



Tezsid Designs Pvt Ltd - KYC Details Form

Personal Information

1. Full Name: _____
2. Date of Birth: _____
3. Gender: _____
4. Nationality: _____
5. Marital Status: _____

Contact Information

1. Residential Address:

- Street: _____
- City: _____
- State: _____
- Zip Code: _____
- Country: _____

2. Permanent Address (if different from above):

- Street: _____
- City: _____
- State: _____
- Zip Code: _____
- Country: _____

3. Phone Number: _____

4. Email Address: _____

Identification Documents

1. Government Issued ID Type:
- (e.g., Passport, Driver's License, Aadhar Card, Voter ID, etc.): _____
2. ID Number: _____
3. Issue Date: _____
4. Expiry Date: _____
5. Issuing Authority: _____

Banking Details (Optional)

1. Bank Name: _____
2. Account Number: _____



3. IFSC Code: _____

4. Branch Name: _____

Emergency Contact Information

1. Emergency Contact Person:

- Name: _____

- Relationship: _____

- Phone Number: _____

- Email Address: _____

Professional Information

1. Current Position: _____

2. Department: _____

3. Date of Joining: _____

Declarations

1. I hereby declare that the information provided above is true and accurate to the best of my knowledge.

2. I agree to notify Tezsid Designs Pvt Ltd promptly of any changes to the above information.

3. I understand that the information provided will be used for internal purposes only and will be kept confidential.

Signature

Employee Signature: _____

Date: _____

For Office Use Only

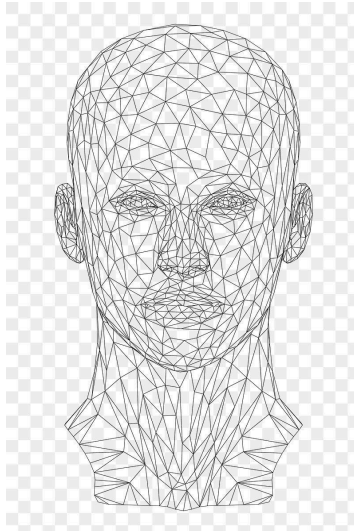
1. KYC Verification Completed By: _____

2. Date of Verification: _____

3. Remarks: _____

TEZSID®

Please attach photocopies of your identification documents and a recent passport-sized photograph with this form.



(just replace the above image with your photo)

For any further queries, please contact the HR department or your team leader.