



FATCA & CRS Declaration - Non-Individual

PAN Trading Code DP Code

Name

Place of Incorporation Country of Incorporation

Address Type Residential Business Residential / Business

Gross Annual Income Below Rs. 1 Lac Rs. 1 Lac to 5 Lac Rs. 5 Lac to 10 Lac
 Rs. 10 Lac to 25 Lac Rs. 25 Lac to 1 Crore >1 Crore

Net Worth Amount Rs. Net Worth as on

(Net worth should not be older than 1 year)

Please 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 to 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.			
3.			

In case Tax Identification Number is not available, kindly provide its functional equivalent.
 In case TIN or its functional equivalent is not available, please provide Company Identification number or 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 filed by Financial Institutions or Direct Reporting NFEs)*

1. We are a, Financial Institution (Refer 1 Part of C) or Direct reporting NFE (Refer 3(vii) Part of 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
 Not required to apply for - please specify 2 digits sub-category (Refer 1A Part of C)

PART B *(please fill up one or appropriate to be filed 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 Part of C) Yes No *(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 No *(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

3. Is the Entity an Active NFE? Yes No Nature of Business
 Please specify the sub-category code (Refer 2C Part of C)

4. Is the Entity a Passive NFE? (Refer 3(ii) Part of C) Yes No 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: WB BEN E (Refer 3(vi) Part of C)

Details	UBO1	UBO2	UBO3
Name of UBO			
UBO Code (Refer 3(v) (A) Part of C)			
Country of Tax residency*			
PAN *			
Address	Zip _____ State _____ Country _____	Zip _____ State _____ Country _____	Zip _____ State _____ Country _____
Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered office
Tax ID **			
Tax ID Type			
City of Birth			
Country of birth			
Occupation Type	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others
Nationality	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Father's Name			
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
Date of Birth	DD/MM/YY	DD/MM/YY	DD/MM/YY
Percentage of Holding (%) †			
<p>* To include US, where controlling person is a US citizen or green card holder</p> <p>** If UBO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position / Designation like Director / Settlor of Trust / Protector of Trust to be specified wherever applicable.</p> <p>† In case Tax Identification Number is not available, kindly provide functional equivalent</p> <p>‡ Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary</p>			
CERTIFICATION			
I/We have understood the information requirements of this form (read along with the FATCA & CRS instructions & definitions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We also confirm that I/We have read and understood the FATCA & CRS Terms and conditions below and hereby accept the same.			
Name _____			
Designation _____			
Sign here : (20)  Date : <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Place : _____			
<p>For Investor convenience, Vedika Vanijya Pvt Ltd. collecting this mandatory information for updating across all Group Companies of Vedika Vanijya Pvt Ltd. whether you are already an investor or would become an investor in future. Please submit the form fully filled, signed, for all the holders, separately, and submit or dispatch the hard copy to</p> <p>Vedika Vanijya Pvt. Ltd. Arjun Market Complex, 730 Nayapalli, Ground Floor, Bhubaneswar-751012</p>			
FATCA & CRS Terms & Conditions			
<p>Towards compliance with tax information sharing laws such as FATCA, we would required to seek additional personal, tax and beneficiary owner information and certain certification and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any question about your tax residency please contact your tax advisor. Towards compliance with such laws, 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. As may be required by domestic or overseas regulators/tax authorities, we may also be constrained to withhold and pay out any sum from your account or close or suspend your account(s). Should there be any change in any information provided by you, please ensure you advise us promptly i.e. within 30 days.</p> <p>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.</p>			