



AAA INDIA EQUITY FUND GUIDELINES FOR EASY COMPLETION OF DOCUMENTS

Dear Investor,

Welcome to AAA India Equity Fund. For the ease of completing your application, the following guidelines have been prepared. These are designed for assisting you in completing the documentation and processing your application as soon as possible. Kindly ensure these guidelines are adhered to so as to enable us in completing, processing your application

Fund	AAA India Equity Fund
Documents	<ol style="list-style-type: none"> 1. Investor Application Form 2. Contribution Agreement 3. KYC Application Form along with relevant FATCA and UBO declarations. PLEASE NOTE IN CASE THE INVESTOR IS CKYC REGISTERED, THE CKYC FORMS DO NOT REQUIRE COMPLETION. PLEASE PROVIDE YOUR KIN NUMBER INSTEAD AND ANY FURTHER INFORMATION REQUIRED WILL BE REQUESTED FROM YOU. HOWEVER, FATCA, CRS(AS APPLICABLE) WILL STILL REQUIRE COMPLETION. 4. Supporting documents as required in the Investor Application Form and KYC Form and guidelines mentioned overleaf <p>Please ensure that all the documents are self-attested by the Investor and stamped by Distributor as below:</p> <ol style="list-style-type: none"> 1. In-person verification (IPV) Stamp with Employee Name, Designation, Name of the Organization, Employee Code, Signature and Date 2. Seal with Distributor ARN Code
Investor Information	To be filled in BLOCK LETTERS IN ENGLISH. Form submitted without proper documents or improperly attested documents is liable to be rejected. Form should be filled in legible writing, any cancellation/corrections should be counter signed by the Investor(s)
Other Information	<p>The name(s) of the Contributor has to be the same as mentioned in the PAN Card</p> <p>Full signatures are required at any point of correction or cancellation.</p> <p>In case of individual Investors making a joint application, the Contribution Agreement should be signed by all the investors.</p> <p>In case of Minor application, Proof of Age of Minor, Relationship of Guardian, KYC details (including PAN card, Proof of Identity and Proof of Address) of Guardian are to be provided. Minor application should not have joint holder. If minor PAN / KYC is available, the same is to be provided. Photographs of both minor and guardian should be affixed in the form.</p> <p>Only individuals can have nomination.</p> <p>In the contribution Agreement, the address to be mentioned must be the permanent address. In cases, where communication address differs from the registered/permanent address, then proof of address has to be provided for both the address.</p> <p>If this application is signed under Power of Attorney (PoA), such power of attorney or a duly certified copy thereof must accompany this Contribution Agreement. In addition, all the supporting documents have to be submitted for both the Contributor and the POA holder.</p> <p>Once all documents are ready to be collected, please call 022 24812200 asking for the AIF Investor Relations team.</p>



CHECKLIST FORDISTRIBUTORS

Check Box

Sr. No.		
1	Application Form completed and duly signed Please ensure that the investor's photograph is affixed and is signed across The investor has put a full signature in the relevant pages	
2	In case of Individual investors, Has the investor completed his KYC with CERSAI - CKYC? If 'Yes', Provide KYC Registration Number. IF 'No', duly filled in CKYC Form along with self attested copies of all applicable documents The intermediary or the distributor must do IPV with seal The investor has to fill in and sign the FATCA-CRS declaration This has to be provided for all the holders	
3	Contribution Agreement duly signed and initialed on the relevant pages (including the completion of any relevant Exhibits in the Contribution Agreement). Please note that witness signature is mandatory on the signature page of the Contribution Agreement	
4	Payment will be requested from on the drawdown notices (which will include payment instructions) which will be issued to you in due course.	
5	Nomination Details completed, if applicable	
6	Cancelled Cheque Leaf for registered bank mandate provided (should be personalized and bearing the name of the investor)	
7	Self-Attested PAN Card copy of Applicant(s). The intermediary or the Distributor must do IPV on KYC Application form in case of Individual.	
8	Certified true copy of Power of Attorney, if applicable. The copy of Power of Attorney shall be originally notarized	



VII DECLARATIONS AND SIGNATURE(S) [(Please tick (v))]

“ I/We hereby declare that all the information and particulars given by me/us in this application form are true to the best of my/our knowledge and belief. I/We agree to immediately inform you if there is any change in any of the information given in this application or in the Annexure(s) to this application. I/ We declare and agree that if any of the above statements are found to be incorrect or false or any information or particulars have been suppressed or omitted there from, the Fund/Investment Manager, inter alia, has the right to ask me/us to withdraw from the Fund or transfer the units held by me/us to a transferee as may be designated by it and/or take necessary steps for breach of representation and warranties. I/We also agree to furnish such further information as you or SEBI or any other regulatory authority may require from me/us from time to time in relation to the holdings of Units of the Fund and I/we agree that if I/we fail to give such information, you shall have the right to treat me/us a Defaulting Contributor.”

