Application No:



Business Associate Name	:	SURE FINSERV	
Business Associate Code	:	345173	
Affiliate Business Associate	:		
Branch	:		

(Formerly known as Shriram Transport Finance Company Limited) Regd. Office: Sri Towers, Plot No. 14A, South Phase, Industrial Estate, Guind	dy, Affiliate	Affiliate Business Associate:				
Chennai - 600 032. Ph: 044 485 24 666 www.shriramfinance.in Admin Office: 6th Floor (level 2), Building No.Q2, Aurum Q Parć, Gen 4/1, TTC, Thane Belapur Road, Ghansoli, Navi Mumbai 400710. Ph: +91-22-40957575.	Branch	Branch :				
Application Form for Fixed	t Individual / NRI)					
Please fill the information in CAPITAL letters	and tick in appropriate	places, only with black or bl	ue ink			
I/We wish to apply for Fresh/Renewal of Deposit for a Period	(months)of 121	3 24 30 36	42 60			
Payment Details If Fresh, Cheque/RTGS/NEFT, UTR No Ar		Dunasan an	Data			
If Renewal, Old Cert No Matu						
Part Refund Amount Rs Total Investment Am						
	*Shriram Group Employee	*Deposit Repayment				
	Yes No	to be made to	*Scheme			
*Senior Citizen Renew only Principal Shareholder	Organization Name	Sole/First Applicant Anyone or Survivor/s	Cumulative Monthly interest			
Yes No Benew Principal with Relative of		Former or Survivor/s	Quarterly interest Half-Yearly interest			
* Minor Yes No Interest Amount Director Promoter	Employee Code		Yearly interest			
First Applicant Details as per KYC Document : CKYC No (if any)* *Mr./Ms./Minor		(For new / Non-CKY	'C investor, KYC form mandatory)			
		Form 60 Custome	er ID:			
*DOB/ *PAN(^ If investment amount <=Rs.500		(If existing	ng investor)			
#Email ID:						
		irst Applicant: Resident Indiv				
Second Applicant Details as per KYC Document : *СКҮС No (if any)* Mr. / Ms. / Minor		(For new / Non-CK	(YC investor, KYC form mandatory)			
*DOB/*PAN	^		er ID:			
(^ If investment amount <=Rs.500 #Email ID:	•	,	,			
Natural Guardian Details as per KYC Document : *CKYC No (if any)		(For new / Non-CKYC	C investor, KYC form mandatory)			
Mr. / Ms.*		*Guardian of : First Ap	pplicant Second Applicant			
*DOB/ *PAN(^ If investment amount <=Rs.500	^		er ID:			
(If investment amount <=ks.500			ng investor)			
Details of Bank Account (First Named D	Depositor) (Cancelled	cheque leaf to be submit	tted)			
*Bank Account No	*Bank N	ame				
*MICR Code	*Branch					
*IFSC Code	*Accour	nt: Saving Curre	nt NRO A/C			
Declaration: I/We have read the Terms and conditions of the company and accept my/our application is the beneficial owner of this deposit and as such he/she should b						
I/We hereby agree to abide by the attached terms and conditions governing the dep I/We have gone through the financials and other statements/representations/part		he company and after careful con	sideration I/We/am/are making the			
deposit with the company at my/our own risk and volition. I/We further declare that, I/We am/are authorized to make this deposit in the abo						
through legitimate source and does not involve directly or indirectly any proceeds o provisions of the Prevention of Money Laundering Act, 2002 and any Rules, Notifica	of schedule of offence and/o	r is not designed for the purpose o	f any contravention or evasion of the			
further information and fully co-operate in investigation as and when required by me/us is/are true in all respect and nothing has been concealed. I/We authorize	the company in accordance	to the applicable Law. I/We furth	er affirm that the detail provided by			
messaging service (SMS), WhatsApp, Bots relating to my/our deposits. My personal / KYC details may be shared with Central KYC Registry.	Similari mance Limited t	o contact mey as, in person, by p	ost, telephone, e-mail, using short			
I hereby consent to receiving information from Central KYC Registry through SMS/Email on I hereby consent to download records from Central KYC Registry by using KYC identifier furn	nished by me/us					
I/We confirm that the Company has explained and provided me / us the above information / Terms Signature of the Depositors (Individuals / NRI)	s & Conditions in my local langua	ge.				
*First Applicant / Guardian		in joint names, all the dep	ositors must sign on the space			
Second Applicant / Guardian	provided above. 2. Thumb impression	n must be attested by the m	agistrate or notary public.			
* Details are mandatory	<u>I</u>					
# Details mandatory for E-Receipt						
NRI investors are requested to furnish passport	copy with Visa pag	ge, domestic and inter	national address.			
Nomination Details U/	S 45QB of RBI Act 193	4 (Form DA1)				
I/We above named depositors at current address in your records death the amount of this deposit may be returned by Shriram Fi	nance Limited:		event of my/our/minor's			
Name of the Nominee:			* Nominee://			
Address of Nominee:			No. a sala			
As the Nominee is minor on this date, I/We appoint						
Address:						

