Only 'Individuals' to

Form No. 49AA

Application for Allotment of Permanent Account Number [Individuals not being a Citizen of India/Entities incorporated outside India/

Only 'Individuals' to

l	ix recent photograph (3.5 cm × 2.5 cm)	Unincorporated entities formed outside India] See Rule 114																	pποι × 2.5	ogra cm)	•											
	(0.0 0)	See Rule 114 To avoid mistake (s), please follow the accompanying instructions and examples before filling up the form														(0.0	•		J,												
		Assessing officer (AO code)																														
Sign	/ Left Thumb impression				_				_			_				_																
	across this photo	A	rea	code	-	AO	typ	е	R	ange	e co	de	-	AO N	0.	_																
	Sir,																															
	I/We hereby request	that a	а ре	rmane	nt a	ccou	ınt n	umb	oer b	oe al	lotte	d to	me/	us.																		
	I/We give below nece	essar	y pa	articula	rs:																Sig	natu	re /	Left	Thu	mb	impr	ress	sion			
1	Full Name (Full exp	ande	d n	ame to	be	mer	ntio	ned	as a	appe	arir	ıg ir	pro	of o	fide	entit	y/ac	ddre	ess	dod	um	ents	: ini	itial	s ar	e no	ot pe	ermi	itte	d)		
	Please select title,		✓	as app	olica	ble		Sh	ri/N	/lr		Sm	t/Mr	s		Kum	ari/l	Ms			M/s	•						_				
	Last Name / Surnan	ne																														
	First Name		Ī																								П]				
	Middle Name		Ī											İ	Ì	Ť	İ		Ì								Ī	ĺ				
2	Abbreviations of th	e abo	ve	name,	as	/ou	wou	uld I	ike	it, to	be	prir	nted	on tl	ne F	PAN	car	d						ļ				J				
			Т										П	Т	T	Т		T	T			Т	П							Т	Т	Т
		\pm	1										\exists	\pm	$\frac{1}{1}$	\pm		$\frac{\perp}{\parallel}$	$\overline{}$			\dashv	\exists					_		T	Ħ	Ħ
3	Have you ever beer	kno	wn	by any	, oth	or r	nam	02			\dashv	Yes		\vdash	No			/E	Dloa	60	tick	as a	nnli	icah	(a)							
J	If yes, please give th				y Oti	iei i	Iaiii	e:				163			NO			(1	-iea	36	lick	as a	ppii	lcan	iie)							
	Please select title,		\neg	as app	olica	ble		Sh	ri/N	/lr		Sm	ıt/Mr	s		Kum	ari/l	Ms	Γ		M/	s										
	Last Name / Surnan] -	Τ	Τ					_]				Π		$\overline{}$	1				
		ne	L		<u> </u>									_	\pm	+											는]]				
	First Name		Ļ		<u> </u>	L					<u> </u>			_	4	<u> </u>	_	_									뉴]				
	Middle Name		L			L				Ļ	Ц				4					1							L	_				
	Gender (for Individu				-							Mal			_	Fem						gend					tick			lica	ble)	
5	Date of Birth/Incorp																												ne			
9			on/	_		t/Pa	rtne	ersh	ip o	r Trı	ust [Dee	d/ Fo	rma	tior	of I	Bod	y of	finc	livi	dua	s or	Ass	soci	iatic	on o	t Pe	rso	1113			
		orati onth	on/	_	men ⁄ear	t/Pa	rtne	ersh	ip o	r Tri	ust [Dee	d/ Fo	rma	tion	n of I	Bod	y of	f inc	livi	dua	s or	As	soci	iatic	on o	t Pe	rso	1113			
	Day Mo	onth		<u> </u>	/ear							Dee	d/ Fo	orma	tion	n of I	Bod	y of	f inc	livi	dua	s or	AS	soci	iatic	on o	it Pe	erso	ilis			
		onth appli	cab	ole only	ear	ind	livid	ual	арр	licaı	nts)													soci	iatic	on o	of Pe	erso	viis			
	Day Mo	applications appli	cab e pa	ole only arent a	/ear y for nd you	ind ou w	l ivid vish	u al to a	app pply	lica i for l	nts) PAN	by	furni	shing										soc	iatic	on o	T Pe	erso	nis			
	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m	application in the single ease nother	cab e pa tick	ole only arent a c as ap	fear y for nd ye plica	ind ou w ble)	l ivid vish	ual to a	app pply	licar for lace p	nts) PAN provi	by de b	furni	shing	ı the	e nar	me c	of yo	our n	not	her o	only?	>									
	Details of Parents (at Whether mother is a Yes No (pl If yes, please fill in m	applie single ease other	cab e pa tick	ole only arent a c as ap	fear y for nd ye plica	ind ou w ble)	l ivid vish	ual to a	app pply	licar for lace p	nts) PAN provi	by de b	furni	shing	ı the	e nar	me c	of yo	our n	not	her o	only?	>									
	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Man Last Name / Surnam	applie single ease other	cab e pa tick	ole only arent a c as ap	fear y for nd ye plica	ind ou w ble)	l ivid vish	ual to a	app pply	licar for lace p	nts) PAN provi	by de b	furni	shing	ı the	e nar	me c	of yo	our n	not	her o	only?	>									
	Day Mo Details of Parents (and Whether mother is and Yes No (pl If yes, please fill in materials Name / Surname Father's Name / Surname	applie single ease other	cab e pa tick	ole only arent a c as ap	fear y for nd ye plica	ind ou w ble)	l ivid vish	ual to a	app pply	licar for lace p	nts) PAN provi	by de b	furni	shing	ı the	e nar	me c	of yo	our n	not	her o	only?	>									
