KMK	YIII	NSURANCE REPO	SITORY		e-	Insura	nce Accoun	
Application Numb	ber							dividuals
Insurance Company								
Approved Person	n Code					Here		
PAN Number *						H dw		
UID Number *						t Sta		
Mobile No. *						Pu		
Date of Birth *								
DOB Proof *							Paste your recent	Sign
ID Proof *					į		colour photo	S I
Email *								
Applicant D First Name *	etails	(Please fill this for	m in ENGLISH	and in BLOCK LET	ΓTERS. Field	ds marked w	vith asterisk (*) are co	ompulsory)
Middle Name								
Last Name								
Gender *	Male	e Female	Others	Status	Reside	nt Indian	NRI *	
Father / Spouse	IVIAIC	remaie	Others	Otatus	riosiac	in malan	IVIII	
Correspond	lanca	Address						
Address Line 1 *	Jence	Address						
Address Line 2								
Address Line 3								
Landmark								
City *								
Pin Code *		Sta	te *		Country *			
Address Proof *								
Permanent	Addre	ess	Same as above					
Address Line 1 *								
Address Line 2								
Address Line 3								
Landmark								
City *								
Pin Code *		Sta	te *		Country *			
Address Proof *								
Contact Det	tails							
Landline No.				Alternate No.				
Alternate Email								
Note:	 ID proof & Address proof to be produced in original along with the e-IA application form for verification. Self attested photocopies of ID proof, Address proof and Age proof to be submitted along with e-IA application form Some Valid Address proofs are 1. Voter ID 2. Ration Card 3. Driving License 4. Passport 5. UID Card. For list of covalid address proof documents you may please visit our website www.kinrep.com or call customer care 1800 2789. # NRI should provide his/her Indian address under correspondence address and overseas address under perma 							
	addr							
Acknowledgement								
		PAN/Aadhaar						
		Received from						

IR AP Seal & Signature

for opening of e-IA (Individual)