

Kindly fill in BLOCK LETTERS only

Date:

D	D	M	M	Y	Y	Y	Y
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Client Code:

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Please affix
the recent passport
size photograph and
sign across it

Name of the Account holder:

[illegible]

Date of Birth Nationality ☐ Indian ☐ Other

[illegible]

Status: ☐ NRI ☐ Resident Indian

[illegible]Date of Issue

D	D	M	M	Y	Y	Y	Y
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[illegible]

Expiry Date

☐ There is no change in my mailing address

☐ I wish to change my mailing address as per the below *

[illegible]

	PIN	
--	-----	--

[illegible][illegible]

																		PIN					
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City/Village State

--	--	--	--	--	--	--	--	--	--	--	--

 Country

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☐ I wish to update my contact details as below

[illegible]

Mobile No SMS Facility ☐ Yes ☐ No

Existing Bank Details

Bank Name

 Account No

Branch Address

Account type ☐ Saving ☐ Current ☐ Others

☐ I wish to change my Bank Details as per the below*

Bank Name **Account No**

[illegible]

Account type ☐ Saving ☐ Current ☐ Others

* In case of any addition/modification of any details, proper supporting proof should be provided

4. Financial and Other Details:

1. Gross Annual Income Details (tick) Below

☐ 1 Lac ☐ 1-5 Lac ☐ 5-10 Lac ☐ 10-25 Lac ☐ Above 25 Lac

2. Occupation (Please give brief details):

☐ Private Sector ☐ Public Sector ☐ Govt. Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer
☐ Others (Please Specify)
If Self Employed (☐ CA ☐ Engg. ☐ Doctor ☐ Proprietor Partner
☐ Other)

Name of Employer/ Establishment: _____

Department: _____

Office Address: _____ PIN _____

Tel. No. (Office): _____

3. Please tick:

☐ Politically Exposed Person* ☐ Related to Politically Exposed Person

☐ Non-Politically Exposed Person.

If under PEP Category:

☐ Civil Servant Bureaucrat Current ☐ Former MP ☐ MLA ☐ MLC

☐ Current or Former Head of State ☐ Military officer

* Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

5. Additional Details:

Whether you wish to receive: ☐ Electronic Contract Note (ECN) ☐ Physical Contract Note

Specify your Email id for ECN, if applicable: _____

Whether you wish to avail of the facility of Internet trading / Wireless technology: ☐ Yes ☐ No

Declaration

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we 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/We am/we are aware that I/we may be held liable for it.

Signature



Documents Submitted :(FOR OFFICE USE ONLY)

Identity proof	
Address proof	
Bank Proof	
Indian Passport, Visa (NRI Client)	

Originals verified

Employee Name	Employee ID	Designation	Signature

FATCA DECLARATION

Annexure to Account opening Form for Individuals containing information for reporting requirement under Section 285BA of the Income-tax Act, 1961 and KYC.

Background:

- India has joined the Multilateral Competent Authority Agreement (MCAA) on Automatic Exchange of Financial Account Information (AEOI) on June 3, 2015 and has agreed to certain global standards on automatic exchange of information, known as Common Reporting Standards (CRS). Further, the Government of India (GoI) signed an Inter-Governmental Agreement (IGA) with United States of America (USA) on July 9, 2015 to improve international tax compliance and to implement Foreign Account Tax Compliance Act (FATCA) in India.
- To implement the CRS on AEOI and also the IGA with USA, the GoI has made necessary amendments in Section 285BA of the Income-tax Act, 1961 and notified Rules 114F to 114H in the Income-tax Rules, 1962 vide amendment dated August 7, 2015. These Rules are available on: <http://www.incometaxindia.gov.in>.
- SEBI has issued a circular dated August 26, 2015 advising all registered intermediaries to implement FATCA and CRS as per above mentioned Rules. We do understand that the information mentioned above is technical in nature and hence we advise you to consult your financial or tax advisor for more details.

Applicant's Name:

Form No: **Father's name :**

PAN: **Place of Birth :** **Country of Birth :**

Gender : ☐ Male ☐ Female ☐ Others **Nationality :** ☐ Indian ☐ Other (Specify the name)

Occupation Type: ☐ Service ☐ Business ☐ Others ☐ Not Categorized

Address Type : ☐ Residential ☐ Business
☐ Registered Office ☐ Unspecified

Complete Address :

Country : **Postal Code:**

1. Declaration of Tax Residency / Citizenship Country of tax residence India ☐ Yes ☐ No.

2. Tax resident of Multiple Countries ☐ Yes ☐ No

If tax resident of multiple countries, kindly provide information of tax residence of all countries.

If Point 1 is Yes and Point 2 is No, no further information required to be provided.

If Point 1 is No OR if both Point 1 and 2 are Yes, then the following should be provided along with with documentary evidence:

Country/countries of tax residency	Tax Identification Number (TIN)/ functional equivalent number	TIN / functional equivalent Issuing Country	Documents provided (copy of certificate of tax residence or copy of TIN or others)	Date upto which the documentary evidence is valid
Remarks if any :				

Declaration and Undertakings

The Customer/account holder certifies that:

- a. The information provided in the Form is in accordance with Section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income-tax Rules, 1962.
- b. the information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- c. I/We permit/authorise the Company to collect, store, communicate and process information relating to the Account and all transactions therein, by the Company and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- d. I / We undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by us or if any certification becomes incorrect and to provide fresh self certification alongwith documentary evidence.
- e. I / We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and the Company would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /Reserve Bank of India for the purpose or take any other action as may be deemed appropriate by the Company if the deficiency is not remedied by us within the stipulated period.
- f. I / We hereby accept and acknowledge that the Company shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me / us to the Company.
- g. It shall be my responsibility / our responsibilities to educate myself / ourselves and to comply at all times with all relevant laws relating to reporting under Section 285BA of the Act read with the Rules thereunder.
- h. I/We also agree to furnish such information and/or documents as the Company may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- I. I/We shall indemnify the Company for any loss that may arise to the Company on account of providing incorrect or incomplete information.

Date: _____

Place: _____



Client Signature