CKYC & KRA KYC Form

HSBC	
Global Asset Mar	nagement

Know Your Client											□N	0144																	G	loba	al As	set	Man	agei	ment
Application Form (Fo	r In	div	idu	als	on	ıly)		opli /pe	catio *	ווכ				~ ~			.					_	_			_	_		1						
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Z- Others (any docume		otifi	ed b	oy tl	ne c	ent	ral g	ove	ernm	ent) [_	ш	_	_	ш	_	_	_	Ide	ent	ifica	atio	n N	lum	ber	L		L	Ш	Ш	_	_		Ш	
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Tax Identification N	umber or e	quivale	nt (If iss	ued by	juris	diction	n)*																					
Place / City of Birth	*					Cou	ntry	of B	rth*										Co	untry	/ C	ode			as p	er IS	SO 31	66
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C- PAN Card																												
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F- NREGA Job Ca	ırd						Щ						_															
Z- Others (any do	cument no	tified by	the cen	tral go	vernr	ment)	Ш	Ш					lo	denti	ifica	tion	Nu	mb	er	\perp	\perp	Ш	ᆜ	\perp	丄	Ш		丄
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Applicant Declara I hereby declare that the ditherein, immediately. In caliable for it. I hereby declegislation or any notification. I hereby consent to receivith Date:	etails furnished se any of the al are that I am n ons/directions is	bove inform ot making sued by an	nation is fou this applica y governme	nd to be f tion for th ntal or sta	alse or ne purp atutory a ph SMS	untrue of one of	or misl contra from	leading vention time to	or misre of any time.	Act,	enting Rules	, I am , Regu	aware	e that ns or a	l máy	be h	eld		Si	[Si		ure / T					cant	
9. Attestation / For C	_	-																										
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Version 1.6 Page 2

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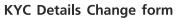
For Individuals Only

Know Your Client (KYC) Application Form

KYC Type: ☐ Normal (PAN is mandatory) (Please fill the form in English and in BLOCK Letters) ☐ PAN Exempt Investors Fields marked with * are mandatory fields

ementary CKYC Form	HSBC 🚺
ally filled by customers using old KYC form)	Global Asset Management

1. Identity Details (Please r	efer instruction A	at the end)																			
PAN		Plea	ise enclos	e a du	uly attes	ted	copy of	your P	AN Car	t											
	Prefix	Firs	t Name					Mid	dle Nai	ne						La	st Nar	ne			_
Name* (same as ID proof)																					
Maiden Name (If any*)																					
Mother Name*																					
Residential Status* Occupation Type*	Resident In Foreign Na S-Service O-Others B-Business	tional Private S Profession			Non Ro Person Public Self Er X-Not	of I Sec	Indian (tor yed	Origin	Governn Letired			r usew	ife		Stud	lent					
2. FATCA/CRS Information	(Tick if Applicable	le)	Reside	ence fo	or Tax F	urp	oses ir	Jurisd	iction(s) Outsi	ide I	ndia	(Plea	ase r	efer	instru	ction I	3 at	the e	nd)	
Additional Details Require Country of Jurisdiction of Tax Identification Number Place / City of Birth* Address Line 1* Line 2 Line 3 District* State/UT* 3. Details of Related Person Related Person Type* Name*	Residence* r or equivalent (Zip / P ase refer instr Related Perso Minor First	jurisdicti Co ost Code ruction G n Name ovided, be	construction of the constr	country* e end) (i Numbernee	n cas	se of ad Relate	ditiona d Perso	related	City persor ailable Repre	y / 1 Code	own	Co	lage as	per try (ode Indian I Code	Motor Name	as p	per IS0	1988	
Proof of Identity [Pol] of (Certified copy of any one of t		,				,															
□ A- Passport Number □ B- Voter ID Card □ C- PAN Card		or identity in the	I I I		1	'/			ssport					D	D -	- M	м]—[YY	Y	Y	
□ D- Driving Licence□ E- Aadhaar Card□ F- NREGA Job Card]			Dri	ving Lie	cence	Exp	oiry [Date	D	D -	- M	M —	YY	Y	Υ	
Z- Others (any documer	nt notified by the	e central gov	/ernmen	t)					Iden	tificat	ion	Num	ber								
4. Remarks (If any)																					
5. Applicant Declaration																					
I hereby declare that the details fun therein, immediately. In case any o liable for it. I hereby declare that legislation or any notifications/direc I hereby consent to receiving inform	of the above information I am not making this ctions issued by any government.	n is found to be fa application for th vernmental or sta	alse or untru e purpose o tutory author	e or mis of contra rity from	sleading of avention of time to tire	r misr of any me.	represent / Act, Ru	ing, I am les, Regu	aware tha lations or	t I may b	oe he	ld		[5	Signat	ure / Th	umb Imp	oressio	on]		
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Date

