



# CKYC & KRA KYC Form



**BNP PARIBAS  
MUTUAL FUND**

South Gujarat ARN: 54854

## Know Your Client

### Application Form (For Individuals only)

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

Fields marked with '\*' are mandatory fields

Application ☐ New

Type\*

☐ Update

KYC Number\*

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KYC Type\*

☐ Normal (PAN is mandatory)

☐ PAN Exempt Investors (Refer instruction K)

### 1. Identity 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)	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Maiden Name (If any*)	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Father / Spouse Name*	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Mother Name*	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Date of Birth*	<table border="1"><tr><td>D</td><td>D</td></tr></table> - <table border="1"><tr><td>M</td><td>M</td></tr></table> - <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y																																																									
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Gender*	<input type="checkbox"/> M- Male <input type="checkbox"/> F- Female <input type="checkbox"/> T-Transgender																																																																	
Marital Status*	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Others																																																																	
Citizenship*	<input type="checkbox"/> IN- Indian <input type="checkbox"/> Others - Country <table border="1"><tr><td></td><td></td></tr></table> Country Code <table border="1"><tr><td></td><td></td></tr></table>																																																																	
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																																																																	
Occupation Type*	<input type="checkbox"/> S-Service <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Sector <input type="checkbox"/> O-Others <input type="checkbox"/> Professional <input type="checkbox"/> Self Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> B-Business <input type="checkbox"/> X-Not Categorized																																																																	

Photo



Signature/  
Thumb Impression

### 2. Proof of Identity (Pol)\* (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

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

<input type="checkbox"/> A- Passport Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Passport Expiry Date	<table border="1"><tr><td>D</td><td>D</td></tr></table> - <table border="1"><tr><td>M</td><td>M</td></tr></table> - <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y												
D	D																																										
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<input type="checkbox"/> B- Voter ID Card	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Driving Licence Expiry Date	<table border="1"><tr><td>D</td><td>D</td></tr></table> - <table border="1"><tr><td>M</td><td>M</td></tr></table> - <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y												
D	D																																										
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<input type="checkbox"/> D- Driving Licence	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																										
<input type="checkbox"/> E- Aadhaar Card	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																										
<input type="checkbox"/> F- NREGA Job Card	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																										
<input type="checkbox"/> Z- Others (any document notified by the central government)	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Identification Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				

### 3. Proof of Address (PoA)\*

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

**Address**

Line 1\* 

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Line 2\* 

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Line 3\* 

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District\* 

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Zip / Post Code\* 

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State/UT Code 

--	--

 as per Indian Motor Vehicle Act, 1988

State/UT\* 

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Country\* 

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Country Code 

--	--

 as per ISO 3166

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

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

**Proof of Address\***

☐ Passport Number

☐ Voter ID Card

☐ Driving Licence

☐ Aadhaar Card

☐ NREGA Job Card

☐ Others (any document notified by the central government)

Passport Expiry Date 

D	D
---	---

 - 

M	M
---	---

 - 

Y	Y	Y	Y
---	---	---	---

Driving Licence Expiry Date 

D	D
---	---

 - 

M	M
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 - 

Y	Y	Y	Y
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Identification Number 

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

☐ 3.2 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', Submit relevant documentary proof)

Line 1\* 

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

Line 2\* 

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Line 3\* 

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District\* 

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Zip / Post Code\* 

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State/UT Code 

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 as per Indian Motor Vehicle Act, 1988

State/UT\* 

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Country\* 

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Country Code 

--	--

 as per ISO 3166

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

Email ID 



  
Mobile 



 Tel. (Off) 



 Tel. (Res)

**5. FATCA/CRS Information** (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 above option (5) is ticked)

Country of Jurisdiction of Residence\* 



 Country Code of Jurisdiction of Residence 



 as per ISO 3166Tax Identification Number or equivalent (If issued by jurisdiction)\* 



Place / City of Birth\* 



 Country of Birth\* 



 Country Code 



 as per ISO 3166

Address  
Line 1\* 



  
Line 2 



  
Line 3 



 City / Town / Village\* 



  
District\* 



 Zip / Post Code\* 



 State/UT Code 



 as per Indian Motor Vehicle Act, 1988  
State/UT\* 



 Country\* 



 Country Code 



 as per ISO 3166

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

☐ 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 [Pol] of Related Person\* (Please see instruction **(H)** at the end)(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted)

