

**Know Your Customer (KYC) Application Form | Individual**



**Important Instructions:**

- A. Fields marked with '\*' are mandatory fields.
- B. Tick ' ' wherever applicable.
- C. Please fill the form in English and BLOCK letters.
- D. Please fill the date in DD-MM-YY format.
- E. For particular section update, please tick ( ) in the box section number and strike off the sections not required to be updated.
- F. Please read section wise detailed guide
- G. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- H. List of two character ISO 3166 country codes is available at the end.
- I. KYC number of applicant is mandatory for update application.
- J. The 'OTP based E-KYC' check box is to be checked for accounts opened using OTP based E-KYC in non-face to face mode

ARN-64917 EUIN-E434563

**For office use only** (To be filled by financial institution)

Application Type\*  New  Update

KYC Number  (Mandatory for KYC update request)

Account Type\*  Normal  Minor  Aadhaar OTP based E-KYC (in non-face to face mode)

**1. Personal Details (Please refer instruction A at the end)**

Name\* (Same as ID proof) Prefix  First Name  Middle Name  Last Name

Maiden Name

Father / Spouse Name\*

Mother Name

Date of Birth\*  DD -  MM -  YY  YY

Gender\*  M- Male  F- Female  T- Transgender

PAN\*   FORM 60 furnished

Marital Status\*  Married  Unmarried  Others

Citizenship\*  IN- Indian  Others – Country  Country Code

Residential Status\*  Resident Individual  Non Resident Indian  Foreign National  Person of Indian Origin

**2. PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction B at the end)**

Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

A-Passport Number  Passport Expiry Date  DD -  MM -  YY  YY

B-Voter ID Card

C-Driving Licence  Driving Licence Expiry Date  DD -  MM -  YY  YY

D-NREGA Job Card

E-National Population Register Letter

F-Proof of Possession of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*

II  E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*

III  Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*



Signature /Thumb Impression across photo without covering the face

**Address** [For other than resident Individual, please mention Overseas Address]

Line 1\*

Line 2

Line 3  City/Town/Village\*

District\*  Pin/Post Code\*  State/U.T Code\*  ISO 3166 Country Code\*

**3. CURRENT ADDRESS DETAILS (Please refer instruction B at the end)**

Same as above mentioned address (In such cases address details as below need not be provided)

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

A-Passport Number

B-Voter ID Card

C-Driving Licence

D-NREGA Job Card

E-National Population Register Letter

F-Proof of Possession of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*

II  E-KYC Authentication *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*

III  Offline verification of Aadhaar *No need to attach. Aadhaar card. If submitted, Aadhaar Number to be masked by the customer*

IV  Deemed Proof of Address – Document Type code

**Address**

Line 1\*

Line 2

Line 3  City/Town/Village\*

District\*  Pin/Post Code\*  State/U.T Code\*  ISO 3166 Country Code\*

**4. Contact Details** (All communications will be sent to Mobile number/Email-ID provided) (Please refer instruction **C** at the end)

Tel. (Off)  -  Tel. (Res)  -  Mobile  -    
Email ID

**5. Remarks** (If any)

**6. Applicant Declaration**

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.
- I hereby declare that I am not making this application for the purpose contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

[Signature/Thumb Impression]

Date:    -    -        
Place:

Signature/Thumb Impression of Applicant

**7. Attestation / For Office Use only**

Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  Digital KYC Process  
 Equivalent e-document  Video Based KYC

**KYC documents verification carried out by**

Date:   -   -        
Emp. Name   
Emp. Code   
Emp. Designation   
Emp. Branch

[Employee Signature]

**Institution details**

Name   
Code

[Institution Stamp]

**In-Person Verification (IPV) carried out by**

Date:   -   -        
Emp. Name   
Emp. Code   
Emp. Designation   
Emp. Branch

[Employee Signature]

**Institution details**

[Institution Stamp]

## Instruction / Check list / Guidelines for filling individual KYC Application Form

### General instructions:

1. Self-Certification of documents is mandatory.
2. 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 [F].
3. If any proof of identity or address is in a foreign language, then translation into English is required duly attested by the official as indicated above.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If current & permanent addresses are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity.
7. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport / PIO Card /OCI and overseas address proof is mandatory.
8. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
9. 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 'Personal Details' section

1. Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
2. One of the following is mandatory: Mother's name, Spouse's name, Father's name.