to receive amount of the said deposit on behalf of the nominee in event of my/our/minor's death during the minority of the nominee.

Signature of the Depositors	
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For Nomination First Applicant / Guardian_ __ Second Applicant / Guardian_

witness required in case if thumb impression is affixed by Depositor(s), Name of nominee should be same as that appearing on valid ID Proof of the nominee. For office use only

ſ	TR number	Cert number	Cert date	Checked By	Authenticated by	Authentication date
ſ						

Shriram Finance Limited (Formerly known as Shriram Transport Finance Company Limited)



Know Your Customer (KYC) Application Form (Resident Individuals / NRI)

Please fill the information in CAPITAL Letters and 🗸 in appropriate places

or existing Depositor, the information	•	Customer ID:				
ustomer's Details (as per KYC docu	,	(If existing Investors)		FAN (*Date of Birth
KYC No						Date of Birth
ame						D D M M Y Y
ather Name						
other Name						
pouse Name (If Married)						
ommunication Address:						Paste latest passport size photograph with signature
						(DO NOT STAPLE)
						IGNORE if already submitted earlier
ity						odbinitiod odnior
ountry						
Nationality	*Citizenship	·			— L	
Permanent Address:						
						* Marital Status:
ity	State		*Pin			
ountry						☐ Married ☐ Unmarried☐ Others
obile No						
ields are Mandatory	# Mandatory for E-	Receipt ^If investm	ent amount	<= Rs.50,000)/- & Pan n	ot available
Occupation Type: Salaried	☐ Professional ☐ Se	If Employed				
— □ Student	☐ Housewife ☐ Re	· ·	☐ Other (F	Please specify	'	
f Self Employed:	☐ Professionals ☐ Se	rvice Provider		ure 🔲 Tra		
lature of Business: Jewellers/Bullio		ock Broker	-			
-				riease specify		
Please tick () If the following is applicable to y					<u> </u>	
Annual Income:	you Politically Exposed Person (F	PEP) Relative of PI	EP 🗖 Not	Applicable		
Annual Income: ☐ Upto Rs. 3 Lakhs ☐ Above Rs. 3	you Politically Exposed Person (F	PEP) Relative of PI	EP 🗖 Not	Applicable		
Annual Income: ☐ Upto Rs. 3 Lakhs ☐ Above Rs. 3 Source of Fund:	you ☐ Politically Exposed Person (F	PEP) Relative of Pl	EP Not A	Applicable Rs. 15 Lakhs	- 30 Lakhs	s ☐ Above Rs. 30 Lakh
Annual Income: Upto Rs. 3 Lakhs Above Rs. 3 Source of Fund: Salaried Business Income	you ☐ Politically Exposed Person (F	PEP) Relative of Pl	EP Not A	Applicable Rs. 15 Lakhs Please Speci	- 30 Lakhs fy)	s ☐ Above Rs. 30 Lakh
Annual Income: Upto Rs. 3 Lakhs Above Rs. 3 Source of Fund: Salaried Business Income	you ☐ Politically Exposed Person (F	PEP) Relative of Pl	Above F	Applicable Rs. 15 Lakhs Please Speci *Proof of	- 30 Lakhs fy) Address	s ☐ Above Rs. 30 Lakh
