

Account Opening Form

To be filled by the applicant
Fields marked with * are mandatory

A/c Opening Date

Appl. Regn. No. (Workflow)

A/c No.

Cust. ID

Type of Applicant: <input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non-Resident Individual (NRI/PIO/OCI/Foreign Nationals/Mariners)	<input type="checkbox"/> Sole Proprietor
Type of Account: <input type="checkbox"/> Savings <input type="checkbox"/> RFC SB/TD/CA	<input type="checkbox"/> NRE SB <input type="checkbox"/> NRO SB <input type="checkbox"/> PIS <input type="checkbox"/> SNRR	Date of becoming Non-Resident <input type="text" value="DDMMYYYY"/>
<input type="checkbox"/> FD <input type="checkbox"/> RD <input type="checkbox"/> HUF	<input type="checkbox"/> NRE FD/RD <input type="checkbox"/> NRO FD/RD <input type="checkbox"/> FCNR <input type="checkbox"/> HUF	

Primary Applicant Details

Cust. ID (in case of existing customer) ☐ I confirm that I do not have any existing Customer ID/Customer IDs apart from the one mentioned. In case found otherwise, Bank reserves the right to consolidate the Customer IDs as it may decide, without any prior notice to me.

Name (Same as ID proof)*

Father's Name*

Mother's Name*

Nationality Citizenship

Local/Overseas Address (for non-resident indians only) City

State Country PIN

Landmark

☐ All communications to be sent on this address (Address Proof Mandatory) Please mention a prominent landmark to ensure that the deliverables reach you.

Permanent Address

City

State Country PIN

Landmark

Please mention a prominent landmark to ensure that the deliverables reach you.

☐ Same as above ☐ All communications to be sent on this address (Address Proof Mandatory)

Date of Birth Marital Status: ☐ Married ☐ Single ☐ Other Gender: ☐ Male ☐ Female ☐ Trans Gender

Driving Licence No. PAN Or ☐ Form 60

PIO/OCI Card Holder ☐ Y ☐ N PIO/OCI Card No. Aadhaar ☐ Y ☐ N (if Yes, attach photocopy)

Passport No. Date of Issue Date of Expiry

Place of Issue Country of Residence

VISA Ref. No. Date of Issue Date of Expiry

Place of Issue Type of VISA

Tel. (Res.)* Tel. (O)* Ext.

E-mail ID*

Mobile* (Country Code) (Number) Insta Alert ☐ CKYC No. Please tick (✓) if E-mail ID not available ☐

IMP: All SMS alerts (if any) will be sent on the above mentioned Mobile Number. Furnish your correct E-mail ID. All e-mail alerts (One Time Password) and free monthly account statements will be sent on this e-mail address.

Know Your Customer (KYC) Document Submitted

Identity Proof Expiry Date (only for ID Proof, if applicable)

Address Proof

Primary Applicant Profile Details

Occupation ☐ Salaried ☐ Self-employed ☐ Retired ☐ Politician ☐ Student ☐ Home Maker ☐ Others _____

If Salaried, Employed with ☐ Proprietorship ☐ Partnership ☐ Pvt. Ltd. ☐ Pub. Ltd. ☐ Govt. ☐ Others _____

If Self-Employed since Years Months ☐ Turnover _____

If Self Employed Professional ☐ Doctor ☐ CA/CS ☐ Lawyer ☐ Architect ☐ IT Consultant ☐ Others _____

Source of Funds ☐ Salary ☐ Business ☐ Investment ☐ Inheritance ☐ Pension ☐ Rent ☐ Agriculture ☐ Others _____

Gross Annual Income ☐ < 1 lac ☐ 1-3 lac ☐ 3-5 lac ☐ 5-7.5 lac ☐ 7.5-10 lac ☐ 10-15 lac ☐ 15-25 lac ☐ 25-50 lac ☐ 50 lac-1 cr ☐ >1 cr

Net Worth

Education Qualification ☐ Under Graduate ☐ Graduate ☐ Post Graduate ☐ Professional