First Holder	Second Holder	Third Holder
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Place:
Date :

Photograph of
(Please sign across
the photograph

First Holder

Photograph of (Please
sign across the
photograph

Second Holder

Photograph of
(Please sign across
the photograph

Third Holder





CHECK LIST

Have You:

Filled in the Investor Application Form

Filled in the Investor's CKYC

Attached KYC Additional Information FATCA Declaration as the case may be

Executed Contribution Agreement

Signed all relevant Annexures

Enclosed self/certified copies (as set out in the applicable Investor Information Form) of your Identity, Address

Proof and PAN Card

**Know Your Client (KYC)
Application Form (For Individuals only)**

(Please fill the form in English and in BLOCK Letters)

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

PAN Please enclose a duly attested copy of your PAN Card.

Prefix First Name Middle Name Last Name

Name* (same as ID proof)

Maiden Name (If any*)

Father / Spouse Name*

Mother Name*

Date of Birth* DD - MM - YY YY

Gender* M- Male F- Female T- Transgender

Marital Status* Married Unmarried Others

Citizenship* IN- Indian Others (ISO 3166 Country Code)

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

Occupation Type* S-Service (Private Sector Public Sector Government Sector) O- Others Professional Self Employed Retired Housewife Student) B-Business X-Not Categorized

Photo



2. Tick if Applicable Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)

Additional Details Required* (Mandatory only if section 2 is ticked)

ISO 3166 Country Code of Jurisdiction of Residence*

Tax Identification Number or equivalent (if issued by jurisdiction)*

Place / City of Birth* ISO 3166 Country Code of Birth*

3. Proof of Identity (PoI)* (Please refer instruction C at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted, if PAN Card copy is not provided)

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

B- Voter ID Card

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

F- NREGA Job Card

Z- Others (any document notified by the central government) Identification Number

4. Proof of Address (PoA)*

4.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Address Type* Residential / Business Residential Business Registered Office Unspecified

Proof of Address* Passport Driving Licence UID (Aadhaar) Please select blackout Aadhaar Number before submission

Voters Identity Card NREGA Job Card Others

Address

Line 1*

Line 2

Line 3 City / Town / Village*

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

4.2 Correspondence / Local Address Details * (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City / Town / Village*

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

4.3 Address in the Jurisdiction Details Where Applicant is Resident Outside India for Tax Purposes* (Applicable if section 2 is ticked)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*

Line 2

Line 3 City/Town / Village*

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



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 updation 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 (E).
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/PfOCARD/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 'Personal Details' section

1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Direct.). 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 [PoI]' section, if PAN Card copy is not enclosed

1. If driving license number or passport is provided as proof of Identity then expiry date is to be mandatorily furnished.
2. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.
3. In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undemoted relevant code may be mentioned in point 3 (S).
4. 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.
5. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Personal Details' section

1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI 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 A'

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 91-9999999999).
2. Do not add '0' 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 [PoI] 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. 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.

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 Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Åland 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	GG	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macarona, the former Yugoslav Republic of	MK	South Africa	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	AI	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
Åruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MF	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
Belize	BZ	Ghana	GH	Morocco	MA	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	Swaziland 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-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	IO	Haiti	HT	New Zealand	NZ	Togo	TG
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Tokelau	TK
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tonga	TO
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Togo	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Turkmenistan and Tobago	TM
Cabo Verde	CV	Hungary	HU	Norfolk Island	NP	Turkey	TR
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	Pakistan	PK	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	CK	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Venezuela	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	Raunston (Raunston)	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
Curaçao (Kuraçao)	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Laos People's Democratic Republic	LA	Saint Barthélemy (Saint-Barthélemy)	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	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		

Annexure A1

Know Your Customer (KYC) Application Form | Individual | Correspondence / Local Address



1. Correspondence / Local Address Details (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details

Line 1*															
Line 2															
Line 3											City / Town / Village*				
District*	Pin / Post Code*					State / U.T Code*					ISO 3166 Country Code*				

2. Contact Details (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

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

3. 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 of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directives 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.

Date: - - Place:

Signature / Thumb Impression of Applicant

Important instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T Code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two Character ISO 3166 Country Codes is available at the end.
- G) KYC number of applicant is mandatory for Update application.
- H) For particular section Update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only <i>(To be filled by financial institution)</i>	Application Type*	<input type="checkbox"/> New	<input type="checkbox"/> Update
	KYC Number	<input type="text"/>	

(Mandatory for KYC update request)

Annexure B1

Know Your Customer (KYC) Application Form | Individual | Correspondence / Local Address



1. Details of Related Person (In case of additional related persons, please fill 'Annexure B1') (please refer instruction **G** at the end) Addition of

Addition of Related Person
 Deletion of Related Person
 KYC Number of Related Person (if available*)

Related Person Type*
 Guardian of Minor
 Assignee
 Authorized Representative

Name*
 Prefix
 First Name
 Middle Name
 Last Name

(If KYC number and name are provided, below details of section 6 are optional)

Proof of Identity [PoI] of Related Person* (Please see instruction **(H)** at the end)

A- Passport Number

 Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence

 Driving Licence Expiry Date

F- NREGA Job Card

Z- Others (any document notified by the central government)

 Identification Number

2. 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 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 of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directors 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.