☐ A- Passport Number 



 Passport Expiry Date 



  
☐ B- Voter ID Card 



  
☐ C- PAN Card 



  
☐ D- Driving Licence 



 Driving Licence Expiry Date 



  
☐ E- Aadhaar Card 



  
☐ F- NREGA Job Card 



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



 Identification Number

**7. Remarks (If any)**



**8. 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/directions 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]

Signature / Thumb Impression of Applicant

**9. Attestation / For Office Use Only****Documents Received** ☐ Certified Copies**KYC Verification Carried Out by (Refer Instruction I)**

Date 



  
Emp. Name 



  
Emp. Code 



  
Emp. Designation

[Employee Signature]

**In-Person Verification (IPV) Carried Out by (Refer Instruction J)**

Date 



  
Emp. Name 



  
Emp. Code 



  
Emp. Designation

[Employee Signature]

**Institution Details**

Name 



  
Code 



  
Emp. Branch

[Institution Stamp]

**Institution Details**

Name 



  
Code 



  
Emp. Branch

[Institution Stamp]

(To be additionally filled by customers using old KYC form)



Page 1



DATE :        /        /

**1. UNIT HOLDER INFORMATION**

**a. EXISTING UNIT HOLDER INFORMATION**

PAN

Any information provided at PAN level, will be updated in all the Folios where the PAN is Registered.

**b. NAME OF FIRST / SOLE APPLICANT**

Mr. Ms. M/s.

Application Form No.

**2. FIRST/ SOLE APPLICANT OTHER DETAILS (Mandatory)**

**a. Status of First/ Sole Applicant [Please tick (✓)]** ☐ Individual ☐ Non - Individual

☐ Resident Individual ☐ NRI-Repatriation ☐ NRI-Non Repatriation ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ PIO ☐ Company ☐ FII ☐ Minor through guardian ☐ BOI ☐ OCI  
☐ Body Corporate ☐ LLP ☐ Society / Club ☐ FPI ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Others \_\_\_\_\_ (please specify)

**b. Occupation Details [Please tick (✓)]** ☐ Service ☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business  
☐ Retired ☐ Agriculture ☐ Proprietorship ☐ Others \_\_\_\_\_ (please specify)

**c. Gross Annual Income (Rs.) [Please tick (✓)]** ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ >25 Lakhs - 1 Crore ☐ >1 Crore

OR

**c. Net-worth** (Mandatory for Non-Individuals) Rs. \_\_\_\_\_ as on  DD  MM  YYYY (Not older than 1 year)

**d. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

**e. Investors involved/ providing any of the mentioned services**

☐ Wholesalers OR ☐ Retailers in Precious metals (in particular buying-selling gold) and gems ☐ Wholesalers OR ☐ Retailers in Luxury cars  
☐ Wholesalers OR ☐ Retailers in Boats ☐ Wholesalers OR ☐ Retailers in Race-horses ☐ Wholesalers OR ☐ Retailers in Jewellery

☐ Money Service Businesses (MSB) & their agents (excluding Banks) ☐ Currency dealers or exchanges ☐ Sellers or redeemers of traveler's cheques  
☐ Money orders / remittance services

☐ Pawn shops ☐ Street market stall ☐ Hotels ☐ Restaurants ☐ Internet cafés ☐ Door-to-door sales companies ☐ Taxi ☐ Bars ☐ Night-clubs  
☐ Second-hand goods sales ☐ Second-hand vehicle dealers (excluding automobile franchise)

☐ Casinos ☐ Lotteries ☐ Gaming clubs ☐ Slot machines ☐ Antiques ☐ Art galleries ☐ Art dealers ☐ Auctioneer ☐ Art expert

**3. DETAILS OF SECOND APPLICANT, If any**

**a. Occupation Details [Please tick (✓)]** ☐ Service ☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business

☐ Retired ☐ Agriculture ☐ Proprietorship ☐ Others \_\_\_\_\_ (please specify)

**b. Gross Annual Income (Rs.)** ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ >25 Lakhs - 1 Crore ☐ >1 Crore OR Net worth Rs. \_\_\_\_\_

**c. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

**d. Investors involved/ providing any of the mentioned services**

☐ Wholesalers OR ☐ Retailers in Precious metals (in particular buying-selling gold) and gems ☐ Wholesalers OR ☐ Retailers in Luxury cars  
☐ Wholesalers OR ☐ Retailers in Boats ☐ Wholesalers OR ☐ Retailers in Race-horses ☐ Wholesalers OR ☐ Retailers in Jewellery

