						Applicatio	n No:
SHRIBAM			Business Associate Name : SURE FINSREV				
c c	Shriram Finance Limited			Business	Associate Code :	345173	
(Formerly kno	wers, Plot No. 14A, So	ort Finance	e Company Limited)	indv.	Affiliate Business Associate :		
Chennai - 600 Admin Office: 6th	0 032. Ph: 044 485 24 Floor (level 2), Building	666 www.s No Q2, Aurur	shriramfinance in ım Q Parć, Gen 4/1, TT	Ċ,	Branch		
· ·	load, Ghansoli, Navi Mur						TUTIONS & CORPORATES)
		•		-		places, only with black o	
			باد				
Payment Details						24 30 36	
							Date :
						*Deposit Type :Fres	
*Type of Receipt		* Maturi	ity Instruction	*Cate	gory	*STATUS	*Scheme
Physical Receipt		"Auto Ref		Member of	Public	Partnership Firm	Cumulative
*Form 15G submitted	(For Trust only)	Amount	only Principal	Shareholde	r 🗌	Corporate	Monthly interest Quarterly interest
Yes No			Principal with Amount			Sole Proprietorship	Half-Yearly interest
(if No, TDS will be de	ducted)					Others	Yearly interest
Company Identificatio	n No: / Registratior	No.:			Cu	stomer ID: (if existing inv	estor)
CYKC No. (if any)							
Name of Entity							
Registered Address_							
City	c	State			* Pin Code		_ Country
onty							_ country
* Date of Incorporation	n//	*P	PAN				
#Email ID:					*Mobile	No.	
	De	tails of B	Bank Account (C	ancelled che	eque leaf to	be submitted)	
*Bank Account No					*Bank Nar	me	
*MICR Code					*Branch _		
*IFSC Code					*Account	: Saving C	urrent
							e first name depositor mentioned in Ider Section 194A of the Income Tax,
1961. I/We hereby agree to	abide by the attached t	erms and co	onditions governing t	ne deposit.			
deposit with the company a	t my/our own risk and v	olition.			. ,	. ,	sideration. I/We/am/are making the
							at the amount kept in the deposit is fany contravention or evasion of the
							time to time. I/We shall provide any er affirm that the detail provided by
me/us is/are true in all res messaging service (SMS), W				Shriram Finan	ce Limited to a	contact me/us, in person, by p	ost, telephone, e-mail, using short
My personal / KYC details may I hereby consent to receiving i	nformation from Central	KYC Registry t			mber/email addı	ress.	
I hereby consent to download I/We confirm that the compan	y has explained & provide	ed me/us the	e above information/Ter	ms & conditions			
Signature of the Authorised signatories / Trustee(s) HUF / Sole Proprietorship with Name and PAN details							
Name of Auth	orised Signatory				PAN		Signature
1							
2							
2							
3							
* Details are manda	tory # Detai	ls mandat	tory for E-Receip	t			
For office use only							
	tory # Detai		tory for E-Receip Cert date		cked By	Authenticated by	Authentication date

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

	our Customer (KYC) / ase fill the information i			
The information is sought under Prevention of M For existing Depositor, the information furnishe				
Customer's Details (as per KYC documents)		ner ID:	*PAN (^Form	n 60)
CKYC No	· · · · · · · · · · · · · · · · · · ·	- *Gender : M F	Others	*Date of Birth
*Name				D D M M Y Y
*Father Name				
*Mother Name				
Spouse Name (If Married)				Paste latest passport size
*Communication Address:				photograph with signature
				(DO NOT STAPLE)
	Chata	*Di-		IGNORE if already submitted earlier
City				
Country				
*Nationality	*Citizenship			
*Permanent Address:				
City	State	*Din		* Marital Status:
		FIII		Married Unmarried
Country				□ Others
*Mobile No * Fields are Mandatory	# Mandatory for E-Receipt			Pan not available
□ □ Student □ Ho	itically Exposed Person (PEP)	☐ Other vider ☐ Agricu r ☐ Other Relative of PEP ☐ No - 15 Lakhs ☐ Above Cale of Asset ☐ Other Expiry Date 	Iture Trader (Please specifyt Applicable Rs. 15 Lakhs - 30 (Please Specify) Proof of Add Aadhaar Passport Driving L Voter ID 0	iress (Self Attested) issued by UIDAL Expiry Date // icence//
* Passport with valid visa page self attested * DTAA Declaration * NRI Undertaking cum FATCA / CRS declaration Form Place : For Office Use Only Documents Received Certified Cop KYC VERIFICATI Emp. Name :	*Date :/ ies ON CARRIED OUT BY	J	Chec	ked by
Emp. Code :			. 📙	
Designation :			Code :	
Date :			-	
Employee signature				



Annexure I

DECLARATION BY KARTA & CO PARCENERS OF HUF

То

Shriram Finance Limited

Dear Sir,

- 1. (Name of Karta) hereby declare that I'm the karta of the. (Name of HUF) and following persons are Co-Parceners of this HUF.
- **2.** We all the below mentioned coparceners declare that we are the only members of Joint Hindu Undivided Family named.....
- **3.** We further state that _______ is the Karta of the HUF and is authorized to invest in the name of HUF and to sign all forms and documents for and on behalf of HUF.
- 4. We undertake to inform you any change in the constitution of HUF by any reason including due to any addition of members or on account death of any members of HUF.

