CKYC & KRA KYC FORM



ARN - 64917 EUIN - E434563	KNUW	YUUR CLIENT AP	PLICATION FORM (For Individuals only)
(Please fill the form in English and in Bl	LOCK Letters)	Application Type* New	Update KYC Number*
Fields marked with * are mandatory fie	elds	KYC Type* Norma	al (PAN is mandatory) PAN Exempt Investors (Refer instruction K)
1. IDENTITY DETAILS (Pleas	se refer instruct	tion A at the end)	
PAN		Please enclose a	duly attested copy of your PAN Card
Name* (Same as ID proof)	Prefix	First Name	Middle Name Last Name
Maiden Name (If any*)			
Father / Spouse Name*			
Mother Name*			
Date of Birth*	D M M	Y Y Y Y	РНОТО
Gender*	M- Male		F- Female T-Transgender
Marital Status*	Married		☐ Unmarried ☐ Others
Citizenship*	IN- Indian		Others - CountryCountry Code
Residential Status*	Resident Ind Foreign Nati		☐ Non Resident Indian ☐ Person of Indian Origin
Occupation Type*	S-Service	(Private Sector	☐ Public Sector ☐ Government Sector)
	0-Others	(Professional	Self Employed Retired Housewife Student)
	B-Business X- Not Categ	jorised	
2. PROOF OF IDENTITY (Pol)	* (for PAN e	exempt Investor or if PAN	card copy not provided) (Please refer instruction C & K at the end)
(Certified copy of <u>any one</u> of the following Proof		•	
A- Passport Number			Passport Expiry Date D D M M Y Y Y Y
B- Voter ID Card			
C- PAN Card			
D- Driving Licence			Driving Licence Expiry Date D D M M Y Y Y Y
E- Aadhaar Card			
F- NREGA Job Card			
Z- Others (any document notified by the o	central governme	nt)	Identification Number
3. PROOF OF ADDRESS (POA	\) *		
3.1 Current / Permanent / Overs	seas Address	Details (Please see instructi	on D at the end)
Address			
Line 1*			
Line 2			20.47 000 *
Line 3 US		 	City / Town / Village* City / Town / Village* State / U.T Code* as per Indian Motor Vehicle Act, 198
			Zip / Post Code* State / U.T Code* as per Indian Motor Vehicle Act, 198 Country* Country Code as per ISO 31
State/UT* Residu	ential / Busine	ess Resi	
(Certified copy of <u>any one</u> of the following F			
Passport Number			Passport Expiry Date D D M M Y Y Y Y
☐ Voter ID Card			
☐ Driving Licence			Driving Licence Expiry Date D D M M Y Y Y Y
Aadhaar Card			
NREGA Job Card			
Others (any document notified by the cent	tral government)		Identification Number
3.2 CORRESPONDENCE / LOCAL			
	as Address de	tails (In case of multiple corr	espondence / local addresses, please fill 'Additional Form', Submit relevant documentary proof)
Line 1*			
Line 2			City / Town / Village*
District*			Zip / Post Code* State / UT Code* as per Indian Motor Vehicle Act, 198
State/UT*			