HSBC South Gujarat ARN: 54854

(For Individuals Only)

Please fill this update / modification form in ENG	ILISH and in BLOCK LETT	TERS (Please strike off S	ections that are not used).	Application No.:	
A Name of Applicant (Mandatory as p		-			
				PAN	
	_ Aadhaar Number,	if any:		_ '^\\	
Name					
Date of Birth ddd/mm//yyy	уу				
Please Provide the new KYC details whi	ch should be upda	ted in vour KYC re	cords.		
B. Mandatory fields for KYCs done I		· ·			
1. Father's/Spouse Name					
2. Current Marital status Single Married		3 Current N	ationality 🗌 Indian 🔲	Other (Please snorify)	
Note "FOR OFFICE USE ONLY": The IPV Co			, – –		on and Varified should
be mandatorily filled for changes to Identity		atomy inject for all KTC	s registered before 13t Jan	idary 2012. Originals se	en and vermed should
C. Identity Details (please see guide	ines overleaf)				
1. New Name (As appearing in supporting identif					
Name					
2. New Status Please tick (✓) ☐ Resident Indiv	idual 🗌 Non Resident	t (Passport Copy Manda	tory for NRIs & Foreign Nat	ionals)	
3. PAN	Please enclose a c	du l y attested copy of yo	ur PAN Card		
4. Proof of Identity submitted for PAN exer	npt cases P l ease Tick ((✓)			
☐ Aadhaar Card ☐ Passport ☐ Voter ID	☐ Driving Licence	Others		(Please see guideline 'D' overle
D. Address Details (please see guide	lines overleaf)				
1. New Address for Correspondence				_	
City / Town / Village				Pin C	ode
State			Country		
2. Contact Details		, , , ,			
Tel. (Off.) (ISD) (STD)			Tel. (Res.) (ISD) (STD)		
Mobile (ISD) (STD)			Fax (ISD) (STD)		
E-Mail Id.					
3. Proof of address to be provided by Applic Passport Ration Card Registered Lea	ant. Please submit AN	NY ONE of the follow	ing valid documents & t	ick (🗸) against the doc	ument attached.
*Latest Telephone Bill (only Land Line)				IU 🔲 Latest palik A/C 31	arement Lassbook
*Not more than 3 Months old. Validity/Expiry of	late of proof of address	submitted d	d / m m / y	у у у	
4. New Permanent Address of Resident Ap	plicant if different fr	rom above C1 OR Ov	erseas Address (Manda	tory) for Non-Resider	t Applicant
City / Town / Village				Pin C	ode
State			Country		
5. Proof of address to be provided by Ap					
☐ Passport ☐ Ration Card ☐ Registered ☐ *Latest Telephone Bill (only Land Line)					Bank A/c Statement/Passboo
*Not more than 3 Months old. Validity/Exp					
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SIGNATURE OF APPLICANT		DECLARAT			JRE OF APPLICAN
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			ely. In case any of the		
Old signature as per original KYC			or untrue or misleadi		
Wherever Applicable	illisrepresenting, La	am/we are aware tha	t I/we may be held liable	FIOFIL.	
	Place:		Date: dd/mm/y	ууу Ј	
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AMC/Intermediary name OR code					intermediary should contain
Originals Varified Salt Cortified Document	os rocaivad				Staff Name
(Originals Verified) Self Certified Document copi	es received				Designation of the Organization
(Attested) True copies of documents received				Name C	Signature
Main Intermediary					Dato

