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**ROYAL INSURANCE CORPORATION OF BHUTAN LTD.**

**KYC FORM: Organization**

**Branch:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Details of Organization**

Name of the Organization			
Organization Type		Nature of Business	
Date of Incorporation (DD/MM/YYYY)		Registration No.	
Type of Business		BIT/CIT No. (TPN)	
License No.		Validity (DD/MM/YYYY)	
Place of Registration			

**Office Address**

Building No:  Flat No:   
Street Name:  Locality:   
Gewog/Thromde:  Drungkhag:   
Dzongkhag:  Country:

**Shareholder Details:**

Name of the Owners/Partners/Shareholders	Nationality	Identification No.	Shareholding %



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**ROYAL INSURANCE CORPORATION OF BHUTAN LTD.**

**Contact Details:**

Sl. No.	Name	Identification No.	Designation	Email ID	Mobile No.	Telephone No.

**Bank Details:**

Bank Account No.:	<input type="text"/>	Saving A/c <input type="checkbox"/>	Current A/c <input type="checkbox"/>
Bank:	1) Bank of Bhutan <input type="checkbox"/>	2) Bhutan National Bank <input type="checkbox"/>	3) Bhutan Development Bank <input type="checkbox"/>
	4) T Bank <input type="checkbox"/>	5) Druk Punjab National Bank <input type="checkbox"/>	6) Others; <input type="checkbox"/>
Bank Name:	<input type="text"/>		

**Documents to be submitted:**

- Copy of Business License
- Certificate of Incorporation
- Article of Incorporation endorsed by MoEA

**Declaration and Consent**

I/we hereby declare that the information provided above are true, correct and complete in all respect to the best of my/our knowledge and ability.

I/we give my/our consent to RICBL to disclose and share all or any information provided above to the Royal Monetary Authority, Credit Information Bureau and/or any other lawful authorities as may be required by the laws of the Kingdom of Bhutan.

Further, I/we shall update RICBL of any change in my/our information hereinafter.

Name: \_\_\_\_\_

Identification No.: \_\_\_\_\_

Contact No.: \_\_\_\_\_

Designation: \_\_\_\_\_ Signature: \_\_\_\_\_