4. CONTACT DETAILS (All communications will be sent on provided Mobile No. / Email ID) (Ple	ease refer instructions F at the end)										
Email ID											
Mobile Tel. (Off)	- Tel. (Res) -										
_	tion(s) Outside India (Please refer instruction B at the end)										
5. FATCA/CRS Information (Tick if Applicable) Residence for Tax Purposes in Jurisdic Additional Details Required* (Mandatory only if above option (5) is ticked)	נוטווןט) טענטועפ ווועום נד ופמספ רפופו וווטנוטכנוטוו ס מנ נוופ פווען										
	ountry Code of Jurisdiction of Residence as per ISO 3166										
Tax Identification Number or equivalent (If issued by jurisdiction)*											
Place / City of Birth* Country of Birth	* Country Code as per ISO 3166										
Address											
Line 1*											
Line 2	Cia. I Taura (Village #										
Line 3	City / Town / Village* State / UT Code* as per Indian Motor Vehicle Act, 1988										
State/UT*	Country* Country Code as per INDIAN MOCO VEHICLE ACT, 1900										
6. DETAILS OF RELATED PERSON (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1') Related Person Deletion of Related Person KYC Number of Related Person (if available*)											
Related Person Type* Guardian of Minor Assignee	KYC Number of Related Person (if available*) Authorized Representative										
Prefix First Name	Middle Name Last Name										
Name*	tionall										
(If KYC number and name are provided, below details of section 6 are optour of Identity [Pol] of Related Person* (Please see instruction (H) at the end)	aunun										
(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted)											
A-Passport Number	Passport Expiry Date D D M M Y Y Y Y										
B-Voter ID Card	, adaptive										
C-PAN Card											
☐ D-Driving Licence	Driving Licence Expiry Date D D M M Y Y Y Y										
Aadhaar Card											
F-NREGA Job Card											
Z-Others(any document notified by the central government)	Identification Number										
7. REMARKS (If any)											
O ADDITION TO ADATION											
8. APPLICANT DECLARATION											
 I hereby declare that the details furnished above are true and correct to the best of my known changes therein, immediately. In case any of the above information is found to be false that I may be held liable for it. I hereby declare that I am not making this application Regulations or any statute of legislation or any notifications/directions issued by any government. I hereby consent to receiving information from Central KYC Registry through SMS/Em 	or untrue or misleading or misrepresenting, I am aware in for the purpose of contravention of any Act, Rules, vernmental or statutory authority from time to time. aail on the above registered number/email address. [Signature / Thumb Impression]										
Date D D M M Y Y Y Place	Signature / Thumb Impression of Applicant										
9. ATTESTATION / FOR OFFICE USE ONLY											
Documents Received Certified Copies KYC Verification Carried Out by (Refer Instruction I) Institution											
	Institution Details										
Date	Name										
Emp. Code	Code Emp. Branch										
Emp. Designation											
[Employee Signature]	[Institution Stamp]										
In-Person Verification (IPV) Carried Out by (Refer Instruction J)											
,	Institution Details										
Date	Name										
Emp. Code	Code Emp. Branch										
Emp. Designation	Emp. Stution										
[Employee Signature]	[Institution Stamp]										

Instructions/Guidelines for filling Individual KYC Application Form

General Instructions:

- 1. Self-Certification of documents is mandatory.
- 2. KYC number of applicant is mandatory for update/change of KYC details.
- 3. For particular section update, please tick (🗸) in the box available before the section number and strike off the sections not required to be updated.
- 4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
- 5. If any proof of identity or address is in a foreign language, then translation into English is required
- 6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- 8. Sole proprietor must make the application in his individual name & capacity.
- 9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- 10. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/ Passport of Minor/Birth Certificate must be provided.

A. Clarification / Guidelines on filling 'Identity Details' section

- 1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security insurance number, citizen/personal identification/services code/number, and resident registration number)

C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Investors

- 1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- $2. \qquad \text{Mention identification / reference number if 'Z-Others (any document notified by the central government)' is ticked.}$
- 3. Others Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.
- 4. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address (PoA) section

- 1. PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
- 2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

E. Clarification / Guidelines on filling 'Proof of Address [PoA] · Correspondence / Local Address details' section

- 1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

F. Clarification / Guidelines on filling 'Contact details' section

- 1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2. Do not add 'O' in the beginning of Mobile number.

G. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

H. Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

I. List of people authorized to attest the documents after verification with the originals:

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- 5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/ Consulate General in the country where the client resides are permitted to attest the documents.
- 6. Government authorised officials who are empowered to issue Apostille Certificates.

J. List of people authorized to perform In Person Verification (IPV):

- 1. Authorised officials of Asset Management Companies (AMC).
- $2. \qquad \text{Authorised officials of Registrar \& Transfer Agent (R\&T) acting on behalf of the AMC}.$
- 3. KYD compliant mutual fund distributors.
- $4. \qquad \text{Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly)}.$
- 5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

K. PAN Exempt Investor Category

- $1. \qquad \text{Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per Mutual Fund schemes up to INR 50,000/-per investor per year per y$
- 2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
- 3. Investors residing in the state of Sikkim.
- 4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.