### B. Clarification / Guidelines on filling 'Current Address details' section

1. In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR.
2. PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force.
3. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
4. In Section 2, one of I, II and III is to be selected. In case of online E-KYC authentication, II is to be selected.
5. In Section 3, one of I, II, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
6. List of documents for 'Deemed Proof of Address'

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal tax receipt.
03	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
04	Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.

7. Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
8. "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
9. "Digital KYC process" has to be carried out as stipulated in the PML Rules, 2005.

### C. 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 91-9999999999).
2. Do not add '0' in the beginning of Mobile number.

### D. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person, if available.

### E. Clarification on Minor

1. Guardian details are optional for minors above 10 years of age for opening of bank account only.
2. However, in case guardian details are available for minor 10 years of age, the same (or CKYCR number of guardian) is to be uploaded.

### F. 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.

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

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. 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.

### H. PAN Exempt Investor Category

1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
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

# SUPPLEMENTARY KNOW YOUR CLIENT (KYC) FORM



(Complete the relevant section legibly in black/ dark coloured ink and in BLOCK LETTERS.)

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<b>1.</b>	<b>EXISTING UNIT HOLDER INFORMATION</b>	<b>*Mandatory</b>
Unitholder's Name		Folio No.

<b>2.</b>	<b>FIRST APPLICANT'S INFORMATION* [Please shade (●)]</b>								
<input type="radio"/> Mr. <input type="radio"/> Ms. <input type="radio"/> M/s. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align:center;">N</td> <td style="width:10%; text-align:center;">A</td> <td style="width:10%; text-align:center;">M</td> <td style="width:10%; text-align:center;">E</td> </tr> </table>		N	A	M	E	PAN <input type="radio"/> KYC			
N	A	M	E						
<b>Status*</b> <input type="radio"/> Resident Individual <input type="radio"/> Minor <input type="radio"/> NRI (Repatriable) <input type="radio"/> NRI (Non-Repatriable) <input type="radio"/> Sole Proprietorship <input type="radio"/> HUF <input type="radio"/> Partnership Firm <input type="radio"/> Limited Partnership (LLP) <input type="radio"/> Listed Company <input type="radio"/> Unlisted Company <input type="radio"/> Body Corporate <input type="radio"/> Bank/FI <input type="radio"/> Insurance Company <input type="radio"/> Government Body <input type="radio"/> AOP/BOI <input type="radio"/> Trust <input type="radio"/> Society <input type="radio"/> Provident Fund <input type="radio"/> Superannuation/Pension Fund <input type="radio"/> Gratuity Fund <input type="radio"/> FI <input type="radio"/> Others (Please Specify)									
<b>Occupation*</b> <input type="radio"/> Pvt. Sector <input type="radio"/> Public Sector <input type="radio"/> Govt. Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Others (Please Specify)									
<b>Gross Annual Income*</b> <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs - 1 Crore <input type="radio"/> >1 Crore									
<b>Net-worth in ₹</b> _____ as on <table style="display:inline-table; border-collapse: collapse;"> <tr> <td style="border:1px solid black; width:20px; text-align:center;">D</td> <td style="border:1px solid black; width:20px; text-align:center;">D</td> <td style="border:1px solid black; width:20px; text-align:center;">M</td> <td style="border:1px solid black; width:20px; text-align:center;">M</td> <td style="border:1px solid black; width:20px; text-align:center;">Y</td> <td style="border:1px solid black; width:20px; text-align:center;">Y</td> <td style="border:1px solid black; width:20px; text-align:center;">Y</td> </tr> </table> (Not older than 1 year)			D	D	M	M	Y	Y	Y
D	D	M	M	Y	Y	Y			
Please shade (●)* <input type="radio"/> Politically Exposed Person <input type="radio"/> Related to Politically Exposed Person <input type="radio"/> Not Applicable		<b>For Non - Individual Investors*</b> (Is the entity involved in / providing any of the following services) Foreign Exchange / Money Changer Services <input type="radio"/> Yes <input type="radio"/> No Gaming / Gambling / Lottery Services [eg. casinos, betting syndicates] <input type="radio"/> Yes <input type="radio"/> No Money Lending / Pawning <input type="radio"/> Yes <input type="radio"/> No Any other information [Please specify]: _____							

