

FATCA & CRS Declaration - Non Individual

PAN	N	Tradin	g	DP Code			
Nar	ne						
Pleas	se tick the applicable tax resident declaration -						
1. Is "Entity" a tax resident of any country other than India Yes No (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)							
Sr. No.	Country		Tax Identification Number	Identification Type (TIN or Other*, please specify)			
1.							
2.							
In case Tax Identification Number is not available, kindly provide its functional equivalent.							
				Global Entity Identification Number or GIIN, etc.			
In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here							
PART A (to be filled by Financial Institutions or Direct Reporting NFEs)							
1.	We are a, Financial institution (Refer 1 of Part C) or Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate)	GIIN Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Name of sponsoring entity					
}	GIIN not available (please tick as applicable)	Applied for Not obtained – Non-participating FI					
	GIII not available (piease tiek as applicable)		uired to apply for - please specify 2 digits	· · · · · · · · · · · · · · · · · · ·			
PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")							
1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)		Yes [(If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange				
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)		Yes (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company Name of stock exchange				
3.	Is the Entity an active NFE (Refer 2c of Part C)		Yes Nature of Business Please specify the sub-category of Active NFE (Mention code – refer 2c of Part C)				
4.	Is the Entity a passiveNFE (Refer 3(ii) of Part C)		Yes Nature of Business				
UBO Declaration (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)							
Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership Company							
	Unincorporated association / body of individuals Public Charitable Trust Religious Trust Private Trust						
Others (please specify)							
Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary) Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C)							

Details	UBO1	UBO2	UBO3				
Name of UBO							
UBO Code (Refer 3(iv) (A) of Part C)							
Country of Tax residency*							
PAN #							
Address							
	Zip	Zip	Zip				
	State:	State:	State:				
	Country:	Country:	Country:				
Address Type	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office	☐ Residence ☐ Business ☐ Registered office				
Tax ID %							
Tax ID Type							
City of Birth							
Country of birth							
Occupation Type	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others ☐				
Nationality							
Father's Name							
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others				
Date of Birth	DD/MM/YYYY	DD/MM/YYYY	DD/MM/YYYY				
Percentage of Holding (%) \$							
*To include US, where controlling person is a US citizen or green card holder "If UBO is KYCcompliant, KYCproof to be enclosed. Else PANorany other valid identity proof must be attached. Position/Designation like Director/Settlor of Trust/Protector of Trust to be specified wherever applicable. "In case Tax Identification Number is not available, kindly provide functional equivalent Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary							
FATCA - CRS Terms and Conditions							
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 to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit 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 us or our group entities. Therefore, it is important that you respond to our request, even if you be already supplied any previously requested information. If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the 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.							
Certification I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform Nirman Share Brokers Pvt. Ltd. / Nirman Commodities Pvt. Ltd. for any modification to this information promptly. I/We further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Strandards (CRS) and Automatic Exchange of Information (AFCI).							
and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI)'. Name							
Designation							
0: 1		Date :					
Sign here:		Place :					