

## Stock Holding Corporation of India Limited

Regd. Office: 301, Centre Point, Dr. Babasaheb Ambedkar Road, Parel, Mumbai - 400 012.  
 Phone: 91-22-6177 9400 to 09 Fax: 91-22-6177 9058 Website: www.shcil.com CIN: 67190MH1986GOI040506

### CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Individual

#### Important Instructions:

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

<b>For office use only</b> (To be filled by financial institution)	Application Type*	<input type="checkbox"/> New	<input type="checkbox"/> Update
	KYC Number	<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"/> <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"/> <input type="text"/>	
	Account Type*	Normal	<input type="checkbox"/> Minor <input type="checkbox"/> Aadhaar OTP based E-KYC (in non-face to face mode)

#### KYC Mode\* : Please Tick (✓)

- Normal  EKYC OTP  EKYC Biometric  Online KYC  Offline KYC  Digilocker

#### 1. PERSONAL DETAILS\* (Please refer instruction A at the end)

PAN\*   Form 60 furnished

Prefix	First Name	Middle Name	Last Name
<input type="checkbox"/> Name* (Same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/> DD / MM / YYYY		
Gender*	<input type="checkbox"/> M- Male	<input type="checkbox"/> F- Female	<input type="checkbox"/> T-Transgender
Nationality*	<input type="checkbox"/> Indian	<input type="checkbox"/> Others (Please specify) <input type="text"/>	
Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non Resident Indian	<input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin
<small>(Passport mandatory for NRIs, PIOs and Foreign Nationals)</small>			
Marital Status*	<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried	<input type="checkbox"/> Others (Please specify) <input type="text"/>

#### 2. PROOF OF IDENTITY AND PERMANENT ADDRESS\* (Please refer instruction B at the end)

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- A- Passport Number
  - B- Voter ID Card
  - C- Driving Licence
  - D- NREGA Job Card
  - E- National Population Register Letter
  - F- Proof of Possession of Aadhaar
- II  E- KYC Authentication
- III  Offline verification of Aadhaar



#### Address

Line 1\*

Line 2

Line 3

District\*  Pin/Post Code\*  State/U.T Code\*  City / Town / Village\*  ISO 3166 Country Code\*

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

**3. CURRENT / CORRESPONDENCE ADDRESS DETAILS** (Please refer instruction B at the end)

Same as above mentioned address (In such cases address details as below need not be provided)

I. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- A- Passport Number \_\_\_\_\_
- B- Voter ID Card \_\_\_\_\_
- C- Driving Licence \_\_\_\_\_
- D- NREGA Job Card \_\_\_\_\_
- E- National Population Register Letter \_\_\_\_\_

F- Proof of Possession of Aadhaar           \_\_\_\_\_

II  E- KYC Authentication           \_\_\_\_\_

III  Offline verification of Aadhaar           \_\_\_\_\_

IV  Deemed Proof of Address - Document Type code \_\_\_\_\_

V  Self Declaration

**Address**

Line 1\* \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 3 \_\_\_\_\_

District\* \_\_\_\_\_ Pin/Post Code\* \_\_\_\_\_ City / Town / Village\* \_\_\_\_\_ State/U.T Code\* \_\_\_\_\_ ISO 3166 Country Code\* \_\_\_\_\_

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

**4. CONTACT DETAILS** (All communications will be sent to Mobile number/ Email-ID provided) (Please refer instruction C at the end)

Tel. (Off) \_\_\_\_\_ Tel. (Res) \_\_\_\_\_ Mobile \_\_\_\_\_

Email ID \_\_\_\_\_

**5. REMARKS (if any)**

**6. APPLICANT DECLARATION**

- "I/We hereby declare that the KYC details furnished by me 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 am/We are aware that I/We may be held liable for it.
- I/We hereby consent to receiving information from KRA & CKYCR through SMS / Email on the above registered number / Email address.
- I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.
- I/We accord my/our voluntary consent for sharing/fetching/verifying my/our records maintained in Central KYC Registry and KYC Registration Agency.

(Signature / Thumb Impression)

Date :    -    -

Place:

Signature / Thumb Impression of Applicant

**7. ATTESTATION / FOR OFFICE USE ONLY**

Documents Received  Certified Copies  E-KYC data received from UIDAI  Data received from Offline verification  Digital KYC Process  
 Equivalent e-document  Video Based KYC

**IPV DONE / KYC VERIFICATION CARRIED OUT BY**

Date    -    -

Emp. Name \_\_\_\_\_

Emp. Code \_\_\_\_\_

Emp. Designation \_\_\_\_\_

Emp. Branch \_\_\_\_\_

**INSTITUTION DETAILS**

Name \_\_\_\_\_

Code \_\_\_\_\_

(Employee Signature)

(Institution Stamp)

**A Clarification / Guidelines on filling 'Personal Details' section**

- 1 Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 One the following is mandatory : Mother's name, Spouse's name, Father's name.