<b>3.</b>	<b>SECOND APPLICANT'S INFORMATION* [Please shade (●)]</b>					
<input type="radio"/> Mr. <input type="radio"/> Ms. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align:center;">N</td> <td style="width:10%; text-align:center;">A</td> <td style="width:10%; text-align:center;">M</td> <td style="width:10%; text-align:center;">E</td> </tr> </table>		N	A	M	E	PAN <input type="radio"/> KYC
N	A	M	E			
<b>Status*</b> <input type="radio"/> Resident Individual <input type="radio"/> NRI (Repatriable) <input type="radio"/> NRI (Non-Repatriable) <input type="radio"/> Others (Please Specify)						
<b>Occupation*</b> <input type="radio"/> Pvt. Sector <input type="radio"/> Public Sector <input type="radio"/> Govt. Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Others (Please Specify)						
<b>Gross Annual Income*</b> <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs - 1 Crore <input type="radio"/> >1 Crore						
<b>Net-worth in ₹</b> _____						
<b>Other Details*</b> <input type="radio"/> I am Politically Exposed Person <input type="radio"/> I am Related to Politically Exposed Person <input type="radio"/> Not Applicable						

<b>4.</b>	<b>THIRD APPLICANT'S/ GUARDIAN/ POWER OF ATTORNEY INFORMATION* [Please shade (●)]</b>					
<input type="radio"/> Mr. <input type="radio"/> Ms. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align:center;">N</td> <td style="width:10%; text-align:center;">A</td> <td style="width:10%; text-align:center;">M</td> <td style="width:10%; text-align:center;">E</td> </tr> </table>		N	A	M	E	PAN <input type="radio"/> KYC
N	A	M	E			
<b>Status*</b> <input type="radio"/> Resident Individual <input type="radio"/> NRI (Repatriable) <input type="radio"/> NRI (Non-Repatriable) <input type="radio"/> Others (Please Specify)						
<b>Occupation*</b> <input type="radio"/> Pvt. Sector <input type="radio"/> Public Sector <input type="radio"/> Govt. Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Others (Please Specify)						
<b>Gross Annual Income*</b> <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs - 1 Crore <input type="radio"/> >1 Crore						
<b>Net-worth in ₹</b> _____						
<b>Other Details*</b> <input type="radio"/> I am Politically Exposed Person <input type="radio"/> I am Related to Politically Exposed Person <input type="radio"/> Not Applicable						

<b>5.</b>	<b>DECLARATION</b>	
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I have read and understood the contents of the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by Union Mutual Fund (formerly Union KBC Mutual Fund) and the terms and conditions and policies on the website.		
Signature  Sole/ First Applicant/ Guardian	Signature  Second Applicant	Signature  Third Applicant

**NOTE**

In accordance with SEBI Circular No. CIR/MIRSD/13/2013 dated December 26, 2013, the additional details viz. Occupation details, Gross Annual Income/networth and Politically Exposed Person (PEP) status which were forming a part of uniform KYC form is now captured in the application form of the Fund. Also, the detail regarding nature of services viz. Foreign Exchange/ Gaming/ Money Lending, etc., (applicable for first/sole applicant) is required to be provided as part of Client Due Diligence (CDD) Process of the Fund.

The said details are mandatory for both Individual and Non Individual applicants.

# FORM FOR DETAILS UNDER FATCA & CRS/ FOREIGN TAX LAWS

Annexure for Individual Accounts (Including Sole Proprietor)  
(Please consult your professional tax advisor for further guidance on your tax residency, if required)



To be filled in BLOCK LETTERS [Please refer instructions overleaf. Please strike off sections that are not applicable].

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The below information is required for all Applicant(s)/ Investor(s):

Existing Folio No:

Application No:

The below information is required for all applicant(s)/ guardian			
Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Is the Country of Birth / Citizenship / Nationality / Tax Residency other than India?*	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
* If Yes, please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.			
Place/ City of Birth			
Country of Birth			
Address Type (of address in KYC records)	<input type="radio"/> Residential / Business <input type="radio"/> Residential	<input type="radio"/> Residential / Business <input type="radio"/> Residential	<input type="radio"/> Residential / Business <input type="radio"/> Residential
Country of Tax Residency 1			
Tax Payer Ref. ID No. 1			
Documentation Type 1 (TIN or Other Please specify)			
If TIN is not applicable, [Please tick (3)] the reason A, B or C [as defined below]	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Documentation Type 2 (TIN or Other Please specify)			
If TIN is not applicable, [Please tick (3)] the reason A, B or C [as defined below]	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____	Reason <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C _____

- Reason A - The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.
- Reason 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 - others; please state the reason thereof.