Residential Type ☐ Owned ☐ Rented/Leased ☐ Ancestral/Family ☐ Company Provided

Religion/Caste / (not mandatory)

Customer Type ☐ Resident Indian/Non-Resident Indian ☐ Senior Citizen ☐ Minor ☐ Others _____

Consent & Additional Declarations (Resident Individual, Non Resident Individual)

Aadhaar Consent

1) I intend to open _____ account/s with your Bank. As part of the account opening process and KYC documents, I submit my Aadhaar number and voluntarily give my consent to: Use my Aadhaar Details to authenticate me from UIDAI • Use my Mobile Number mentioned below for sending SMS Alerts to me • Link the Aadhaar number to all my existing/new/future accounts and customer profile (CIF) with your bank • We are submitting Aadhaar number as part of KYC but not authenticating with UIDAI and necessary KYC documents are submitted by me. 2) I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the Bank herewith shall not be used for any purpose other than mentioned above, or as per requirement of law. 3) I hereby declare that all the above information voluntarily furnished by me is true, correct, and complete.

CKYC Consent

I hereby authorize you to retrieve the KYC records online from the CKYCR using the KYC Identifier and the customer shall not be required to submit the same KYC records or information or any other additional identification documents or details, unless – i. there is a change in the information of the customer as existing in the records of CKYCR; ii. the current address of the customer is required to be verified; iii. the RE considers it necessary in order to verify the identity or address of the customer, or to perform enhanced due diligence or to build an appropriate risk profile of the client.

PEP Consent

Are you a Politically Exposed Person ☐ Yes ☐ No (If Yes, please provide details _____)

Signature(s)/Thumb impression(s) of Applicant

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Declaration

I/We have read and understood the terms, conditions, rules and regulations of the product(s)/service(s) opted for from SBM Bank (India) Limited ("Bank") including the 'Terms of Service' document displayed on the Bank's website www.sbmbank.co.in and I/We accept and agree to abide by the same. The Bank is entitled to amend the 'Terms of Service' document displayed on their website from time to time and the same shall be binding on me/us. I/We declare, confirm and agree that all particulars and information given in this application form (and all documents referred or provided therewith) are true, correct, accurate, complete and up-to-date in all respects and no relevant information has been withheld/suppressed. I/We undertake to provide all updated KYC documents or such other information that the Bank may require from time to time including any change in my/our occupation/postal address and I/We authorise the Bank to conduct such credit checks, references and make enquiries in respect of the application as it may consider necessary in its sole discretion and also authorise the Bank, without any notice to me/us, to share or disclose or exchange or part with all the information, data or documents including any sensitive personal data relating to me/us or my/our application, to other banks/financial institutions/credit bureaus/agencies/statutory bodies/enforcement agencies/such other persons including Bank's affiliates, service providers, counter parties, regulators, authorities as the Bank may deem necessary or appropriate including for use or processing of the said information/data/products by such person(s) or furnishing of the processed information/data/products thereof to other banks/financial institutions/credit providers/users registered/ sister concerns/ its associated group companies/agents/advisers or with such other persons as the Bank deems fit and that I/We shall not hold any person liable for use of this information. I/We hereby give my consent to the Bank to carry out my/our Aadhaar EKYC authentication and to fetch EKYC data from Aadhaar data base. I/We agree to indemnify and keep the Bank indemnified and harmless from and against all and any fraud, loss, costs, demands, claims, damages, expenses (including attorney fees), litigations, proceedings, suits etc. which the Bank may have to suffer, incur or face due to my/our providing any incorrect or incomplete information or failure to communicate any change in such particulars/information or provide true, correct and updated documents. I/We agree and understand that the Bank reserves the right to reject any application without providing any reason. I/We agree and understand that the Bank reserves the right to retain the application forms, and the documents and information provided therewith, including photographs and will not return the same to me/us. I/We authorise the Bank to use my/our contact number mentioned in the form for transactional/promotional/service calls/telemarketing calls/messages by itself or through any appointed agency. I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on our registered number/E-mail address. I/We hereby provide our consent to SBM to obtain the Applicant(s) information from Credit Information Company and/or information utility and/or such institution set up under the provisions of law from time to time as and when required.