FATCA AND CRS SELF CERTIFICATION FOR INDIVIDUALS

(Including Sole Proprietor) (Refer to instructions) (Please consult your professional tax advisor for further guidance on your tax residency, if required)



Name Could Not Developed the Could not be seen to be se									$\overline{}$
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Gender Male Female Others PAN			Occupatio	n Type _	Service	Busine	ess Othe	rs	
Father's Name									
Folio Number									
Address of tax residence would be taken as available in KRA	database. In case of any char	nge please approach	KRA & no	otify the cl	nanges				
Type of address given at KRA Residential or Business	Residential Business	Registered Office							
Permissible documents are Passport Election ID Card	PAN Card Govt. ID	Card Driving Lie	cense U	IDAI Car	d NRE	GA Job Ca	ard Oth	ers	
Date of Birth D D M M Y Y Y P	ace of Birth								
Country of Birth		Nationality							
Are you a tax resident of any country other than India? Ye	es No (If yes, please indica	te all countries in which	h you are res	ident for tax	purposes an	d the associ	ated Tax ID N	Numbers b	elow
Country#	Tax Identifica	tion Number^		Identi	fication T	ype (TIN	or Other,	please	spec
									_
# To also include USA, where the individual is a citizen / gree	en card holder of The USA	\ In case Tax Identif	ication Nu	nber is no	t available,	, kindly pr	ovide its fur	nctional	equi
SECOND APPLICANT									
Name							T 1		T
Gender Male Female Others PAN			Occupatio	n Trmo	Comitos	Busine	ess Othe		
			Оссирано	птурс	Scivice	Dusine	ss ouic	15	
Father's Name									
Folio Number									
Address of tax residence would be taken as available in KRA	· · · · · · · · · · · · · · · · · · ·		KRA & no	otify the cl	nanges				
Type of address given at KRA Residential or Business					_				
Permissible documents are Passport Election ID Card	PAN Card Govt. ID	Card Driving Lie	cense U	IDAI Car	d NRE	GA Job Ca	ard Oth	ers	
Date of Birth D D M M Y Y Y Y Pl	ace of Birth								
Country of Birth		Nationality							
Are you a tax resident of any country other than India? Type You	es No (If yes, please indica	te all countries in which	h you are res	ident for tax	purposes ar	d the associ	iated Tax ID N	Numbers b	elow
Country#	Tax Identifica	tion Number^		Identi	fication T	ype (TIN	or Other,	please	spec
# To also include USA, where the individual is a citizen / gre-	en card holder of The USA	^ In case Tax Identif	ication Nu	nber is no	t available	, kindly pr	ovide its fur	nctional	equi
# To also include USA, where the individual is a citizen / gre-	en card holder of The USA	^ In case Tax Identif	ication Nu	nber is no	t available	, kindly pr	ovide its fur	nctional	equi
	en card holder of The USA	^ In case Tax Identif	ication Nu	mber is no	t available	, kindly pr	ovide its fur	nctional	equi
THIRD APPLICANT Name	en card holder of The USA								equi
THIRD APPLICANT Name Gender Male Female Others PAN	en card holder of The USA						ovide its fur		equi
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HSBC MF KYC and Aadhaar Updation Form



(To be Filled in BLOCK LETTERS only)