**B Clarification / Guidelines on filling 'Current Address details' section**

- 1 In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
- 2 PoA to be submitted only if the submitted Pol does not have current address or address as per Pol is invalid or not in force.
- 3 State / U.T. Code and Pin / Post Code will not be mandatory for Overseas addresses
- 4 In Section 2, one of I, II and III is to be selected. In case of online E-KYC authentication, II is to be selected.
- 5 In Section 3, on of I, II, III and IV is to be selected. In case of online E-KYC authentication, II isto be selected.
- 6 List of documents for 'Deemed Proof of Address':

**Document Code Description**

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, pipe gas, water bill)
02	Property or Municipal tax receipt.
03	Pension or family pension payment orders (PPOs) issued or retired employees by Government Department or Public Sector Undertakings, if they contain the address.
04	Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector Undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.

- 7 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8 "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Provide Digital Locker Facilities) Rules, 2016.
- 9 "Digital KYC process" has to be carried out as stipulated in the PML Rules, 2005.

**C Clarification / Guidelines on filling 'Contract 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.

**D Clarification / Guidelines on filling 'Related Person details' section**

- 1 Provide KYC number of related person, if available.

**E Clarification on Minor**

- 1 Guardian details are optional for minors above 10 years of age for opening of Bank account only.
- 2 However, in case guardian details are available for minor above 10 years of age, the same (or CKYCR number of guardian) is to be uploaded.

**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
Aland 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	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	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
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	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
Belarus	BY	Ghana	GH	Monaco	MC	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	Svalbard 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	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
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	Palau	PW	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	CX	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	Vanuatu	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	Reunion !Réunion	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
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !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		

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## FATCA/CRS Declaration for Individual

(Each account holder has to submit separate FATCA/CRS Declaration)

### Section I

DP ID		Client ID(s)	
Name of the Client			
Father Name / Spouse Name			
Occupation Type	Service <input type="checkbox"/>	Business	<input type="checkbox"/>
Occupation details (Short Description)			
PAN			

Are you a Tax Resident (i.e. your Citizen/ Resident/ Green Cardholder /Tax Resident in a country and accessed for Tax) in any country other than India?	Yes* <input type="checkbox"/>	No <input type="checkbox"/>
Are you US Person (Yes means FATCA applicable. No means CRS applicable)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

### Section II

(Only applicable when Client select "Yes" \* for Tax Residence details other than India)

Correspondence Address		Permanent address	
City/Town		City/Town	
State code		State code	
Postal Code		Postal Code	
Country Code		Country code	
Citizenship/Nationality		Date of Birth	
Country for Tax Resident		Country for Tax Resident	
Country of Birth		Place of Birth	
TAX Identification Number (TIN) or Equivalent			
TIN is not available	(A) <input type="checkbox"/> (B) <input type="checkbox"/> (C) <input type="checkbox"/>	The Country where the account holder is liable to pay tax does not issue TIN to its residents. No TIN required (Select the reason only if the authorities of the respective country of tax residence does not require TIN to be collected) Encircle relevant option - 1 Student / 2 Home-maker/ 3 House-Wife/ 4 Retired / 5 Diplomat/ 6 Other reason (Please Specify) _____	

### Section III

#### (Undertaking & consent)

I understand that SHCIL is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. SHCIL is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions. I also undertake to keep SHCIL 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 agree that as may be required by domestic regulators/tax authorities the SHCIL may also be required to report, reportable details to CBDT or close or suspend my account. I certify that I/we provide the information on this form and to the best of my knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions given below and hereby accept the same.

I hereby agree to share / update my FATCA/CRS self-declaration with other products of StockHolding linked with my aforesaid PAN. (Please strike off, if not required)

\_\_\_\_\_  
Client Signature

Notes:

A. Following supporting documents required alongwith aforesaid declaration:

1. Self attested PAN (Mandatory) documents requited alongwith self-certification
2. Self attested copy of TIN Card or Equivalent only if Client is US person or Tax Resident in any country other than India
3. Self attested copy of Passport / Driving License / Election Card / UIDAI / NEREGA Card / Govt. Issued ID Card only when Client is not US person or Tax Resident in India
4. Self attested copy of document related to Relinquishment of Citizen only in case Client is US Person but not Citizen of US
5. Any other relevant documents in support of details mentioned in FATCA/CRS self-certification

#### 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"> <li>1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;</li> <li>2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND</li> <li>3. Any one of the following documents:  <ul style="list-style-type: none"> <li>Certified Copy of "Certificate of Loss of Nationality <i>or</i></li> <li>Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; <i>or</i></li> <li>Reason the customer did not obtain U.S. citizenship at birth</li> </ul> </li> </ol>
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> <li>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</li> <li>2. Documentary evidence (refer list below)</li> </ol>
Telephone number in a country other than India	<p><i>If no Indian telephone number is provided</i></p> <ol style="list-style-type: none"> <li>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</li> <li>2. Documentary evidence (refer list below)</li> </ol> <p><i>If Indian telephone number is provided along with a foreign country telephone number</i></p> <ol style="list-style-type: none"> <li>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;</li> </ol>