. Please Tick (v)

- | | | |
|------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Sales and business turnover | <input type="checkbox"/> Contract Proceeds | <input type="checkbox"/> Investment Proceeds/Savings |
| <input type="checkbox"/> Sales of property assets | <input type="checkbox"/> Gift | <input type="checkbox"/> Membership Contribution |
| <input type="checkbox"/> Commission Income | <input type="checkbox"/> Family Remittances | <input type="checkbox"/> Export Proceeds |
| <input type="checkbox"/> Salary/Profit Income | <input type="checkbox"/> Donations/Charities (Local/Foreign) | |

Others (Specify) _____

- 5 Other Connected Business/Professional Activities and Business interests

- 6 Other details/Remarks/Notes: (If Any)

Signature(s) of the applicant (s)/authorizes person (s)