	Day Mo Details of Parents (and Whether mother is a limit of yes, please fill in material Name / Surname Middle Name	applie single ease other ndato	cab e pa tick ''s n ery (ple only arent a c as ap name ir	fear y for y for plica the who	ind ou w ble) app	livid vish	to a	appppppppppppppppppppppppppppppppppppp	licar for ace p	nts) PAN provi	by de t	pelownt a	shing /. nd P/	1 the	is ar	pplie	ed b	our n	urni	her o	only?	ne n	ame	e of	mot	ther	onl	ly)			
	Day Mo Details of Parents (and Whether mother is and Yes No (pl If yes, please fill in materials Name / Surname Father's Name / Surname	applicational	cab e pa tick ''s n ery (ple only arent a c as ap name ir	fear y for y for plica the who	ind ou w ble) app	livid vish	to a	appppppppppppppppppppppppppppppppppppp	licar for ace p	nts) PAN provi	by de t	pelownt a	shing /. nd P/	1 the	is ar	oplie	ed b	our n	urni	her o	only?	ne n	ame	e of	mot	ther	onl	ly)			
	Day Mo Details of Parents (and Whether mother is and Yes No (pl If yes, please fill in m Father's Name (Man Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam	applicational	cab e pa tick ''s n ery (ple only arent a c as ap name ir	fear y for y for plica the who	ind ou w ble) app	livid vish	to a	appppppppppppppppppppppppppppppppppppp	licar for ace p	nts) PAN provi	by de t	pelownt a	shing /. nd P/	1 the	is ar	pplie	ed b	our n	urni	her o	only?	ne n	ame	e of	mot	ther	onl	ly)			
	Day Mo	applicational	cab e pa tick ''s n ery (ple only arent a c as ap name ir	fear y for y for plica the who	ind ou w ble) app	livid vish	to a	appppppppppppppppppppppppppppppppppppp	licar for ace p	nts) PAN provi	by de t	pelownt a	shing /. nd P/	1 the	is ar	pplie	ed b	our n	urni	her o	only?	ne n	ame	e of	mot	ther	onl	ly)			
	Day Mo Details of Parents (and Whether mother is and Yes No (pl If yes, please fill in m Father's Name (Man Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam	appliid single ease other ndato	cabe partick itisk	ole only arent a c as ap name ir except	fear y for nd y plica the who	ind ou w ble) app ere i	propi mot	ual to a	appppply spais a	for for single	nts) PAN provi	by de t	pelownt a	I PAN	AN I	is app	me c	by	bur n	not	shir dishir	ng th	ne n	ame	e of	mot	ther	onl	ly)			
	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name Middle Name Select the name of e Father's name	appliide ease other ndatone	cabe partick is nory of	ple only arent a c as ap name ir except when the control of the co	/ear // for nd you plica in the care who have the care who have the care who have the care and t	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	ingle	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er o	onl	ly)			
	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Man Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name Middle Name Select the name of e Father's name (In case no option is	appliide ease other ndato ne tither provide pr	cabe partick	ple only arent a c as ap name ir except where or n Mother than F	/ear // for nd you plica in the care who had been successful to the care and the ca	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	app pply spa is a a si	ingle	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er o	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name Middle Name Select the name of e Father's name	appliide ease other ndato ne tither provide pr	cabe partick	ple only arent a c as ap name ir except where or n Mother than F	/ear // for nd you plica in the care who had been successful to the care and the ca	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	ingle	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er o	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name Middle Name Select the name of e Father's name (In case no option is by furnishing name of	appliisingle ease nother ndato ne lither to provide the me	cabe partick	ple only arent a c as ap name ir except where or n Mother than F	/ear // for nd you plica in the care who had been successful to the care and the ca	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	ingle	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er o	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Mother's Name (opt Last Name / Surnam First Name Middle Name Middle Name Select the name of e Father's name (In case no option is by furnishing name of Address	appliisingle ease other ndatone little reference from the reference in the reference r	cab e pa tick 's n fry	ple only arent a c as ap name ir except where or n Mother than F	/ear // for nd you plica in the care who had been successful to the care and the ca	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	single y like	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er