☐ Money Service Businesses (MSB) & their agents (excluding Banks) ☐ Currency dealers or exchanges ☐ Sellers or redeemers of traveler's cheques  
☐ Money orders / remittance services

☐ Pawn shops ☐ Street market stall ☐ Hotels ☐ Restaurants ☐ Internet cafés ☐ Door-to-door sales companies ☐ Taxi ☐ Bars ☐ Night-clubs  
☐ Second-hand goods sales ☐ Second-hand vehicle dealers (excluding automobile franchise)

☐ Casinos ☐ Lotteries ☐ Gaming clubs ☐ Slot machines ☐ Antiques ☐ Art galleries ☐ Art dealers ☐ Auctioneer ☐ Art expert



#### 4. DETAILS OF THIRD APPLICANT, If any

**a. Occupation Details [Please tick (✓)]** ☐ Service ☐ Private Sector ☐ Public Sector ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business  
☐ Retired ☐ Agriculture ☐ Proprietorship ☐ Others \_\_\_\_\_ (please specify)

**b. Gross Annual Income (Rs.)** ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ >25 Lakhs - 1 Crore ☐ >1 Crore **OR** Net worth Rs. \_\_\_\_\_

**c. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

#### d. Investors involved/ providing any of the mentioned services

☐ Wholesalers **OR** ☐ Retailers in Precious metals (in particular buying-selling gold) and gems ☐ Wholesalers **OR** ☐ Retailers in Luxury cars  
☐ Wholesalers **OR** ☐ Retailers in Boats ☐ Wholesalers **OR** ☐ Retailers in Race-horses ☐ Wholesalers **OR** ☐ Retailers in Jewellery

☐ Money Service Businesses (MSB) & their agents (excluding Banks) ☐ Currency dealers or exchanges ☐ Sellers or redeemers of traveler's cheques  
☐ Money orders / remittance services

☐ Pawn shops ☐ Street market stall ☐ Hotels ☐ Restaurants ☐ Internet cafés ☐ Door-to-door sales companies ☐ Taxi ☐ Bars ☐ Night-clubs  
☐ Second-hand goods sales ☐ Second-hand vehicle dealers (excluding automobile franchise)

☐ Casinos ☐ Lotteries ☐ Gaming clubs ☐ Slot machines ☐ Antiques ☐ Art galleries ☐ Art dealers ☐ Auctioneer ☐ Art expert

#### 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.

\_\_\_\_\_  
First / Sole Applicant / Guardian

\_\_\_\_\_  
Second Applicant

\_\_\_\_\_  
Third Applicant

#### INSTRUCTIONS

In accordance with SEBI Circular No. CIR/MIRSD/13/2013 dated December 26, 2013, the additional details viz. Occupation details, Gross Annual Income/networth and Politically Exposed Person (PEP)\* status mentioned under section 2 & 3 which was forming part of uniform KYC form will now be captured in the application form of the Fund. Also, the detail of nature of services viz. Foreign Exchange/Gaming/Money Lending, etc., (applicable for all applicants) is required to be provided as part of Client Due Diligence (CDD) Process of the Fund.

The said details are mandatory for both Individual and Non Individual applicants.

\*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.





**BNP PARIBAS**  
MUTUAL FUND

## FATCA & CRS ANNEXURE FOR INDIVIDUAL ACCOUNTS

South Gujarat ARN: 54854

(Including Sole Proprietor) (Refer to instructions)

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

### FIRST / SOLE APPLICANT / GUARDIAN

Name		First Name	Middle Name	Last Name
Gender (Please ✓)	<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> O	PAN	Occupation Type	
			<input type="checkbox"/> Service	<input type="checkbox"/> Business <input type="checkbox"/> Others
Father's Name		First Name	Middle Name	Last Name
Cust. ID / Folio No.				
Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes				
Type of address given at KRA (Please ✓)		<input type="checkbox"/> Residential or Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Permissible documents are		<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others		
Date of Birth		Place of Birth		
<input type="text"/>		<input type="text"/>		
Country of Birth		Nationality		
<input type="text"/>		<input type="text"/>		
Are you a tax resident of any country other than India? (Please ✓)		<input type="checkbox"/> YES <input type="checkbox"/> NO		

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

Country #	Tax Identification Number <sup>^</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup> To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