Date:
 Place:

Signature / Thumb Impression of Applicant

3. Attestation / For Office Use Only

Documents Received Certified Copies

KYC Verification Carried Out by		Institution Details	
Date	<input type="text"/>	Name	<input type="text"/>
Emp. Name	<input type="text"/>	Code	<input type="text"/>
Emp. Code	<input type="text"/>		
Emp. Designation	<input type="text"/>		
Emp. Branch	<input type="text"/>		
	<input type="text"/>		

Important Instructions:

- A) Fields marked with "*" are mandatory fields.
- B) Please fill the form in English and in BLOCK letters.
- C) Please fill the date in DD-MM-YYYY format.
- D) Please read section wise detailed guidelines / instructions at the end.
- E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- F) List of two character ISO 3166 country codes is available at the end.
- G) KYC number of applicant is mandatory for update application.
- H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only
 Application Type*
 New
 Update

(To be filled by financial institution)
 KYC Number

 (Mandatory for KYC update request)



FATCA-CRS Declaration & Supplementary KYC Information

Declaration Form for Individuals

Please seek appropriate advice from your tax professional on your tax residency, related FATCA & CRS guidance

PAN / PEKRN*				
Name				
Address Type [for KYC address]	<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business	Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> US <input type="checkbox"/> Others (Please Specify)	
Place of Birth		Country of Birth		
Gross Annual Income Details in INR	<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 lacs – 1 Cr <input type="checkbox"/> > 1 Crore	Occupation Details [Please tick any one (✓)]	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Government Services <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Others [Please specify] _____	
Net Worth in INR. In Lacs & Date [Optional]	dd-mmm-yyyy			
Politically Exposed Person [PEP]	<input type="checkbox"/> Yes <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable	Any other information [if applicable]	[Please specify]	

Are you a tax resident (i.e. are you assessed for Tax) in any other country other than India? Yes No

If 'Yes', please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

S. No.	Country of Tax Residency	Tax Identification Number (TIN) or Functional Equivalent	Identification Type [TIN or other, please specify]	If TIN is not available, please tick <input type="checkbox"/> the reason A, B or C as defined below
1				➡ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
2				➡ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>

FATCA-CRS Declaration & Supplementary KYC Information

Declaration Form for Individuals – Joint Holder

Please seek appropriate advice from your tax professional on your tax residency, related FATCA & CRS guidance

PAN / PEKRN*				
Name				
Address Type [for KYC address]	<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business	Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> US <input type="checkbox"/> Others (Please Specify)	
Place of Birth		Country of Birth		
Gross Annual Income Details in INR	<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 lacs – 1 Cr <input type="checkbox"/> > 1 Crore	Occupation Details [Please tick any one (✓)]	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Government Services <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Others [Please specify] _____	
Net Worth in INR. In Lacs & Date [Optional]	dd-mmm-yyyy			
Politically Exposed Person [PEP]	<input type="checkbox"/> Yes <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable	Any other information [if applicable]	[Please specify]	

Are you a tax resident (i.e. are you assessed for Tax) in any other country other than India? Yes No

If 'Yes', please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

S. No.	Country of Tax Residency	Tax Identification Number (TIN) or Functional Equivalent	Identification Type [TIN or other, please specify]	If TIN is not available, please tick <input type="checkbox"/> the reason A, B or C as defined below
1				➡ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
2				➡ Reason A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>

Reason A ➡ The country where the Account Holder is liable to pay tax does not issue TIN to its residents.

Reason B ➡ No TIN required [Select this reason only if the authorities of the respective country of tax residence do not required the TIN to be collected]

Reason C ➡ Others – Please specify the reasons _____

Declaration:

I acknowledge and confirm that the information provided above is true and correct to the best of my knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/ am aware that I may liable for it. I hereby authorize you [CAMS/Fund/AMC] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to / any of the Mutual Fund, its Sponsor, Asset Management Company, 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 of the same. Further, I authorize to share the given information to other SEBI Registered Intermediaries/or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days and also undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities. I/We authorize Fund/AMC/RTA to provide relevant information to upstream payors to enable withholding to occur and pay out any sums from my account or close or suspend my account(s) without any obligation of advising me of the same. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions given below and hereby accept the same

Date:
Place:

Signature

=====
Acknowledgement

We [CAMS, on behalf of participating Mutual Funds] acknowledge the receipt of FATCA/CRS declaration form duly filled and signed from Mr. / Ms. / M/s. _____ PAN _____ on dd-mmm-yyyy

Date:

Signature with Name, Emp Id & Seal

FATCA & CRS Terms & Conditions

FATCA & CRS Terms & 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 require Indian financial institutions such as the Banks/other financial entities 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 (Insert FI's name) 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 green-card 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	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a President 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: <ul style="list-style-type: none"> 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	<ol style="list-style-type: none"> 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)
Telephone number in a country other than India	<p>If no Indian telephone number is provided</p> <ol style="list-style-type: none"> 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) <p>If Indian telephone number is provided along with a foreign country telephone number</p> <ol style="list-style-type: none"> 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
Telephone number in a country other than India	<ol style="list-style-type: none"> 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)

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.**