I/We confirm that I/We have read and understood the above Declaration, and that the details provided on the form are correct.

I/We also confirm that my/our account has been opened by Bank Officer Mr./Ms. _____ and I/We have signed in his/her presence.

Note: Do not sign this form if it is BLANK, please ensure all relevant sections and columns are completely filled to your satisfaction and then only sign the form.

Name :

Please paste latest
Passport Size photo of the
1st Applicant.

Photo to be signed across

1st Applicant Signature

Date : _____

Name :

Please paste latest
Passport Size photo of the
2nd Applicant.

Photo to be signed across

2nd Applicant Signature

Date : _____

Name :

Please paste latest
Passport Size photo of the
3rd Applicant.

Photo to be signed across

3rd Applicant Signature

Date : _____

Name :

Please paste latest
Passport Size photo of the
4th Applicant.

Photo to be signed across

4th Applicant Signature

Date : _____

Nomination (DA1)/Change of Nomination

☐ **Yes, I/We wish to nominate (as per details below)** ☐ **No, I/We declare that I/We do not wish to make a nomination in my/our account.**

Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank deposits. I/We nominate the following person to whom in the event of my/our/minor's death, the amount of the above opened Account/Fixed Deposits/Recurring Deposits, may be returned by SBM Bank by the account opening branch. This Nomination will be applicable for Savings/Current/Fixed Deposit/Recurring Deposit/KGCSB & CA/SSA.

☐ Please tick if mailing address is same as of the applicant.

Nominee Name*

Nominee Address

DOB of Nominee*

*Relationship with Depositor, if any

As the nominee is a minor on this date, I/We appoint Shri/Smt./Kum. _____

(name, address and age) to receive the amount of deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Date:

Place:

Signature(s)/Thumb impression(s) of 1st Applicant

Signature(s)/Thumb impression(s) of 2nd Applicant

Signature(s)/Thumb impression of 1 witness

Signature(s)/Thumb impression(s) of 3rd Applicant

Signature(s)/Thumb impression(s) of 4th Applicant

Signature(s)/Thumb impression of 2 witness

For Bank use only

CASA A/c	Product Code	Account Number	Promo Code
Reimbursement A/c/KGC CA			
FD/RD/PPF/SSA			

1 st Applicant	Customer ID	Customer Category	ID Proof	Add Proof	Photo	No cheque book to be issued for 2 nd , 3 rd and 4 th applicant	CPV Initiated	Branch codes
2 nd Applicant								Servicing
3 rd Applicant								Sourcing
4 th Applicant								Sourcing

Program to be raised to

Service ID/Emp. Code (For Defence Account Only) Company Code LC Code LG Code MIS Code

Value Date Funds Parked A/c No. UDIN

UDF 1 UDF 2

CUSTOMER SIGNED IN MY PRESENCE	Emp Name	Signature
	Emp Code	

Declaration by the Branch: I hereby certify that this account opening form is complete in all respect and relevant documents have been obtained as per the KYC guidelines of the Bank and RBI (as amended from time to time) and performed due diligence to verify the genuineness of the customer. The account may please be set up in Finacle.

LC Signature & Date

BM Signature & Date

Mariner's Declaration

I hereby declare and confirm that I am a Non-Resident Indian and I am presently on contract with a foreign registered company, details of which are provided in the documents submitted. I also confirm that I will inform the Bank, in case I do not renew my contract or choose to go on a new contract or I am unable to proceed on a new contractor in any case in the event that my status of Non-Resident Indian is altered. Accordingly, I will have the Non-Resident accounts opened in my name re-designated to Resident/RFC accounts (as applicable).

