

Extended KYC Annexure – Individuals (Mutual Funds)

(Applicable for Resident and Non-Resident Customers)

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

Date: / /	Place	:	 -	ISA Number :		
Please fill the information below as requested		First Account Holder		Second Account Holder		
lame of the Acco	unt Holder					
an Number						
ustomer ID						
ity of Birth						
ountry of Birth						
Address for Tax purpose		☐ same as mailing add	ress	□ same as i	mailing address	
		☐ same as permanent address			permanent address	
Address Type for the above			□ Residential or Business □ Residential □ Business □ Registered Office		☐ Residenti☐ Business	al or Business
	onal of more than one country, p untries separated by a comma)	lease				
ather's Name (m	andatory if PAN not provided)					
pouse's Name (r	nandatory if PAN not provided)					
Identification Type- Documents submitted as proof of identity		☐ Passport ☐ ✓ PAN		☐ Passport ☐ ✓ PAN		
the individual			□ Election / Voter's ID card		☐ Election / Voter's ID card	
					☐ Driving License ☐ Aadhaar card / letter	
			□ Driving License □ Aadhaar card / letter		_	
			□ NREGA Card □ Govt ID Card		□ NREGA Card □ Govt ID Card	
			☐ Others(pls specify)		☐ Others(pls specify)	
Identification Number - for the identification type mentioned above		PAN Number as mentioned above		PAN Number as mentioned above		
ross Annual inco	me Details in INR (1st holder)	Below 1 La	akh	0 lacs 10-25 Lacs	25 Lacs -1	Cr >1 Crore
ross Annual inco	me Details in INR (2 nd Holder)	Below 1	L Lakh 🔲 1-5 Lacs 🔲 5	5-10 lacs	s 25 Lacs -	-1 Cr □>1 Crore
re you a tax resio	dent of any country other than Inc	dia?				
• First ac	count holder : Yes N	。				
• Second	account holder: Yes N	0				
<i>yes,</i> please indic	ate all countries in which you are	resident for	tax purposes and the ass	ociated Tax Reference N	umbers below	;
count holder	Name of Customer	Country/	(ies) of Tax residency #	Tax Identification Nu	ımber (TIN)%	Identification Type (TIN or Other%
:						
ond						
case Tax Identification: I/We have ne/us on this Form	is true, correct, and complete. I	ndly provide quirements /We also cor	e functional equivalent ^s of this Form as per the CB ofirm that I/We have read	and understood the Ter		ereby confirm that the information piions below and hereby accept the s
understand that	my personal details as provided /	available in	the bank records will be u	sea for CBDT reporting.		
			L			

Signature of first holder Signature of second holder



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CBDT Terms and Conditions

The Central Board of Direct Taxes (CBDT) 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 HDFC Bank 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.

CBDT 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		
		If customer does not agree to be Specified U.S. person/ reportable person status		
1	U.S. place of birth	 Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 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 		
2	Residence/mailing address in a country other than India	 Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; AND Documentary evidence (refer list below) 		
3	Telephone number in a country other than India (and no telephone number in India provided)	 Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; AND Documentary evidence (refer list below) 		
4	Standing instructions to transfer funds to an account maintained in a country other than India	 Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; AND Documentary evidence (refer list below) 		

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

- 1. Certificate of residence issued by an authorized government body*
- 2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)
- * Government or agency thereof or a municipality

For Bank use only:					
Sourcing Branch Name :	_Branch Code :				
Signature verified and form approved by : BDA / BM employee Code : Signature & Date :					