### SECOND APPLICANT

Name		First Name	Middle Name	Last Name
Gender (Please ✓)	<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> O	PAN	Occupation Type	
			<input type="checkbox"/> Service	<input type="checkbox"/> Business <input type="checkbox"/> Others
Father's Name		First Name	Middle Name	Last Name
Cust. ID / Folio No.				
Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes				
Type of address given at KRA (Please ✓)		<input type="checkbox"/> Residential or Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Permissible documents are		<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others		
Date of Birth		Place of Birth		
<input type="text"/>		<input type="text"/>		
Country of Birth		Nationality		
<input type="text"/>		<input type="text"/>		
Are you a tax resident of any country other than India? (Please ✓)		<input type="checkbox"/> YES <input type="checkbox"/> NO		

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

Country #	Tax Identification Number <sup>^</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup> To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

### THIRD APPLICANT

Name		First Name	Middle Name	Last Name
Gender (Please ✓)	<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> O	PAN	Occupation Type	
			<input type="checkbox"/> Service	<input type="checkbox"/> Business <input type="checkbox"/> Others
Father's Name		First Name	Middle Name	Last Name
Cust. ID / Folio No.				
Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes				
Type of address given at KRA (Please ✓)		<input type="checkbox"/> Residential or Business	<input type="checkbox"/> Residential	<input type="checkbox"/> Business <input type="checkbox"/> Registered Office
Permissible documents are		<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others		
Date of Birth		Place of Birth		
<input type="text"/>		<input type="text"/>		
Country of Birth		Nationality		
<input type="text"/>		<input type="text"/>		
Are you a tax resident of any country other than India? (Please ✓)		<input type="checkbox"/> YES <input type="checkbox"/> NO		

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

Country #	Tax Identification Number <sup>^</sup>	Identification Type (TIN or Other, please specify)

<sup>#</sup> To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

## CERTIFICATION

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

### Signatures

First / Sole Applicant / Guardian	Second Applicant	Third Applicant

Date: 

D	D	M	M	Y	Y	Y	Y
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Place:

## 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 Rules require Indian financial institutions such as the Bank 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>Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;</li><li>Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND</li><li>Any one of the following documents: 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</li></ol>
Residence / mailing address in a country other than India	<ol style="list-style-type: none"><li>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>Documentary evidence (refer list below)</li></ol>
Telephone number in a country other than India	<p><b>If no Indian telephone number is provided</b></p> <ol style="list-style-type: none"><li>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>Documentary evidence (refer list below)</li></ol> <p><b>If Indian telephone number is provided along with a foreign country telephone number</b></p> <ol style="list-style-type: none"><li>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</li><li>Documentary evidence (refer list below)</li></ol>
Telephone number in a country other than India	<ol style="list-style-type: none"><li>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>Documentary evidence (refer list below)</li></ol>

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body\*
- 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.**

AMC contact address & call centre details.	Blank space for your branch or any other details.



# REQUEST FOR SEEDING OF AADHAAR



**BNP PARIBAS**  
**MUTUAL FUND**

South Gujarat ARN: 54854

Please submit this request for each PAN separately

PAN

Aadhaar Number

**\*Where Aadhaar Number not assigned, please submit proof of application for enrolment of Aadhaar**

Name  Gender (Please ☒ Male ☐ Female ☐ Other

Date of Birth  /  /  Mobile Number  Pin code

Email

**Consent:** I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (iii) updating my Aadhaar number in accordance with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I hereby provide my consent for sharing / disclose of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my folio/s with my PAN.

Date  /  /  Place  Signature

## General Instructions:

- This form should be submitted separately for each PAN.
- Seeding of Aadhaar is Not applicable for NRIs
- In case of Non-Individuals and HUFs, Kindly refer Non-Individual Forms.
- Submission of this form does not warranty linking of Aadhaar Number in your Folios. It is subject to authentication with UIDAI database & other required validations. Please ensure your mobile number is updated in your Aadhaar database.
- Please Submit duly filled and signed form to your nearest Sundaram BNP Paribas Fund Services Limited Customer Care Center / AMC branches.
- You can dispatch the filled and signed form(s) to the following address: Sundaram BNP Paribas Fund Services Limited (SBFS) No. 23, Cathedral Garden Road, Nungambakkam, Chennai – 600034.

## Acknowledgment (To be filled by Investor)



**BNP PARIBAS**  
**MUTUAL FUND**

PAN

Investor Name

Aadhaar linking request form received for the above referred PAN. Linking your Aadhaar in Folios will be subject to verification and authentication of your Aadhaar with concerned authorities

Official Service Centre / Point of Acceptance seal & sign