Signature

PIO/OCI

I/We hereby declare that I/We am/are a person of Indian Origin/and I/We satisfy one of the following conditions. (Please pick the choice applicable to you):

- ☐ I/WE was/were a holder of an Indian Passport in the past.
- ☐ My/Our father/mother/grandfather/grandmother (name) is/was a citizen of India by virtue of the Constitution of India or the Citizenship Act, 1955 (57 of 1955)
- ☐ I am the spouse of an Indian Citizen/Person of Indian Origin
- ☐ The father/mother/grandfather/grandmother (name) of my spouse is/was a citizen of India by virtue of the Constitution of India or the Citizenship Act, 1955 (57 of 1955)

Signature

Signature Mismatch

In case of major mismatch, customer needs to submit affidavit

The signature on the Passport/Existing Account is different from my signature on the Account Opening Form. Please consider the signature on the Account Opening Form as my updated signature in your Bank records.

I am Providing:

- ☐ Government Issued Photo ID Proof carrying my Current Signature
- ☐ A Self-signed personalised Cheque from my existing NRE/NRO Account
- ☐ Notarised Affidavit Confirming the Current Signature

Old signature as per documents/Existing Customer ID

New signature as per account opening form

I agree to indemnify and keep indemnified the Bank at all times from and against all costs, charges, damages, penalties (including attorney fees) suffered and/or incurred by for any act done or omitted to be done on account of the above declaration.

Form No. 60 and 61 (to be filled by those who do not have Income Tax PAN)**Form 60** (See second proviso to rule 114B)

Form of declaration to be filled by a person who does not have a Permanent Account Number and who enters into any transaction specified in rule 114B:

- Full name and address of the declarant
- Particulars of transaction
- Amount of the transaction
- Are you assessed to tax? ☐ Yes ☐ No
- If yes, (I) Details of Ward/Circle/Range where the last return of income was filed (u) Reasons for not having Permanent Account Number:
- Details of the document being produced in support of address in column (1)

I hereby declare that what is stated above is true to the best of my knowledge and belief

Place:

Date:

Signature of declarant

Form 61 (See proviso to clause (a) of rule 114C(1))

Form of declaration to be filled by a person who has agricultural income and is not in receipt of any other income chargeable to income-tax in respect of transactions specified in rule 114B:

- Full name and address of the declarant
- Particulars of transaction
- Details of the document being produced in support of address in column (1)

I hereby declare that my source of income is only from agriculture and I am not required to pay Income-tax on my agricultural income.

Place:

Date:

Signature of declarant

- The attention of the customer is invited to the "Savings Bank Account" Rules as applicable.
- Customer is expected to adhere to and subscribe uniform signature as per the specimen signature recorded with the bank, while operating the account or addressing any correspondence to the bank.
- Customer should mention distinctive account number in each transaction with the bank.
- The customer must provide Permanent Account Number (PAN) which is mandatory as per the Income Tax Act from the person(s) opening the account.
- Fresh proof of identity/address has to be furnished to the bank whenever called for.
- The account holder is required to maintain a certain minimum balance in the account, as specified by the bank from time to time depending on classification of account. Non-maintenance of this would attract charges.
- Details with regard to minimum balance to be maintained and the penalty to be levied for non-maintenance are available in the bank's branch notice board and on the bank's website www.sbmbank.co.in
- Interest rates are subject to change from time to time.
- Cheque, Dividend warrants, etc. drawn in the name of account holder(s) will only be collected through this account. Instruments endorsed in favour of the account holder(s) will not be collected through Savings Bank Account.
- Customer should not route his/her Business transactions through Savings Bank Account. If routed, the bank reserves the right to take requisite action. The bank has the right to close any undesirable/un-remunerative account after giving due notice.
- Customer should keep the cheque book in a safe place to avoid any misuse.
- The Customer cannot have any other Savings Bank Account, If he/she has a Basic Savings Bank Deposit Account (BSBDA). If the customer is holding a regular Savings Bank Account, the same needs to be closed within 30 days of opening a Basic Savings Bank Deposit Account.
- Detailed rules are available on the bank's Website www.sbmbank.co.in. The bank reserves the right to amend rules and service charges, which will be available in the bank's branch notice board and on the bank's website www.sbmbank.co.in

In the event of the death of the depositor, premature termination of term deposits would be allowed to the joint account holder, nominee, legal heir(s) on production of the relevant documents. Such premature withdrawal would not attract any penal charge.

