



NB.DoS.HO.POL. / 1462/J-1/2017-18

Circular No. 173 /DoS. /6 /2017

12 July 2017

The Chairman, All RRBs  
The Managing Directors / Chief Executive Officers of  
All the State Cooperative Banks /  
District Central Cooperative Banks in the Country

Dear Sir/Madam

**Know Your Customer (KYC) Directions, 2016**

Please refer to our circular No.NB.DoS.HO.POL/4302/J-1/2015-16 dated 21 March 2016 wherein banks were advised to strictly comply with the 'Know Your Customer (KYC) Directions, 2016, issued by Reserve Bank of India, under the provisions of Section 35A of BAct, 1949 / BR Act, 1949 (AACS) and also to furnish the information on status of KYC compliance in the prescribed format.

2. The Board of Supervision (for StCBs, DCCBs and RRBs) has observed that the KYC compliance by banks should be given adequate importance and directed that the banks should take steps for 100% compliance to KYC directives.

3. In this connection, it has been decided to report the status of compliance to KYC Directions by RRBs and RCBs using the ENSURE portal on a quarterly basis, effective from the quarter ended 30 June 2017 and a set of two new Returns for this purpose titled "KYC Statistics" and "KYC Directions – Status of Compliance" (proforma given in annexures) have been published in the ENSURE portal. The Returns are to be uploaded on a quarterly basis and the first such return should be submitted by 31<sup>st</sup> July 2017, and within 15<sup>th</sup> day from the end of every Quarter, thereafter.

4. You may therefore ensure that your bank is strictly adhering to the KYC Directions and the prescribed returns are submitted within the timeline stipulated.

5. Please acknowledge the receipt of this circular to our Regional Office.

Yours faithfully

(K Venkateswara Rao)  
Chief General Manager

Encl: As above

राष्ट्रीय कृषि और ग्रामीण विकास बैंक

**National Bank for Agriculture and Rural Development**

पर्यवेक्षण विभाग

प्लॉट क्र सी-24, 'जी' ब्लॉक, बांद्रा-कुर्ला कॉम्प्लेक्स, बांद्रा (पूर्व), मुंबई - 400 051. टेली: +91 22 2653 1834 • फ़ैक्स: +91 22 2653 0103 • ई मेल: dos@nabard.org

Department of Supervision

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Name of the Bank : \_\_\_\_\_ Know Your Customer (KYC) Statistics (as on \_\_\_\_\_)  
 State : \_\_\_\_\_

Sl. No.	Name of the Branch	Total No. of Accounts (6+9)	Of Col. 3 Operative Accounts			Of Col. 3 Inoperative Accounts			Summary of KYC Compliance		
			KYC Compliant	KYC Non-Compliant	Total (4+5)	KYC Compliant	KYC Non-Compliant	Total (7+8)	KYC Compliant (4+7)	KYC Non-Compliant (5+8)	No. of Accounts Frozen
1	2	3	4	5	6	7	8	9	10	11	12
1											
2											
3											
4											
5											
6											
Total											



## Know Your Customer (KYC) Directions - Status of compliance (as on )

Name of the Bank :

State :

Sl. No.	Particulars	Status/Comments of the Bank	Remarks
1	<b>KYC Policy</b>		
	(i) Whether the Bank has KYC Policy duly approved by the Board of Directors	Yes / No	
	(ii) If yes, Date of Board Meeting approving the Policy		
2	<b>The approved policy contains the following key elements</b>		
	(i) Customer Acceptance Policy	Yes / No	
	(ii) Risk Management	Yes / No	
	(iii) Customer Identification Procedure	Yes / No	
	(iv) Monitoring of Transactions	Yes / No	
3	<b>Designated Director</b>		
	Whether 'Designated Director' has been nominated by Board & is in place	Yes / No	
	(i) Name/ Designation /Address of the present Designated Director		
	(ii) Date of appointment		
	(iii) Date of Board Meeting nominating the Designated Director		
4	<b>Principal Officer</b>		
	Whether Principal Officer has been nominated & is in place	Yes / No	
	(i) Name, Designation & Address of present Principal Officer		
	(ii) Date of appointment		
	(iii) Date of Board Meeting nominating the Principal Officer		
5	<b>Risk Categorisation</b>		
	Whether the Bank has the system in place of risk categorisation of customers as 'low', 'medium' and 'high' risk	Yes / No	
	If yes, then when such categorisation last completed		
6	Whether Risk Categorisation is reviewed and updated periodically?	Yes / No	
	(i) Low Risk Category	(Indicate periodicity like annual, half-	
	(ii) Medium Risk Category	Indicate Periodicity	
	(iii) High Risk Category	Indicate Periodicity	
7	<b>Record Management System - Whether necessary record management system has been introduced?</b>	Yes / No	
	Details of existing instructions issued (Date/Ref. No. and important features)		
8	Whether the bank is registered with FIU-IND?	Yes / No	
	(ii) If yes, furnish registration number		
	(iii) If no, reasons for non-registration.		
9	Whether the bank has necessary software throwing alerts for transactions inconsistent with risk categorisation	Yes / No	
	If Yes, details (name of software, if any, date of acquiring, date of operationalising etc.) thereof		

## Know Your Customer (KYC) Directions - Status of compliance (as on \_\_\_\_\_)

Name of the Bank : \_\_\_\_\_

State : \_\_\_\_\_

Sl. No.	Particulars	Status/Comments of the Bank			Remarks
	Whether necessary parameterisation therefor has been approved by the Board?	Yes / No			
	If yes, details of Board Meeting approving such parameterisation				
	Whether the bank is getting alerts?	Yes / No			
	Whether the alerts are being examined further to decide whether the transactions can be considered as 'suspicious transactions' or not	Yes / No			
10	Whether following Reports are being furnished to FIU-IND electronically?	Yes / No	Periodicity	Date of last report furnished to FIU-IND	
	CTR				
	STR				
	CCR				
	NTR				
11	Total Number of Staff				
12	No. of staff trained in AML/CFT policy.				

