

Applicant Name _____ Client Code _____

PART I

- A. Is the account holder a Government body/International Organization/listed company on recognized stock exchange:
 Yes No

If "No", then proceed to point B. If "yes" please specify name of stock exchange, if you are listed company _____ and proceed to sign the declaration.

- B. Is the account holder a (Entity/Financial Institution) tax resident of any country other than India : Yes No
If "yes", then please fill of FATCA/ CRS Self certification Form. If "No", proceed to point C.

- C. Is the account holder an Indian Financial Institution : Yes No

If "yes", please provide your GIIN, if any _____. If "No", proceed to point D.

- D. Are the Substantial owners or controlling persons in the entity or chain of ownership resident for tax purpose in any country outside India or not an Indian citizen : Yes No

If "yes", (then please fill FATCA/ CRS self-certification form)). If "No", proceed to sign the declaration.

CUSTOMER DECLARATION

() Under penalty of perjury, I/we certify that :

1. The applicant is:

- (i) An applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District to Columbia or any other states of the U.S.,
- (ii) An estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)

2. The applicant is an applicant taxable as a tax resident under the laws of country outside India.

- (i) I/We understand that Ashika Stock Services Ltd. is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. ASS L is not able to offer any tax advice on FATCA/CRS or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (ii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iii) I/We agree that as may be required by domestic regulators/tax authorities ASSL may also be required to report, reportable details to CBDT or close or suspend my account.
- (iv) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Name of the Entity _____

Signature 1 _____ Signature 2 _____

Signature 3 _____ (As per MOP)

Date : _____

Signature  _____

PART II**Self-Certification Form (Entity) for Foreign Account Tax Compliance Act ("FATCA") and Common Reporting Standards(CRS)****Section 1 : Entity information**

Name of Entity _____

Customer id (if existing) _____ Entity Constitution Type _____

Entity Identification type : Tax Identification Number (TIN) US GIIN Company Identification Number
Global Entity Identification Number (EIN) Other

Entity Identification No. _____

Entity Identification issuing country _____ Country of Residence for tax purpose _____

Section 2 : Classification of Non-Financial entities

I/We (on behalf of the entity) certify that the entity is:

- a) An entity incorporated and taxable in US (Specified US person) : Yes No
If "Yes", please provide your U.S. Taxpayer Identification Number (TIN) _____
- b) An entity incorporated and taxable outside of India (other than US) : Yes No
If "Yes", please provide your TIN or its functional equivalent _____
Provide your TIN issuing country _____
- c) Please provide the following additional details if you are not a Specified US Person :

FATCA / CRS classification for Non-financial entities (NFFE)

- Active NFFE Passive NFFE without any controlling Person
- Passive NFFE with Controlling Person(s) : US Others
- Direct Reporting NFFE (Choose this if any entity has registered itself for direct reporting for FATCA and thus Ashika Stock Services Ltd. is not required to do the reporting)

Please provide GIIN number : _____

Section 3 : Classification of financial institutions (including Banks)

I/We (on behalf of the entity) certify that the entity is :

- a. An entity is a U.S. financial institution : Yes No
If "Yes", (i) Please provide your Taxpayer Identification Number (TIN)
(ii) Please provide GIIN, if any _____

If "No", please tick one of the following boxes below :

FATCA classification**Please provide the Global Intermediary Identification number (GIIN) or other information where**

- Reporting Foreign Financial Institution in a Model 1 Inter-Governmental Agreement ("IGA") Jurisdiction _____
- Reporting Foreign Financial Institution in a Model 2 IGA Jurisdiction _____
- Participating FFI in a Non-IGA Jurisdiction _____
- Non-reporting FI _____
- Non-Participating FI _____
- Owner-Documented FI with specified US owners _____

Signature  _____

Section 4 : Controlling person declaration

If you are classified as “Passive NFFE with Controlling Person(s)” or “Owner documented FFI” or “Specified US person”, please provide the following details:

Name of controlling person	Correspondence Address	Country of residence for tax purpose	TIN	TIN issuing country	Controlling person type

Details	Controlling person 1	Controlling person 2	Controlling person 3	Controlling person 4	Controlling person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

Section 5 : Declaration

- (i) Under penalty of perjury, I/we certify that :
 1. The number shown on this form is the correct taxpayer identification number of the applicant, and
 2. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America (“U.S.”) or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof, or
 3. The applicant is an applicant taxable as a tax resident under the laws of country outside India.
- (ii) I/We understand that Ashika Stock Services Ltd. is relying on this information for the purpose of determining the status of applicant named above in compliance with CRS/FATCA. Ashika Stock Services Ltd. is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form gets changed.
- (iv) I/ We agree as may be required by Regulatory authorities, Ashika Stock Services Ltd. shall be required to report, reportable details to CBDT or close or suspend my account.
- (v) I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct and complete including the tax payer identification number of the applicant.

I/We hereby confirm that details provided are accurate, correct and complete

 Authorized Signatories and Company Seal (if applicable)

Name _____ Date (DD/MM/YYYY) _____