To,

The Secretary,

SHRI OM SAI COOP.(U) T/C. SOCIETY LTD.

A-86, Gali No.3, Part-5, Sonia Vihar, Delhi-110094

PHOTO

KYM INFORMATION FORM

	18 1 1/1 1.		TIVE	
Society A/c.No.	:		D.O.B.	:
Full Name	:			
Res.Address	:			
Office Address	:			
Tel.No.	•		Mobile No.	:
PAN No.	:		Adhaar No.	:
E-Mail	:			
Bank Name	•			
Branch Name	•			
IFSC Code	•		Bank A/c.No.	:
a) Passportb) Voter's Identitc) Driving Lice			f) Ba	lhaar Card (UIDAI) nk Passbook ectricity Bill (latest)
d) Pan Card			_,	lephone Bill (latest)
of the Identity (*Original Doc	Card as proof uments to be	_	sion.	Pelhi, please attach photocopy
Date:				Signature
		FOR OFFICE	USE ONLY	
KYM Category				
		J		Signature of Authorized officer