Know Your Client (KYC) Application Form (For Non Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters

Fields marked * are mandatory

Fields marked^ are pertaining to CKYC and mandatory only if processing CKYC also

AngelOne® CDSL VENTURES LIMITED ....Exploring New Horizons

Application Number:

For office use only Application Type* ☐ New ☐ Update

(To be filled by financial institution) KYC Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ (Mandatory for KYC update request)

1. ENTITY DETAILS (Please refer instructions A at the end)

Name* (Same as ID proof) _____

_____

Entity Constitution Type* _____ (Please refer insturaction B at the end)

Date of Incorporation / Formation* _____ Date of Commencement of Business _____

Place of Incorporation / Formation* _____ Country of Incorporation / Formation* ☐☐ TIN or Equivalent Issuing Country ☐☐

PAN* ☐☐☐☐☐☐☐☐☐☐ ☐ Form 60 furnished

TIN/GST Registration Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2. PROOF OF IDENTITY AND ADDRESS* (Please refer to the instructions)

☐ PROOF OF IDENTITY (PoI)* (Please refer instruction B at the end)

☐ Officially valid documents(s) in respect of person authorised to transact

☐ Certificate of Incorporation / Formation ☐☐☐☐☐☐☐☐☐☐ ☐ Registration Certificate Regn Certificate No.

☐ Memorandum and Articles of Association ☐ Partnership Deed ☐ Trust Deed

☐ Resolution of Board / Managing Committee ☐ Power of attorney granted to its manager, officers or employees to transact on its behalf

☐ Activity Proof-1 (For Sole Proprietorship Only) ☐ Activity Proof-2 (For Sole Proprietorship Only)

3. ADDRESS* (Please see instruction C at the end)

3.1 Registered Office Address / Place of Business*

Proof of Address* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document ☐☐☐☐☐☐☐☐☐☐

Line 1* _____

Line 2 _____

Line 3 _____ City / Town / Village* _____

District* _____ PIN / Post Code* _____ State/UT* _____ ISO 3166 Country Code _____

3.1 Registered Office Address / Place of Business*

Proof of Address* ☐ Certificate of Incorporation / Formation ☐ Registration Certificate ☐ Other Document ☐☐☐☐☐☐☐☐☐☐

Line 1* _____

Line 2 _____

Line 3 _____ City / Town / Village* _____

District* _____ PIN / Post Code* _____ State/UT* _____ ISO 3166 Country Code _____

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

Tel. (Off) ☐☐☐☐ - ☐☐☐☐☐☐☐☐ FAX ☐☐☐☐ ☐☐☐☐☐☐☐☐

Mobile* ☐☐ - ☐☐☐☐☐☐☐☐☐☐ Email ID* _____

Mobile* ☐☐ - ☐☐☐☐☐☐☐☐☐☐ Email ID* _____

5. NUMBER OF RELATED PERSONS (Please refer instruction E at the end)

6. Remarks (If any)

7. Applicant Declaration (Please refer instruction G at the end)

- 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 amy be held liable for it.
- I/we hereby consent to receiving information from Central KYC Registry through SME/Email on the above registered number/email address.

Signature / Thumb Impression of Applicant

[Signature / Thumb Impression]

Date: D D - M M - Y Y Y Y Place: _____

8. ATTESTATION / FOR OFFICE USE ONLY

Documents Received ☐ Certified Copies ☐ Equivalent e-document

KYC VERFICATION CARRIED OUT BY	INSTITUTION DETAILS
Identity Verification ☐ Done Date D D - M M - Y Y Y Y Emp. Name _____ Emp. Code _____ Emp. Designation _____ Emp. Branch _____	Name _____ Code _____ Institution Stamp
Employee Signature and Stamp	

Note: In case of any correction in the form - Sign next to the correction done & Sign has to match the original signature

ANNEXURE

Details of Promoters/ Partners/ Karta / Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Name of Applicant _____ PAN of the Applicant

Sr. No.	PAN and Aadhaar	Name	DIN (For Directors)/ UID (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
						☐ PEP ☐ RPEP ☐ NO	
						☐ PEP ☐ RPEP ☐ NO	
						☐ PEP ☐ RPEP ☐ NO	

Ver: 4.3

Name & Signature of the Authorised Signatory with company seal

Date d d / m m / y y y y

PEP: Politically Exposed Person

RPEP: Related to Politically Exposed Person

DECLARATION BY HUF AND CONSENT LETTER

To,
Angel One Ltd.

With regard to Beneficiary account no. (BO ID)_____ And Trading Account_____ maintained in the name & style "_____" with DP / Trading (Angel One Ltd.)

We the following family members, being the co-parceners in the HUF account M/s _____ do hereby give our consent that the said Karta, viz_____ would operate above mentioned BO ID / Trading account as far as shares transactions of the HUF account is concerned.

We further declare and authorize you to recognize the beneficiary account No. _____ with depository _____ opened in the name of the undersigned who is the Karta of the HUF for the purpose of completing the share transfer obligations pursuant to the trading operations. I agree and understand that this is to facilitate the operation of the above trading account. The transfer made by you to the beneficiary account shall be complete discharge of obligations by you in respect of trades executed in the above trading account.

Details of our HUF and all its co-parceners are stated as mentioned below:

Sr.No	Name of Family Member	Date of Birth (DD MM YYYY)	Gender	Relationship with Karta	Signature

* In case of Minor- Karta will sign the declaration

I, hereby state that details mentioned above are true and any change in them would be intimated to you in writing.