LIST OF TWO-DIGIT STATE / U.T CODES AS PER INDIAN MOTOR VEHICLE ACT, 1988

State / U.T.	Code	State / U.T.	Code	State / U.T.	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

List of ISO 3166 Two-Digit Country Code

	Country		Country		Country		Country
Country	Code	Country	Code	Country	Code	Country	Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Масао	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	BO	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR		GY	New Caledonia	NC	Thailand	TH
		Guyana					
British Indian Ocean Territory	OI	Haiti	HT	New Zealand	NZ	Timor	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	СО	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curacao	CW		KG		RW	Yemen	YE
-	CY	Kyrgyzstan		Rwanda	BL		ZM
Cyprus		Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy		Zambia	
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha		Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

SUPPLEMENTARY CKYC FORM

(To be additionally filled by customers using old KYC form)



ARN - 64917 EUIN - E434563 KNOW YOUR CLIENT (KYC) APPLICATION FORM (FOR INDIVIDUALS ONLY)

(Please fill the form in English Fields marked with * are man		,	KYC Type: Normal (PAN is mand	atory) PAN Exempt Investors
	S (Please refer instruction A at the end)			
PAN	Please	enclose a duly attested copy t Name	r of your PAN Card Middle Name	Last Name
Name* (same as ID proof)	FIGUR	t ivallie	Wildlie Wallie	Last Name
Maiden Name (If any*)				
Mother Name*				
Residential Status*		Resident Indian		
Occupation Type*	Foreign National Person S-Service (Private Sector O-Others (Professional B-Business X-Not Categorised		nment Sector) d	
	RMATION (Tick if Applicable) * (Mandatory only if above option is		nce for Tax Purposes in Jurisdiction(s) Outside	India (Please refer instruction B at the end)
Country of Jurisdiction of R			Country Code of Jurisdiction	of Residence as per ISO 3166
·	or equivalent (If issued by jurisdiction)*			
Place / City of Birth*		Country of Birth*		Country Code as per ISO 3166
Addres		Journal of Birth		as por 100 0 100
Line 1*				
Line 2				
Line 3			City / Town / Village*	
District*		Zip/Post Code*		er Indian Motor Vehicle Act, 1988
State/UT*		Country*		Country Code as per ISO 3166
	TEN DEDONN (NDTINNAL) (plea		d) (in case of additional related persons, please fill 'A	nnoviuro P1/\
				IIIIexure DT /
Related Person	Deletion of Related Person	KYC Number of Relate		
Related Person Type*	Guardian of Minor Assig	nee 🗌 Authorized Rep	oresentative Middle Name	Last Name
Name*				
	are provided, below details of section 6 are op			
Proof of Identity [Pol]	of Related Person* (Please see instruc	ction (H) at the end)		
	f the following Proof of Identity[Pol] needs to b	pe submitted)	Parament Funity Data D. D. M. M. V.	V V V
A- Passport Number			Passport Expiry Date DDMMY	Y Y Y
B- Voter ID Card				
C- PAN Card				
D- Driving Licence			Driving Licence Expiry Date D D M M	Y Y Y Y
E- Aadhaar Card				
F- NREGA Job Card				
Z- Others (any document i	notified by the central government)		Identification Number	
4 REMARKS (If any)				
5 APPLICANT DECL	ARATION			
			ledge and belief and I undertake to inform you o	
any changes therein, immed	diately. In case any of the above info	rmation is found to be false	or untrue or misleading or misrepresenting, I ar r the purpose of contravention of any Act, Rules	m
Regulations or any statute o	of legislation or any notifications/direc	tions issued by any governme	r the purpose of contravention of any Act, Rules ental or statutory authority from time to time. e above registered number/email address.	[Signature / Thumb Impression]
Date D D M M Y	V V V Place			Signature / Thumb Impression of Applicant

INSTRUCTIONS/GUIDELINES FOR FILLING INDIVIDUAL KYC APPLICATION FORM

General Instructions:

- 1. Self-Certification of documents is mandatory.
- 2. KYC number of applicant is mandatory for update/change of KYC details.
- 3. For particular section update, please tick (v) in the box available before the section number and strike off the sections not required to be updated.
- 4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
- 5. If any proof of identity or address is in a foreign language, then translation into English is required.
- 6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- 8. Sole proprietor must make the application in his individual name & capacity.
- 9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- 10. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/ Passport of Minor/Birth Certificate must be provided.
- A. Clarification / Guidelines on filling 'Identity Details' section
 - Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the
 application is liable to be rejected.
 - Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.
- B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India
 - 1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

EXISTING INDIVIDUAL INVESTORS - SUPPLEMENTARY KNOW YOUR CLIENT (KYC), FATCA & CRS - SELF CERTIFICATION FORM (Including Sole Proprietor)



