



**Know Your Customer (KYC) and FATCA-CRS Application Form (Resident Individuals)**

Please fill the information in CAPITAL Letters and  in appropriate places

The information is sought under Prevention of Money Laundering Act, 2002, the rules notified thereunder and RBI guidelines on Know Your Customer  
**For existing Depositor, the information furnished herein will supersede the information available in the records of SFL**

**Customer's Details** (as per KYC documents)

Customer ID: \_\_\_\_\_ \*PAN (\*Form 97) \_\_\_\_\_  
 (If existing Investors)

CKYC No \_\_\_\_\_ (if any) \*Gender : M  F  Others

\*Date of Birth

\*Name \_\_\_\_\_

\*Father Name \_\_\_\_\_

\*Mother Name \_\_\_\_\_

Spouse Name (If Married) \_\_\_\_\_

Country of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_

\*Communication Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ \*Pin \_\_\_\_\_

Country \_\_\_\_\_ Birth Place \_\_\_\_\_

\*Nationality \_\_\_\_\_ \*Citizenship \_\_\_\_\_

\*Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ \*Pin \_\_\_\_\_

Country \_\_\_\_\_

\*Mobile No \_\_\_\_\_ # Email ID \_\_\_\_\_

\* Fields are Mandatory

# Mandatory for E-Receipt

\*If investment amount is less than or equal to ₹50,000/- or aggregating to less than ₹5,00,000/- during financial year

\*Category  Member of Public  Shareholder  Director  Relative of Director  Promoter

\*Occupation Type:  Salaried  Professional  Self Employed  
 Student  Housewife  Retired  Other (Please specify \_\_\_\_\_)

\*If Self Employed  Manufacturing  Professionals  Service Provider  Agriculture  Trader

Nature of Business:  Jewellers/Bullion  Real Estate  Stock Broker  Other (Please specify \_\_\_\_\_)

\*Please tick (✓) if the following is applicable to you  Politically Exposed Person (PEP)  Relative of PEP  Not Applicable

\*Annual Income:  
 Upto Rs. 3 Lakhs  Above Rs. 3 Lakhs - 6 Lakhs  Above Rs. 6 Lakhs - 15 Lakhs  Above Rs. 15 Lakhs - 30 Lakhs  Above Rs. 30 Lakhs

\*Source of Fund:  
 Salaried  Business Income  Agriculture  Investment Income  Sale of Asset  Other (Please Specify) \_\_\_\_\_

\*Person with Disability:  
 Differently Aabled  YES  NO Type of Disability \_\_\_\_\_ Disability % \_\_\_\_\_ UDID No: \_\_\_\_\_

| *Proof of Identity (Self Attested)               |        |                |
|--|--------|----------------|
|  | ID No. | Expiry Date    |
| <input type="checkbox"/> Aadhaar issued by UIDAI | _____  | _____          |
| <input type="checkbox"/> Passport                | _____  | ____/____/____ |
| <input type="checkbox"/> Driving Licence         | _____  | ____/____/____ |
| <input type="checkbox"/> Voter ID Card           | _____  | _____          |
| <input type="checkbox"/> Others :                | _____  | _____          |

| *Proof of Address (Self Attested)                |                |
|--|----------------|
|  | Expiry Date    |
| <input type="checkbox"/> Aadhaar issued by UIDAI | ____/____/____ |
| <input type="checkbox"/> Passport                | ____/____/____ |
| <input type="checkbox"/> Driving Licence         | ____/____/____ |
| <input type="checkbox"/> Voter ID Card           | _____          |
| <input type="checkbox"/> Others :                | _____          |

Please tick applicable tax resident declaration: (Any one)\*  
 I am a tax resident of India and not resident of any other country or  I am a tax resident of the country/ies mentioned below

| Country | Tax identification Number | Identification Type (TIN or Other please specify) | Address Type for Tax Purpose <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered office |
|---------|---------------------------|---|--|
|         |                           |   | Address for Tax Purpose <input type="checkbox"/> Communication <input type="checkbox"/> Permanent <input type="checkbox"/> Please note Below   |
|         |                           |   |  |
|         |                           |   |  |

#To also include USA, where the individual is a citizen/green card holder of USA %In case Tax Identification No. is not available, kindly provide functional equivalents.

**Depositor Declaration**

I/We certify that:

- (i) I/We have read and understood the FATCA-CRS Terms and Conditions and here by accept the same.
- (ii) All the particulars (including Taxpayer Identification Number) given hereby are true, correct and complete to the best of my/our knowledge and belief.
- (iii) I/We shall submit a new form to Shriram Finance Ltd., within 30 days if any information or certification in this form becomes incorrect/ changed.
- (iv) I/We agree that as may be required by regulators, Shriram Finance Ltd. may be required to report my/our details to such regulators or close or suspend my/our account without any obligation of advising me/us of the same.
- (v) I/We understand that Shriram Finance Ltd. is relying on this information for the compliance of FATCA-CRS and agree not to hold Shriram Finance Ltd., their employees, authorised agents, service providers, liable for any consequences /losses/costs/ damaged in case of

any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating /delay in intimating any changes to the above particulars.

- (vi) I/We agree to indemnify Shriram Finance Ltd. in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S." person status or other Country Residential status or in respect of any other information as may be required under applicable tax laws.
- (vii) I/We certify that: a. I/We is (1) an applicant taxable as a US Person under the laws of the United States of America (U.S.) or any state or political subdivision thereof or therein, including the District of Columbia or of any other states of the U.S. (i) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the depositor is a US Person/Citizen) b. I/We is an applicant taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the depositor is a Tax resident outside India).

Place : \_\_\_\_\_

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

\*Signature : \_\_\_\_\_