Title of HUF/ Karta _____

Signature of Karta

(HUF Rubber stamp)

Note: In case of any correction in the form - Sign next to the correction done & Sign has to match the original signature

FATCA / CRS DECLARATION / SELF CERTIFICATION FOR INDIVIDUAL (ONLY FOR HUF KARTA)

		First/Sole Holder	Second Holder (if any)	Third Holder (if any)
Client Code:			NA	NA
Demat Account No.				
1.	Indicate (✓) your Tax Residency / Citizenship / Nationality	☐ India ☐ U.S.A ☐ Others	☐ India ☐ U.S.A ☐ Others	☐ India ☐ U.S.A ☐ Others
If ticked on "Others" and/or "U.S.A", please provide all details under point no. 2,3,4,5 below:				
2.	Specify City and Country of Birth			
3.	Specify Country(ies) of Tax Residency/ Citizenship / Nationality / Green card holder, other than India			
4.	Tax Identification Number (for U.S.A.) or its functional equivalent (other than U.S.A.)			
5.	Source of Wealth	☐ Salary ☐ Business ☐ Gift ☐ Rental Income ☐ Royalty ☐ Ancestral Property ☐ Prize Money ☐ Others	☐ Salary ☐ Business ☐ Gift ☐ Rental Income ☐ Royalty ☐ Ancestral Property ☐ Prize Money ☐ Others	☐ Salary ☐ Business ☐ Gift ☐ Rental Income ☐ Royalty ☐ Ancestral Property ☐ Prize Money ☐ Others

DECLARATION

I / We hereby declare, agree and confirm the following:

a) The details furnished above are true to the best of my knowledge and belief and shall undertake to inform Angel Broking Private Limited within 30 days, in case of any change in the above given status on a future date;

b) If I /we am/are U.S. person or tax resident of a reportable foreign jurisdiction (other than U.S.), my account details, would be reported by Angel Broking Private Limited to the relevant tax authority, or information may be shared with concerned Asset Management Companies (AMCs) or such other product providers, to whom FATCA/ CRS norms are applicable or to any of the Government Agencies / Tax authorities / Regulators / Exchanges / Depositories of India or of any country other than India;

c) If my / our Country of Birth is US, however, I / We declare that I/ We are not US Person, I / We shall provide a certificate of relinquishment of citizenship (Loss of nationality) OR a self certification stating reasons for not having such a certificate despite relinquishing US citizenship OR not obtaining US citizenship at birth.

FH ____ SH ____ TH ____

(First/Sole Holder Signature) (Second Holder Signature) (Third Holder Signature)

What is FATCA / CRS?

The U.S. government introduced the Foreign Account Tax Compliance Act, 2010 (FATCA) for obtaining information on accounts held by U.S. taxpayers in other countries. Further, Organization for Economic Co-operation & Development (OECD) and G20 countries agreed for automatic exchange on information through Common Reporting Standards (CRS). The Government of India has signed an Inter-Government Agreement (IGA) with US and has also joined the Multilateral Competent Authority agreement (MCAA) for automatic sharing of information with member countries of OECD and G20. By virtue of India signing an IGA with US and joining MCAA, Indian financial institutions will have to provide the required financial information to Indian tax authorities which in turn would forward reportable information to US IRS and member countries of OECD and G20 countries.

In order to implement FATCA and CRS norms in India, Angel Broking Private Limited is required to implement procedures to identify U.S. account holders or other jurisdictions reportable accounts, perform due diligence and obtain documentary evidence wherever required and report details of such accounts to relevant tax authority.

US Person means: In case of individuals, U.S. person means a citizen or resident of the United States. Persons who would qualify as U.S. persons could be born in United States, born outside the United States of a US parent, Naturalized citizens, Green Card Holders, tax residents.

Who is Reportable Person (Non US) under Common Reportable Standards (CRS)?

Under Common Reportable Standards (CRS), reportable person means Tax residents of a reportable foreign jurisdiction other than U.S. (Please note the above information is provided only for quick reference to customers. You are requested to consult a legal/ tax advisor if in doubt.)

Documents to be collected if Customer's Country of birth is U.S. but declare that he/ she are not a U.S. person

1. Certificate of relinquishment of citizenship (Loss of nationality certificate); OR
2. Self certification for stating reasons for not having such a certificate despite relinquishment U.S. citizenship; OR
3. Self certification for stating reasons for not obtaining U.S. citizenship at birth.

DECLARATION FOR USING COMMON EMAIL ID & MOBILE NO. FOR TRADING & DEMAT A/C

Date:_____

To,
Angel One Ltd.
601, 6th Floor, Ackruti Star,
Central Road, MIDC, Andheri East,
Mumbai - 400093.

Client Code: _____ Demat Accountnumber: _____

Client Name:_____

I hereby declarefollowing details:

Mobile No: _____ _____ _the number belongs to _____

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents ☐ Authorised Signatory (non-individual category)

Email Id: _____ _____ the email Id belongs to_____ _____

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Parents ☐ Authorised Signatory (non-individual category)

Signature of related person: _____

Note:

1. As per SEBI Circular No. CIR/MIRSD/15/2011 dated August 02, 2011 investor will receive SMS & Email alerts on the given Mobile No. & Email Id.
2. As per the regulatory guidelines, use of common email id and mobile number is permissible for Family members which includes Self, Spouse, Dependent Parents and Dependent Children. For Non-individual client category the permissible relationship can be of Authorised signatory. Family Flag is required to be updated as 'Y' in all such Demat Accounts
3. Client may please note that Mobile Noand/or email IDof Trading Member (TM) / Employees of TM/Authorised Person are not permitted to receivethe SMS / Email Communication from Exchanges on behalf of client.
4. Valid Email Id & Mobile Number is mandatory for all New as well as Existing Clients. In case of repetitive bounce observation,member reserves right to suspend the account for want of valid KYC details.

FH	SH	TH
(1st Authorized Signatory)	(2nd Authorized Signatory)	(3rd Authorized Signatory)