[Please consult your professional tax advisor on your tax residency and related FATCA & CRS guidance]

ARN - 64917 EUIN - E434563

FATCA & CRS INFORMATION (SELF CERT	(IFICATION)															
PAN	Folio No.		1													
Name																
Type of Address given at KRA Residential	☐ Business ☐ Resider	ntial / Business Registered O	ffice													
Address of tax residence would be taken as avail	lable in KRA database. In	case of any change please appro	ach KRA & notify the changes													
Nationality		Date of birth	D M M Y Y Y Gend	der Male Female												
Place of Birth		Country of Birth														
Father's name		(mandatrpy if PAN not provided)														
Permissible documents are Passport Election ID Card PAN Card Govt. ID Card Driving License UIDAI Card NREGA Job Card Others specify																
Identification number of the document provided																
Are you a tax resident of any country other than India? Yes No																
If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.																
Sr. No. Country of Tax Residency*	T;	ax Payer Identification Number*	Identification Type (TIN or	Identification Type [TIN or other, please specify]												
1																
2																
3																
*To also include USA, where the individual is a citizen/ green card hold	der of USA.															
*In case Tax Identification Number is not available, kindly provide its f	functional equivalent.															
ADDITIONAL KYC INFORMATION																
Occupation Details ServicePrivat	te Sector Public Secto Agriculture Propriete		Student Professional Ho	ousewife												
Gross Annual Income (Rs.)	☐ 1 - 5 Lacs	☐ 5 · 10 Lacs ☐ 10 ·	25 Lacs	re												
OR Net-worth (Mandatory for Non-Individuals) ₹		as on D D M M Y	Y Y Y (Not older than 1 year)													
Politically Exposed Person (PEP) Status* PEP	Related to PEP	☐ Not Applicable														
*PEP are defined as individuals who are or have been entrusted with senior executives of state owned corporations, important political par		ign country, e.g., Heads of States or of Govern	nments, senior politicians, senior Government/judic	ial/ military officers,												
Declaration																
I / We have understood the information requirements of this F complete. I / We also confirm that I / We have read and understo				this Form is true, correct, and												
Date D D M M Y Y Y Y																
Place			First / Guardian													
	TER	RMS & CONDITIONS														

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certain

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Axis Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS INSTRUCTIONS

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

\$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	 Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/mailing address in a country other than India	Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)
Telephone number in a country other than India	If no Indian telephone number is provided 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR 2. Documentary evidence (refer list below)
Telephone number in a country other than India	 Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- 1. Certificate of residence issued by an authorized government body*
- 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)
- * Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

$\label{lem:amc} \textbf{AMC contact address \& call center details.}$

Axis Asset Management Company Limited

Investment Manager to Axis Mutual Fund

Axis House, First Floor, C-2, Wadia International Centre,

Pandurang Budhkar Marg, Worli, Mumbai - 400 025.

Tel 022 4325 5100 Fax 022 4325 5199

 $\textbf{Toll Free} \ 1800\ 221322\ or\ 1800\ 3000\ 3300\ From\ Monday\ to\ Friday\ -\ 8\ AM\ to\ 7\ PM\ On\ Saturday\ -\ 9\ AM\ to\ 6\ PM$

Email customerservice@axismf.com **Web** www.axismf.com

FATCA-CRS Declaration & Supplementary Information Declaration Form for Individuals



Please consult a tax professional for further guidance regarding your tax residency for FATCA & CRS complianc

