

<b>FATCA-CRS Declaration &amp; Supplementary KYC Information</b> <b>Declaration Form for Individuals</b>			
<i>Please seek appropriate advice from your professional tax professional on your tax residency and related FATCA &amp; CRS guidance</i>			
PAN			
Name			
Address Type [for KYC address]	<input type="checkbox"/> Residential <input type="checkbox"/> Business	<input type="checkbox"/> Residential / Business <input type="checkbox"/> Registered Office	
Place of Birth		Country Of Birth	
Gross Annual Income Details in INR Net Worth in INR. In Lacs [Optional] Net Worth Date [Optional]	<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 Service <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others [Please Specify] _____
	Politically Exposed Person (PEP)		<input type="checkbox"/> Yes <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable

Is your Country of Tax Residency other than India – Yes  No

If 'Yes', please specify the details of all countries where you hold tax residency and its Tax Identification Number & type

S No	Country of Tax Residency#	Tax Payer Identification Number / Functional Equivalent	Identification Type [TIN or other, please specify]
1			
2			

# to include all countries other than India, where investor is Citizen / Resident / Green Card Holder / Tax Resident in those respective countries especially of USA

**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 NBSPL 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 financial organizations or Banks 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 and also undertake to provide any other additional information as may be required or by domestic or overseas regulators/ tax authorities. I/We authorize NBSPL to close or suspend my account(s) without any obligation of advising me of the same

Date:

Signature

Place:

Note – Please use Separate Sheet For More than One Holder