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3	THIRD APPLICAN	T'S INFORMATION	(Please tick (\checkmark) wh	ierever	· applicable)											
	Name	Mr Ms M/s														
	Date of Birth	D D M M Y Y	YY		KYC Identification No. (KIN) ‡‡											
	Aadhaar No.**				Where Aadhaar number	has not been assigned : Please enclose - of enrollment of Aadhaar										
	PAN**				Proof to be enclosed (
	Nationality				Country of Residence											
	KYC details															
3a.	Student Business				Doctor	Professional Agriculturist Retired Housewing Forex Dealer Casino Owner Arms manufactur										
3b.						cs - ₹ 1 Crore										
	OR Net-worth in Rupee	s (Mandatory for Non-Individ	luals) ₹ Net-worth shou	ıld not be	older than 1 year as o	n (date) D D M M Y Y Y Y										
3c.		Politically Exposed Person (PEP				Applicable	_									
_																
4	PoA HOLDER DE	AILS (If the investment	nt is being made by	a Con	stituted Attorney ple	ase furnish details of PoA holder)										
	Name	Mr Ms M/s														
	Date of Birth	D D M M Y	Y Y Y		KYC Identification No. (KIN) ‡‡											
	Aadhaar No.**	Where Aadhaar number has not been assigned : Please enclose - Proof of application of enrollment of Aadhaar														
	PAN**	Proof to be enclosed (✓) PAN card Copy														
	Nationality	Country of Residence														
	KYC details															
4a.	KYC details Occupation Details: Private Sector Service Public Sector Service Government Service Professional Agriculturist Retired Housewife Student Business [Nature of Business] Doctor Forex Dealer Casino Owner Arms manufacturer Gambling services offerer Money lender Pawn Broker Others [Please specify]															
4b.	Gross Annual Income :	Below ₹ 1 Lac	-5 Lacs	es □ ₹	₹ 10-25 Lacs	ics - ₹ 1 Crore										
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4c.	Others (please ✓) : □	Politically Exposed Person (PEP) Related to a l	Politicall	y Exposed Person (PEP)	Not Applicable										
5	DECLARATIONS A	AND SIGNATURES	(In case of joint ho	lding, s	signatures of all unit	holders are mandatory)										
	CONSENT FOR UPD	ATION AND VALIDATI	ION OF AADHAAF	2												
							ii)									
		de my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for collecting, storing and usage (ii) validating/authenticating and (ii) validatan number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. de my/our consent for sharing/disclosing of my 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/our folios.														
	mutual fund and their Regist	rar and Transfer Agent (RTA) f	OTHER DECLARATIONS Having read and understood the contents of the Scheme Information Document, Key Information Document, Statement of Additional Information and Addenda of the Scheme(s) issued till date, I / We hereby apply to the Trustees of HSBC Mutual Fund for units of the relevant Scheme and agree to abide by the terms, conditions, rules and regulations of the Scheme and the above mentioned documents of HSBC Mutual Fund. I / We hereby authorise HSBC Mutual Fund, the AMC and its Agents to disclose my / our details including investment details to my / our bank(s) / HSBC Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us, or to disclose to such other													
	mutual fund and their Regist OTHER DECLARATIO Having read and understood till date, I / We hereby apply the above mentioned docume my / our bank(s) / HSBC Mu service providers as deemed	ons the contents of the Scheme Infe to the Trustees of HSBC Mutua ents of HSBC Mutual Fund. I / N	ormation Document, Key al Fund for units of the re We hereby authorise HSB sistributor / Broker / Inves ess.	Informa levant Sc BC Mutua	me in my/our folios. tion Document,Statement theme and agree to abide b al Fund, the AMC and its A	y the terms, conditions, rules and regulations of the Scheme at gents to disclose my / our details including investment details	ed nd									
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- ‡‡ W.e.f February 1, 2017, New individual investors who have never done KYC under KRA (KYC Registration Agency) regime and whose KYC is not registered or verified in the KRA system will be required to fill the new CKYC form while investing with the Fund.
- ** As per the amendments to the Prevention of Money Laundering (Maintenance of Records) Rules, 2005 dated 1st June 2017, all unit holders including Joint Holders, Guardian and Power of Attorney Holders are required to submit their Aadhaar number or proof of Aadhaar application issued by the Unique Identification Authority of India and Permanent Account Number (PAN) to us. Non-individual investors have to submit the Aadhaar and PAN of the authorized signatory/ies.

 1) For MF accounts opened prior to June 1, 2017 before 31st December 2017. 2) For MF accounts opened on/after June 1, 2017 before 31st December 2017.
 - 3) For accounts opened on/after January 1, 2018 Aadhaar and PAN are mandatory, without which the account will not be opened.
 - Please note that if Aadhaar seeding and PAN updation is not completed for mutual fund investments by 31 December 2017, then these investment accounts will become inoperative until the time that these are duly updated in Fund records.