o	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name Middle Name Select the name of e Father's name (In case no option is by furnishing name of Address Residence Address	appliisingle ease nother ndatone lither for the proving the lither for the lither	cab e pa tick 's n ry [[[[fath ded mod	er or m Mother	/ear // for nd you plicate in the common the common the common the common the common that is a common that i	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	single y like	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er or	oni]]] niy)]	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name (In case no option is by furnishing name of Address Residence Address Flat/Room/ Door / Bid	appliisingle ease oother ndatone lither:	cabe partick is nory ([[[[[[[fath]]]]]]]]]]]]]]]]]]]	ole only arent a cas apparame in except where or many mother than Fither on the case of th	/ear // for nd you plicate in the common the common the common the common the common that is a common that i	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	single y like	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er or	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Man Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name (In case no option is by furnishing name of Address Residence Address Flat/Room/ Door / Ble Name of Premises/ E	appliisingle ease oother ndato ne lither to be compared to be comp	cabe partick it is not provided to the control of t	ole only arent a cas apparame ir except where or no Mother then Fither on Village	y for not you plicate the transfer of the tran	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	single y like	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er or	onl	ly)	pply	' for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnan First Name Middle Name Mother's Name (opt Last Name / Surnan First Name Middle Name Select the name of e Father's name (In case no option is by furnishing name of Address Residence Address Flat/Room/ Door / Ble Name of Premises/ E Road/Street/ Lane/Pe	appliisingle ease oother ndato ne lither to be compared to be comp	cabe partick it is not provided to the control of t	ole only arent a cas apparame ir except where or no Mother then Fither on Village	y for not you plicate the transfer of the tran	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	ingle	nts) PAN provide prov	by de the pare	pelownt a	I PAN	AN I	is app	pplied	ed b	furr	not	her dishir	ng the the	ne n	ame	of m	othe	er or	onl	ly)	pply	for	PAN
6	Day Mo Details of Parents (a Whether mother is a Yes No (pl If yes, please fill in m Father's Name (Mar Last Name / Surnam First Name Middle Name Mother's Name (opt Last Name / Surnam First Name (In case no option is by furnishing name of Address Residence Address Flat/Room/ Door / Ble Name of Premises/ E Road/Street/ Lane/Pe Area / Locality / Talul	appliisingle ease nother ndatone littler [cabe partick it is not provided to the control of t	ole only arent a cas apparame ir except where or no Mother then Fither on Village	y for not you plicate the transfer of the tran	ind ou w ble) app app app app app app app app app ap	livid vish propri mot othe hich	riate her syou	appppply spais a sis a si maa (Ple	ingle	PAN Provide p	by de to pare	pelownt a	I PAN	AN I	is app	me copplied and the complete control of the control	by Selection	furr	not urni	her dishir	ng the the	ne n	ame	of m	othe	er or	onl	ly)	pply	' for	PAN

	Office Address Name of office															
	Flat/Room/ Door / Block No.												<u> </u>		$\frac{\perp}{\perp}$	\exists
	Name of Premises/ Building/ Village					$\frac{1}{1}$			1				<u> </u>	<u> </u>	$\frac{\perp}{1}$	_
	Road/Street/ Lane/Post Office					+		+	<u> </u>							_
						$\frac{1}{1}$		<u> </u>	+							
	Area / Locality / Taluka/ Sub- Division					+										\exists
	Town / City / District State / Union Territory Pin	code / Z	ip code		Count	ry Na	me			Ш						
			İ													
8	Address for Communication Resid	lence		Off	ice	(Ple	ase t	tick as	s app	lical	ble)					
9	Telephone Number & Email ID details															
	Country code Area / STD Code	Tele	phone /	Mobile	number	-										
	Email ID															
1	0 Status of applicant															
	Please select status, ✓ as applicable								Gov	verni	men	t				
		npany		Partno	rship Fi	rm			_			of P	orco	ne		
]				_	_							
		al Autho	rity	Artificia	al Juridi	cal Pe	erson	s	Lim	iited	Liab	ility I	Partr	nersr	nıp	
1	1 Registration Number (for company, firms, etc.)															