Resident Individual: Photograph (latest), PAN Card or Form 60, Identity Proof (PAN Card, Driving Licence, Passport, Voter's ID Card, others _____), Address proof

HUF: HUF Letter, KYC of Karta and all Coparcener in the account

NRI: Photocopy of valid Passport (featuring Name, Date of Birth, Date & Place of issue, Expiry Date, Photograph & Signature), Passport size Colour Photo, Valid Visa and Work Permit/Contract Letter

PIO/OCI: Photocopy of Current Passport (featuring Name, Date of Birth, Date & Place of Issue, Expiry Date, Photograph & Signature), Copy of PIO or OCI Card. In absence of PIO/OCI Card, the applicant will have to prove that he is a person of Indian Origin and was not a citizen of Pakistan or Bangladesh and the applicant was a citizen of India by virtue of the Constitution of India or the Citizenship Act, 1955 (57 of 1955); or The applicant belonged to a territory that became part of India after the 15th day of August, 1947; or The applicant is a child or a grandchild or a great grandchild of a citizen of India or The applicant is a spouse of foreign origin of a citizen of India or spouse of foreign origin of a person referred in the above clauses.

Acceptable Documents for Indian Address Proof: Valid Passport, Driving Licence issued by Regional Transport Authority, Voter ID Card, Job Card issued by NREGA duly signed by an officer of the State, Electricity Bill/Telephone Bill (not more than 3 months old), Government ID Card, Aadhaar Card.

Acceptable Documents for Overseas Address Proof: Address on the Passport, Utility bill (not older than 3 months) i.e. Electricity, Gas, Water, Land line Telephone bill, Overseas/Indian Bank Statement, Rent receipt along with duly stamped/registered lease deed, Letter from Existing banker (account should be minimum 3 months old), Visa/Resident permit/Work permit, Driving Licence, PIO/OCI Card, Letter from Government postal authorities, National ID Card.

Date:

D	D	M	M	Y	Y	Y	Y
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☐ 1. We acknowledge receipt of Nomination made by you in favour of (Name of Nominee)
 _____ Age

--	--

 years
 With respect to your account number

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☐ 2. No Nominee is registered for the account, since nomination facility is not availed by the account holder.

[illegible]

Cust. ID (in case of existing customer)										<input type="checkbox"/> I confirm that I do not have any existing Customer ID/Customer IDs apart from the one mentioned. In case found otherwise, Bank reserves the right to consolidate the Customer IDs as it may decide, without any prior notice to me.									
Name (Same as ID proof)*										F i r s t N a m e M i d d l e N a m e L a s t N a m e									
Father's Name*										F i r s t N a m e M i d d l e N a m e L a s t N a m e									
Mother's Name*										F i r s t N a m e M i d d l e N a m e L a s t N a m e									
Nationality										Citizenship									

Local/Overseas Address (for non-resident Indians only)																															
																City															
State											Country											PIN									
Landmark																															
<input type="checkbox"/>	All communications to be sent on this address (Address Proof Mandatory)															Please mention a prominent landmark to ensure that the deliverables reach you															

Permanent Address

State

Landmark

Please mention a prominent landmark to ensure that the deliverables reach you.

☐ Same as above
 ☐ All communications to be sent on this address (Address Proof Mandatory)

[illegible][illegible]

TMP: All SMS alerts (if any) will be sent on the above mentioned Mobile Number. Furnish your correct E-mail ID. All e-mail alerts (One Time Password) and free monthly account statements will be sent on this e-mail address.