Annual Income: ☐ Upto Rs. 3 Lakhs ☐ Above Rs. 3 Source of Fund: ☐ Salaried ☐ Business Income ☐ A Proof of Identity (Self Attested)	you ☐ Politically Exposed Person (F	PEP) Relative of Pl 6 Lakhs - 15 Lakhs ne Sale of Asset Expiry	Above F Other (I	Applicable Rs. 15 Lakhs Please Speci *Proof of Aadl	- 30 Lakhs fy) Address	Above Rs. 30 Lakh G (Self Attested) Ed by UIDAI Expiry Da
Annual Income: Upto Rs. 3 Lakhs Above Rs. 3 Source of Fund: Salaried Business Income Adhaar issued by UIDAI	you ☐ Politically Exposed Person (F	PEP) Relative of Pl 6 Lakhs - 15 Lakhs ne Sale of Asset Expiry	Above F	Applicable Rs. 15 Lakhs Please Speci *Proof of Aadl Pass Drivi	- 30 Lakhs fy) Address naar issue sport ng Licenc	Above Rs. 30 Lakh G (Self Attested) Ed by UIDAI Expiry Da
Annual Income: Upto Rs. 3 Lakhs Above Rs. 3 Source of Fund: Salaried Business Income Adhaar issued by UIDAI Passport	you ☐ Politically Exposed Person (F	PEP) Relative of Pl 6 Lakhs - 15 Lakhs ne Sale of Asset Expiry	Above F Other (I	Applicable Rs. 15 Lakhs Please Speci Proof of Aadl Pass Drivi Vote	- 30 Lakhs fy) Address naar issue sport ng Licenc	Above Rs. 30 Lake G (Self Attested) Ed by UIDAI Expiry Date G (Self Attested)
Annual Income: Upto Rs. 3 Lakhs Above Rs. 3 Source of Fund: Salaried Business Income Aadhaar issued by UIDAI Passport Driving Licence	you	PEP) Relative of Pl 6 Lakhs - 15 Lakhs ne Sale of Asset Expiry	Above F Other (I	Applicable Rs. 15 Lakhs Please Speci Proof of Aadl Pass Drivi Vote	- 30 Lakhs fy) Address naar issue sport ng Licenc	Above Rs. 30 Lakh (Self Attested) Ed by UIDAI Expiry Da
Passport Driving Licence Voter ID Card Others: Additional Documents Required for NRI	you Politically Exposed Person (F Lakhs - 6 Lakhs Above Rs. Agriculture Investment Incom	PEP) Relative of Pl 6 Lakhs - 15 Lakhs ne Sale of Asset Expiry	Above F Other (I	Applicable Rs. 15 Lakhs Please Speci Proof of Aadl Pass Drivi Vote	- 30 Lakhs fy) Address naar issue sport ng Licenc	Above Rs. 30 Lake G (Self Attested) Ed by UIDAI Expiry Date G (Self Attested)
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DTAA UNDERTAKING

From,	Date:
To,	
The Manager (Deposits)	
Shriram Finance Limited	
Dear Sir, Re: Receipt NoFoli	io No/ PAN
II am/will be Indian Income Tax Act 1961 for the financial	_
I hereby declare that the interest earned (place/country). Hen avoidance agreement (DTAA)	d on the above deposits is taxable at ce, tax can be deducted as per double tax
I undertake to promptly inform the company facts given above	in writing should there be any change in the
I also undertake to provide a fresh declaration financial year. I confirm that, in the event of declaration every year, the company has the lin the Indian Income Tax 1961 without extra Avoidance of Double Taxation. In such case from the Income Tax Department and the commanner	my failure or delay in submitting the fresh iberty to apply the income tax rate provided tending the benefits of the Agreement for es, I shall claim the refund, if any, directly
Yours Truly,	
(Signature of the First Applicant / Depositor)	