1:	2 Country of citizenship			ISD	code o	f cou	ntry o	of citiz	zensl	hip						
1	3 Source of Income				Plea	250 50	alact	statu	s.	√ a	ıs ar	plic	able	•		
						136 36	37001		- /			٠,٠.٠	u.o.o			
						130 30	31001		· _							
	Salary	code		For Code					Capi	tal G	ains					
	Salary Income from Business / Profession Business/Profession	code	[1	For Code					Capi	tal G	ains					
	Salary Income from Business / Profession Business/Profession Income from House property	code	[1	For Code					Capi	tal G	ains					
1	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India	code	[1	For Code					Capi	tal G	ains					
1	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent		[1	For Code					Capi	tal G	ains					
1	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)	t/Mrs			nstruct	tions]		Capi	tal G	ains					
1.	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title, as applicable Shri/Mr Last Name / Surname	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Salary Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Salary Income from Business / Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)			:: Refer i	nstruct	tions]		Capi	tal G	ains					
1.	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	1)	t/Mrs [:: Refer i	nstruct	tions]		Capi	tal G	ains					
1	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	Sm	t/Mrs [:: Refer i	nstruct	tions]		Capi	tal G	ains					
	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	Sm:	t/Mrs [Kun	:: Refer i	nstruct	tions]		Capi	tal G	ains					
	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	Sm	t/Mrs [Kun	nari/Ms	nstruct	tions]		Capi	tal G	ains					
	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	Sm Sm Sm Sm Sm Sm Sm Sm Sm Sm Sm Sm Sm S	t/Mrs [Kun	nari/Ms	nstruct	M M		Capi	tal G	ains			rces		
	Income from Business / Profession Business/Profession Income from House property 4 Representative or Agent of the Applicant in India Full name, address of the Representative or Agent Full Name (Full expanded name: initials are not permitted Please select title,	Sm Code / Z as as	t/Mrs [Kun OA) f identity tory cert	nari/Ms	nstruct	M M	l/s	Capi Income No in the I	tal G	ains rom (Other	r sou	as		

	YC details* [To be filled in by Foreign Institutional Investor or a Qualified F e Securities and Exchange Board of India (SEBI)]	oreign Investor, as prescribed under the regulations issued by
["0	"Control" as defined under SEBI (Substantial Acquisition of Shares and Taked	overs) Regulations,1997
"B	"Beneficial owner" as defined in the para 5.1 of SEBI circular dated Decembe	r 31, 2010 on Anti Money Laundering.]
(a)) In case of Individuals	Please select ✓ as applicable
	Marital Status Single Married Divorced	Widow/Widower
	Citizenship Status I Foreigner P Person of Indian o	rigin O Overseas citizen of India
	In case of foreigner, country of citizenship	
	Occupation details Private sector service Public sector/Govt. se	ervice Business Professional
	Agriculturist Retired	Housewife Student Others
(b)) In case of non individuals	Please select 🗸 as applicable
	R Private Company U Public Company	D Body Corporate
	S Financial Institution Non Government C	Organization C Charitable Organization
(c)) Gross Annual Income - INR	
	Networth (Assets less liabilities) in INR	
(d)) In case of a Public Company, whether listed on a stock exchange	Yes No Please select ✓ as applicable
	If yes, then indicate name of the stock exchange	
(e)) In case of Non-individuals	
	Does it have few persons or persons of the same family holding beneficial o	wnership and control.
	Y	'es No Please select √ as applicable
	["Control": Control shall include the right to appoint majority of the directors a person or persons acting individually or in concert, directly or indirectly, in shareholders agreements or voting agreements or in any other manner "Be or controls the applicant and/or the person on whose behalf a transaction is effective control over a juridical person]	cluding by virtue of their shareholding or management rigths or neficial owner" means the natural person who ultimately owns
(f)	Is the entity involved / providing any of the following services	Please select as applicable
	Foreign exchange, Money Changer Services	Yes No
	Gaming/Gambling/Lottery services (Casinos and Betting Syndicates)	Yes No
	Money Lending, Pawning	Yes No
(g)) Whether the applicant or the applicant's authorised signatories/trustee	s/office bearers is
	(i) a politically exposed person Yes	No
	(ii) related to a politically exposed person Yes	No
	[For definition of politically exposed person refer to guidelines issued un	
(h)) Taxpayer identification Number in the country of residence	
17 I/We	Ve , the applicant, in the capacity of	
	b hereby declare that what is stated above is true to the best of my/our inf	
uo i		ormanon and sonon
Plac	ace	
Date	D D M M Y Y Y	Signature / Left Thumb Impression of Applicant (inside the box)