riedse t	onsui	ιa	lax	וטוע	too	IUII	ai iu	ш	ui ti	IEI	yu	luc	IIICE	וטו	ya	ıuııı	y y	vui	la	IX I	ยงแ	uei	icy	IUI	ГА	116	нс	יט א	no	CUI	IIIh	IIdii	ile														
																																							ARN	1 -	649	17	EUI	IN -	E43	345	63
Name																																															
PAN								T			T	T		OR	R P	AN E	xem	ipt k	(YC	: Re	ef No). (F	PEKR	N)	Pla	ace	of E	3irth	1											T			T		Ť	T	
Nationali	ty		India	n [l	J.S.	Ĺ		Othe	rs					(F	lease	spe	ecify)						C	Coun	itry	of E	Birth					İ										Ī	Ī	İ	Ī	
Tax Resid	ax Residence Address (for KYC address) Residential Registered Office Business																																														
	re you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No																																														
•	f 'No' please proceed for the signature of declaration																																														
	ft'YES', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries																																														
Sr. No.			Co	untr	y of	Tax	Res	side	ency					Ta							mbe lent		r		Identification Type (TIN or other, please specify)											If TIN is not available, please tick (🗸) the reason A, B, & C (as defired below)											
1.																																						Rea	son		Α			В			С
2.																																					T	Rea	son		Α			В			С
Reason A	: The c	ount	ry wh	ere t	the A	CCOL	ınt H	olde	er is l	liabl	le to	pa	/ tax	doe	s n	ot iss	sue 1	Tax I	den	ntifi	catio	on l	lumb	ers	to it	ts re	side	ents.																			
Reason B	ason A: The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents. ason B: No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected).																																														
Reason C	: Other	s; ple	ase s	tate	the	reas	on th	erec	of.																																						
Declarat	ion:																																														
I hereby co I also cont above info authoritie	firm tha ormatio	at I h	ave r	ead a	ınd u	nder	stoo	d th	ie FA	TCA	4 & 0	CRS	3 Ter	ms a	and	Con	ditio	ons l	oelo)W a	and h	nere	eby a	ссе	pt th	he s	ame	e. I a	lsoι	ınde	erta	ke t	o ke	ер у	ou ir	nforn	ned i	n wr	iting	abo	ut ar	ny ch	ange	es / m	nodifi	icati	on to th
Date																																															
Place																																															
																FA1	ГC	Α δ	<u> </u>	CF	 3S	 TI	R۱	 1S		. C	ON	UDI	ITI		us																
				ı	Vote	: Th	ne Gu	uida	ance	e No	ote/i	not	ifica	tio																			n of	the	ter	ms s	spec	ified	in t	he f	form	1)					
Details un additional appointed	person	ıal, t																																													
Should the			nange	in a	ny in	form	nation	n prı	ovide	ed b	y yo	u, p	leas	e en:	sur	e you	ı adı	vise	us p	pror	mptly	y, i.	e., wi	thir	n 30	day	s.																				
Please not you believ																u ha	/e m	nulti	ple	rela	tions	shi	os wi	th A	Axis	Mu	tual	Fun	d or	its ç	grou	ıp en	ıtitie	s. T	here	fore,	it is	impo	rtan	t tha	at yo	u res	pond	l to o	ur re	ques	t, even
																	FA	\T(CA	8	k C	R	S II	VS	TF	RU	C1	Γ Ι Ο	N	S																	
If you have							resid	lend	cy, pl	leas	е со	nta	ict y	our t	tax	advi	sor.	If yo	ou a	re a	ıUSı	citi	zen o	r re	side	ent o	r gr	een	card	l hol	lder	, ple	ase i	inclu	ıde l	Jnite	d St	ates	in th	e foi	reign	coul	ntry i	infori	matio	on fi	eld alon
It is mand attach thi				TIN	or f	unct	ional	equ	ivalı	ent i	if th	ес	ount	ry ir	1 W	hich	you	are	tax	(res	siden	nt is	ssues	SU	ch id	den	ifier	rs. If	f no	TIN	lis	yet a	availa	able	or h	ias n	ot y	et be	en is	sue	d, ple	ase	prov	ide a	n exp	plana	ation an
In case cu				llow	ing lı	ndici	ia per	tair	ning '	to a	fore	eign	cou	ntry	an	d yet	dec	clare	S SE	elf t	o be	noı	ı-tax	res	iden	ıt in	the	resp	ecti	ve c	our	ıtry,	cust	tom	er to	prov	ide ı	eleva	ant C	urin	g Do	cum	ents	as m	entio	ned	below:
FAT	FATCA & CRS Indicia observed (ticked) Documentation required for Cure of FATCA/ CRS Indicia																																														

U.S. place of birth 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); and 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth Residence/mailing address in a country Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below) Telephone number in a country other than If no Indian telephone number is provided: India 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number: Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India: OR 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- 1. Certificate of residence issued by an authorized government body*
- 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)
- *Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

FORM FOR UPDATION OF AADHAAR



(For Individual / Sole Proprietors)