Annexure VI

NO PE CERTIFICATE

To,	Date
< <nam< th=""><th>ne of Remitter Company>></th></nam<>	ne of Remitter Company>>
< <add:< th=""><th>ress>></th></add:<>	ress>>
Re:	Declaration
1.	We hereby declare and confirm that we are a resident of < <country of="" residence="">> and non-resident in India.</country>
2.	We confirm that we are in the business of and the income from the same is covered under Articleof the India-< <name country="" of="" residence="">> Tax Treaty.</name>
3.	We further confirm that we neither have nor foresee to have any Permanent Establishment (including any fixed base) or any business connection or significant economic presence or any property or any asset or any source of income in India as defined under the [Indian] Income Tax Act, 1961 and India-< <name country="" of="" residence="">> Tax Treaty during the Financial Year 2022-23. In the event of us having a PE or fixed base or business connection in India, we acknowledge our obligation to inform you forthwith with necessary details.</name>
4.	We confirm that we are a 'person' as covered under Article 3 of the Double Taxation Avoidance Agreement entered between India and<
5.	We confirm that we are a Resident of << Name of the Country>> within the meaning of Article 4 of the India << Name of the Country>> Tax Treaty. We hereby furnish a copy of Tax Residency Certificate ('TRC') [dated, Taxpayer Identification Number:] issued by the << Relevant tax authority>> confirming the same.
6.	We are the beneficial owner of the amounts received/ receivable by us under the relevant Agreement / Contract / Order.
7.	We hereby declare that the transaction/ arrangement/ investments made by us is not covered under the law relating to impermissible avoidance arrangement as per Income-tax Act, 196
8.	We hereby certify that the declarations made above are true and bona fide. In case there is any change to any of the confirmations provided, we shall inform you immediately.
9.	Our Taxpayer Identification Number is
10.	. We confirm that our Permanent Account Number in India is
11.	Our e-mail id is and contact number is
12.	. We hereby certify that the declarations made above are correct, complete or truly stated. We confirm that any loss/ tax cost (including interest and penalty) arising to < <name company="" of="" remitter="">> due to incorrect / false declaration will be borne by/ indemnified by us.</name>
13.	. In case there is any change of facts, we will inform you immediately.
The dec	claration is valid for the period to
	Authorized Signatory

NON- RESIDENT UNDERTAKING CUM FATCA / CRS DECLARATION

T-								
To,								
Shriram Finance Limited								
deposits withou	t the rights o	f repatriation/a	agreed to permit	Shriram Finance Limited to accept me/us to invest an amount of).				
I/We				son/daughter /wife of				
	residing at			son/daughter /wife of				
Do hereby agree and undertake that I/we shall not at any time seek repatriation of the principal deposits invested or of the interest income earned thereon. This undertaking will also be binding on my /our heirs, executors, successors and assignees and they will not be entitled to seek repatriation of any capital so invested by me/us or any interest income earned thereon.								
We further undertake that The amount deposited with Shriram Finance Limited represent amount transferred from NRO account Further this amount does not represent inward remittance from overseas to NRO account or transfer of fund from NRE/FCNR(B) account to NRO account.								
FATCA / CRS D	etails for individ	lual Applicants	(mandatory for all a	applicants)				
Applicant/s	Place / City of Birth	Country of Birth	Country of current residence	Country of citizenship / nationality				
First applicant				India USA others				
Second applicant				India USA others				
Third applicant				India USA others				
If 'yes', Please fi purpose	ll below details f	for all countries	(other than India) i	untry outside India? Yes No no hand which you are a resident for tax in the respective countries				

Applicant/s	Country tax reside	of Num	Tax Identification Number or functional equivalent*		Identification type (TIN or other, Please specify)		If TIN is not available, Please ti- the reason A,B or C (as define below)	
First applicant						F	Reason A B C	
Second applicant						F	Reason A B C	_
Third applicant						F	Reason A B C	
number to its resi	dents TIN requirequire the	red (Selec TIN to be	t this ONL collected)	Y if		the	ot issue Tax Identification respective country of tax	
Applicant/s		Residentia	l Address	Reg	gistered Address		Business Address	
First application								
Second applicant								
Third applicant								
financial/reporting reside in. I/We shave under the law the event of a december of the event of the event of a december of the event	g obligationall be sole ws of such efault on restic regula	n for me/u ly respons country/ie ny/our par tors/ tax a	s under the sible for under sand shall art in fulfilli uthorities the	laws dertal not h ng the Co	s of the country of water and fulfilling a cold the company liance he said obligations. The opening may also be	hiony ble I/	create legal, tax or other ch I/We hold citizenship or obligations that I/We may under any circumstance in We agree that, as may be quired to report, reportable	
Place:					Signatur	e(s))	
Date:			1.					
			2.					
			3.					
					Signatures of non-res	side	ent investor/s	