## Investor(s) Declaration and Signature(s):

- Having read and understood the contents of the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by Union Mutual Fund and the terms and conditions and policies on the website and FATCA/ CRS terms and conditions before investing. I/ We, hereby apply to the Trustee of Union Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I/ We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We hereby nominate the above nominee(s) to receive all the amounts to my/our credits in the event of my/our death and have read the instructions for nomination. Signature of the nominee(s) acknowledging receipts of my/our credit will constitute full discharge of liabilities of Union Mutual Fund/ AMC/ Trustee/ Sponsor. I/ We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/ We hereby agree to have read and understood the terms and conditions with regard to payment of transaction charges as specified in the SID/SAI/KIM and addenda thereto and this application form and instructions thereto. I/ We hereby confirm that Union Mutual Fund (the Fund)/ Union Asset Management Company Private Limited (the AMC) and its empanelled broker(s) has not given any indicative portfolio and indicative yield, in any manner whatsoever. I/ We hereby confirm that at the time of investment, I/ we have the express authority to invest in units of the Scheme and the AMC / Trustee / Mutual Fund/ Sponsor will not be responsible if such investment is ultravires the relevant constitution.

**Applicable to Micro Investments only:** I/We do not have any existing Micro investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year.

**Applicable to NRIs only:** I/We confirm that I am / we are Non-Resident(s) of Indian Nationality / Origin and I/we hereby confirm that the funds for subscriptions have been remitted from abroad through normal banking channels or from fund in my/our Non Resident External / Ordinary account/ FCNR account(s).

- I/ We acknowledge and confirm that the information provided above is true and correct to the best of my/ our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ we am/ are aware that I/ we may be liable for it. I/ We hereby authorize the Fund/ the AMC/ the Registrar and Transfer Agent (the RTA) to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us to the Fund, its Sponsor, the AMC, trustees, their employees / RTAs ("the Authorized Parties") or any Indian or foreign governmental or statutory or judicial authorities/ agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax/ revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/ us of the same. Further, I/ we authorize to share the given information to other SEBI Registered Intermediaries to facilitate single submission/ updation & for other relevant purposes. I/ We also undertake to keep you informed in writing about any changes/ modification to the above information in future and also undertake to provide any other additional information as may be required at your/ Fund's end. As may be required by domestic or overseas regulators/ tax authorities, I/ we authorize the Fund/ the AMC/ the RTA to withhold and pay out any sums from my/ our account(s) or close or suspend my/ our account(s) without any obligation of advising me/ us of the same.

First / Sole Applicant/ Guardian

Second Applicant

Third Applicant

Date:

Place:

Refer overleaf for instructions.

### Instructions:

**Foreign Account Tax Compliance Act (FATCA) & Common Reporting Standards (CRS) Details and Terms & Conditions:** 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 to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. 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 FIs 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. 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 a tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach it to this form.

In case investor has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, investor 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	<ol style="list-style-type: none"> <li>1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;</li> <li>2. Non-US passport or any non-US government issued document <b>evidencing nationality or citizenship</b> (refer list below); <b>AND</b></li> <li>3. <b>Any one</b> of the following documents:               <ol style="list-style-type: none"> <li>a. Certified Copy of "Certificate of Loss of Nationality or</li> <li>b. 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</li> </ol> </li> </ol>
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> <li>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; <b>and</b></li> <li>2. Documentary evidence (refer list below)</li> </ol>
Telephone number in a country other than India	<p><b><i>If no Indian telephone number is provided</i></b></p> <ol style="list-style-type: none"> <li>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; <b>and</b></li> <li>2. Documentary evidence (refer list below)</li> </ol> <p><b><i>If Indian telephone number is provided along with a foreign country telephone number</i></b></p> <ol style="list-style-type: none"> <li>1. Self-certification (in attached format) 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; <b>OR</b></li> <li>2. Documentary evidence (refer list below)</li> </ol>
Standing instructions to transfer funds to an account maintained in a country other than India (other than depository accounts)	<ol style="list-style-type: none"> <li>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; <b>and</b></li> <li>2. Documentary evidence (refer list below)</li> </ol>

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.**



Please address all future communication(s) in connection with this application to the Registrar & Transfer Agent of the Scheme:

**Computer Age Management Services Pvt. Ltd.,**

Unit: Union Mutual Fund

158, Rayala Tower 1, 1st Floor, Anna Salai, Chennai - 600002.

**Email:** enq\_uk@camsonline.com | **Website:** www.camsonline.com

**Union Asset Management Company Pvt. Ltd.**

Unit 503, 5th Floor, Leela Business Park, Andheri Kurla Road, Andheri (East), Mumbai - 400059

**Toll Free :** 1800 200 2268/1800 572 2268 | **Tel No. :** 022 67483333

**Website:** www.unionmf.com | **Email :** investorcare@unionmf.com