Identity Proof	<div></div>	Expiry Date (only for ID Proof, if applicable)	<div></div>
Address Proof	<div></div>		

Occupation	<input type="checkbox"/> Salaried	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Retired	<input type="checkbox"/> Politician	<input type="checkbox"/> Student	<input type="checkbox"/> Home Maker	<input type="checkbox"/> Others _____			
If Salaried, Employed with	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Pvt. Ltd.	<input type="checkbox"/> Pub. Ltd.	<input type="checkbox"/> Govt.	<input type="checkbox"/> Others _____				
If Self-Employed since	<input type="text"/> Years	<input type="text"/> Months	<input type="checkbox"/> Turnover _____							
If Self Employed Professional	<input type="checkbox"/> Doctor	<input type="checkbox"/> CA/CS	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Architect	<input type="checkbox"/> IT Consultant	<input type="checkbox"/> Others _____				
Source of Funds	<input type="checkbox"/> Salary	<input type="checkbox"/> Business	<input type="checkbox"/> Investment	<input type="checkbox"/> Inheritance	<input type="checkbox"/> Pension	<input type="checkbox"/> Rent	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Others _____		
Gross Annual Income	<input type="checkbox"/> < 1 lac	<input type="checkbox"/> 1-3 lac	<input type="checkbox"/> 3-5 lac	<input type="checkbox"/> 5-7.5 lac	<input type="checkbox"/> 7.5-10 lac	<input type="checkbox"/> 10-15 lac	<input type="checkbox"/> 15-25 lac	<input type="checkbox"/> 25-50 lac	<input type="checkbox"/> 50 lac-1 cr	<input type="checkbox"/> >1 cr
Net Worth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Education Qualification	<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Post Graduate	<input type="checkbox"/> Professional						
Residential Type	<input type="checkbox"/> Owned	<input type="checkbox"/> Rented/Leased	<input type="checkbox"/> Ancestral/Family	<input type="checkbox"/> Company Provided						
Religion/Caste	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Customer Type	<input type="checkbox"/> Resident Indian/Non-Resident Indian	<input type="checkbox"/> Senior Citizen	<input type="checkbox"/> Minor	<input type="checkbox"/> Others _____						

Consent & Additional Declarations (Resident Individual, Non Resident Individual)

Aadhaar Consent

1) I intend to open _____ account/s with your Bank. As part of the account opening process and KYC documents, I submit my Aadhaar number and voluntarily give my consent to: Use my Aadhaar Details to authenticate me from UIDAI • Use my Mobile Number mentioned below for sending SMS Alerts to me • Link the Aadhaar number to all my existing/new/future accounts and customer profile (CIF) with your bank • We are submitting Aadhaar number as part of KYC but not authenticating with UIDAI and necessary KYC documents are submitted by me. 2) I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the Bank herewith shall not be used for any purpose other than mentioned above, or as per requirement of law. 3) I hereby declare that all the above information voluntarily furnished by me is true, correct, and complete.

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I hereby authorize you to retrieve the KYC records online from the CKYCR using the KYC Identifier and the customer shall not be required to submit the same KYC records or information or any other additional identification documents or details, unless – i. there is a change in the information of the customer as existing in the records of CKYCR; ii. the current address of the customer is required to be verified; iii. the RE considers it necessary in order to verify the identity or address of the customer, or to perform enhanced due diligence or to build an appropriate risk profile of the client.

PEP Consent

Are you a Politically Exposed Person ☐ Yes ☐ No (If Yes, please provide details _____)

Place: _____

Date: _____

Signature(s)/Thumb impression(s) of Applicant

FATCA - CRS Declaration Please tick the 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 in the table below:

Please indicate the country(ies) in which the entity is a resident for tax purposes and the associated Tax ID Number below:

City of Birth* Country of Birth Address Type for Tax Purpose: ☐ Residential ☐ Business ☐ Registered Office

Country*	Tax Identification Number ⁵	Identification Type (TIN or Other, please specify) ⁵	Address for Tax Purpose* <input type="checkbox"/> Communication Address <input type="checkbox"/> Permanent Address <input type="checkbox"/> Please note the address below
			Landmark
			PIN: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State _____ Country _____

⁵To also include USA, where the individual is a citizen/green card holder of USA⁵ In case Tax Identification Number is not available, kindly provide functional equivalent ⁵FATCA - CRS Certification: I have understood the information requirements of this Form (read along with the FATCA - CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete and hereby accept the same.

Place: _____

Date: _____

Signature(s)/Thumb impression(s) of Applicant