То,								
Axis Mutual Fund								
FOLIO NUMBER								
Folio No.								
I/We request Axis Mutual Fund to update my/our following d Registrar of Axis Mutual Fund to refer these details to any o Agencies etc. and also authorize such agencies / service prov	f the appropriate authorities including Unique Identifica	ion Au	thority	of Ind	ia (UII	DAI) /		
FIRST HOLDER			Gen	der	ПМ	F	: 🖂	Othe
Name	Aadhar No.				_		$\overline{\top}$	
Enclosed Self attested copy of Aadhaar Card Aadhaar Enclosed	ed by UIDAI containing proof of KIN No.		\pm		\pm	$\overline{\Box}$	\pm	
PAN / PEKRN	Date of Birth D D M M Y Y Y Pin C	Code	$\frac{}{}$		+	\forall		
Email ID	Mob	ile No.	+		+			
SECOND HOLDER			C	-l [Oth
SECOND HOLDER	A dl N		Gen			<u> </u>	\dashv	Othe
Name Letter issue	Aadhar No.						+	
Aadhaar E	nrolment KIN No.	<u>ا</u> ا	+		+	H		
PAN / PEKRN	Date of Birth D D M M Y Y Y Pin C	L	+		+	$\frac{\square}{\square}$		1
Email ID	Mob	ile No.						
THIRD HOLDER			Gen	der	M	F	: 🗌	Oth
Name	Aadhar No.							
Enclosed Self attested copy of Aadhaar Card Aadhaar E	ed by UIDAI containing proof of KIN No.							
PAN / PEKRN	Date of Birth D D M M Y Y Y Pin C	Code						
Email ID	Mob	ile No.						
GUARDIAN			Gen	der [М	F	: 🔲	Oth
Name	Aadhar No.							
Enclosed Self attested copy of Aadhaar Card Aadhaar E	ed by UIDAI containing proof of KIN No.					П	Ť	
PAN / PEKRN	Date of Birth D D M M Y Y Y Pin C	Code				П		
Email ID	Mob	ile No.						
POA HOLDER			Gen	der		F		Othe
Name	Aadhar No.				_	$\overline{}$	$\overline{}$	
England Solf attented capy of Andhage Card Letter issue	ed by UIDAI containing proof of		+		+		+	
PAN / PEKRN	Date of Birth D D M M Y Y Y Pin C	ode [+		+	+		
Email ID		ile No.			+		\neg	
CONSENT FOR AUTHENTICATION AND SHARING OF AA I/We hereby provide my/our consent in accordance with Aadhaar (iii) updating my/ our Aadhaar number(s) in accordance with the sharing/disclosing of the Aadhaar number(s) including demograp Transfer Agent (RTA) for the purpose of updating the same in my/ou	DHAAR DATA Act, 2016 and regulations made thereunder, for (i) collecting, see Aadhaar Act, 2016 (and regulations made thereunder) and chic information with the asset management companies of SEE	toring a	I/ We	hereby	provid	de my,	our co	onser
Signature of 1st Holder/ Guardian / POA			Signat	ure of	3rd H	older		
Axis Mutual Fund - Acknowledgement of Form							MUTUA	
Received, subject to verification of Form for Updation of	AADHAAR							
from Mr/ Mrs/ Ms								

GUIDELINES

- 1. By filling up this Form, the investor authorizes Axis Asset Management Company Limited/Axis Mutual Fund/UIDAI/various KYC Registration Agencies/Authentication agencies etc. to receive and share the information physically or electronically related to Aadhaar and other related matters.
- 2. In case of any correction/change in name/address/mobile number/date of birth etc. recorded with UIDAI, please update the change with UIDAI's Aadhaar Self Service Update Portal, currently, https://ssup.uidai.gov.in/web/guest/update.
- 3. In case of any assistance, please contact the nearest Investor Service Centre of Axis Mutual Fund.
- 4. The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/rules/ regulations and provision of the said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016. We shall receive your demographic information which shall be used only to comply with applicable laws/rules/regulations.
- 5. Ensure all the details are as per PAN Card / KYC / Aadhaar Card.
- 6. If the name given in the application does not match with the name as appearing on the PAN Card / Aadhaar Card, authentication application may be liable to get rejected or further transaction may be liable to get rejected.
- 7. Aadhar No. is optional for minor & mandatory for guardian.

	CHECK LIST
Form has been completed and signed by all the holders.	Letter issued by UIDAI containing Aadhaar Number.
The copy of Self attested AADHAR card	If Aadhaar number is applied for, please enclose letter issued by UIDA containing proof of Aadhaar Enrolment.