Details of our HUF and all its Co parceners are stated as under

Yours faithfully

(Karta of the HUF) HUF Stamp to be affixed

List of Co- Parceners

Name	DOB	Relationship with	Signature
		karta	

To be signed by all members including female members



Annexure II

Trust Declaration

To,

Date _ _ / _ _ / _ _ _ _

Shriram Finance Ltd. (Formerly known as Shriram Transport Finance Co. Ltd)

We hereby declare / certify that:

- 1. We do not have valid registration / tax exemption under Section 12A of Income Tax Act, 1961 or/and do not offer special exemption under Section 80G of the Income Tax Act, 1961
- 2. We have Valid Tax Exemption Certificate towards Investments in your Company for the Financial Year...... We are attaching (if opted, Tax Exemption Certificate submission is mandatory) the same for your perusal and reference. We request you to deduct tax as per rate stipulated by Income Tax authorities (Lower or Higher TDS than the current normal TDS rate.)
- 3. Any investment made by us in the Deposits of Shriram Finance Limited (SFL) is not an eligible investment under Section 11 (5) and 13 (1) (d) of the Income Tax Act in the case of a trust for charitable or religious purposes.
- 4. In case of Pre-closure of the FD in future, the interest shall be paid as per the terms and conditions of the FD Application form.
- 5. Form 15G provided by us will not entitle the trust to the benefit of sub _ section (1A) of Section 197A if sub section (1B) of Section 197A is applicable.

Authorized Signatory / ies with Trust Seal:

Annexure IV

Sample Board Resolution

Certified copy of an extract from the Minutes of meeting of Govern	ning Body/Managing Commit	tee/Board Management/
Board of Trustees of		duly convened and at
which a proper quoram was present, held at	(place) on	(date).

RESOLVED

a)	That a Fixed deposit account/	(mention scheme) be opened in
	the name of	with Shriram Finance Limited
	Branch(City) by depositing an an	nount of Rs(Rupees only) for a period
	of months/years and/or by depositing such	other amounts as may be available for such period (s) as
	may be required from time to time and that all/any	of the following office bearers be authorized to
	receive the amount of the said Fixed deposit Account	(\$).
1.	(Men	tion name and designation of office bearers)
2.	(Men	tion name and designation of office bearers)
3.	(Men	tion name and designation of office bearers)
4.	(Men	tion name and designation of office bearers)

b) RESOLVED FURTHER THAT, the Resolution be communicated to Shriram Finance Limited and shall remain remain inform until notice in writing of their withdrawal or cancellation is given to Shriram Finance Limited by the Company under the signatures of any two of the existing Directors/ officers/ Members/Trustees and accepted by Shriram Finance Limited.

Certified True Copy

For _____

Signatures

Place:_____.

Date:_____.



Annexure III

DECLARATION OF BENEFICIAL OWNERSHIP

(Applicable to Company (Other than the company listed on a company), partnership firm, unincorporated association or bo	
Name of the Legal Entity:	
Registered Address:	
Type of Entity / Legal Constitution (Please tick the correct	box)

- □ Company
- Association of Persons (AOP)
- Trust
- □ Others (Club, University, Institution etc.)
- □ Partnership Firm
- □ Body of Individuals (BOI)
- □ Society

The Legal Entity as stated above hereby confirms and declares that on the below date that following natural person(s) are the Beneficial Owners.

Please fill details of Beneficial Owner holding more than 10% controlling interest (in case of company), 10% or more in case of trust or more than 15% controlling interest (in case of other entities), if Beneficial Owner is not identifiable or there are no natural person(s), who are Beneficial Owners, please fill details of Senior Managing Official.

(Please attach self-attested proof of KYC documents of Beneficial Owner/s or Senior Managing Official)

Full Name of Beneficial owner / Senior	
Managing Official:	
Controlling ownership Interest (%):	
Gender:	Male Female
Date of Birth:	
Address:	
PIN Code:	
PAN:	
Aadhaar Number.:	
KYC Documents:	
-Identity Proof:	□ Voter ID; □ Passport; □ Driving License; □ Aadhaar; □ NPR Letter
-Address Proof:	□ Voter ID; □ Passport; □ Driving License; □ Aadhaar; □ NPR Letter
Director Identification Number (if applicable):	
Mobile Number(s):	
Residential status:	Resident Indian Individual;
	Foreign/Non-Resident Indian Individual
Relationship:	□ Shareholder; □ Partner; □ Trustee; □ Promoter Director; □
	Nominee Director; Independent Director; Other Director;
	Chairman/ Member (Society); Member (AoP); Others



Male Female
□ Voter ID; □ Passport; □ Driving License; □ Aadhaar; □ NPR Letter
□ Voter ID; □ Passport; □ Driving License; □ Aadhaar; □ NPR Letter
Resident Indian Individual;
Foreign/Non-Resident Indian Individual
□ Shareholder; □ Partner; □ Trustee; □ Promoter Director; □
Nominee Director; D Independent Director; D Other Director; D
Chairman/ Member (Society); Member (AoP); Others

In case of more than two beneficial owners, please provide their details as per for the above format

We certify that the facts stated above are true and correct. We undertake and agree that we will notify **"Shriram Finance Limited"** of any changes in the controlling persons, person exercising control or having controlling ownership interest in the Company, partnership firm, unincorporated association or body of individuals and trusts, as declared in the table above, without any delay.

For and on behalf of ------ [name of Company, partnership firm, unincorporated association or body of individuals and trusts]:

Signature of the Authorized Official*: Full Name of the Authorized official: Designation / Position:

Date:

Place:

(*The declaration should be signed by Authorized Signatories in case of Company, an active/designated partner in case of Partnership Firm/LLP, a trustee in case of Trust, a senior member in case of AOP, Society, Club and member of the Managing Committee in case of University and Institution)

For Branch use only

We certify that the beneficial owner(s) of the said Legal Entity has/have been determined on the basis of declaration made and documents submitted by the abovementioned Company/Partnership firm/Unincorporated association/Body of individuals/Trusts and the details furnished above have been verified from documents which are submitted or information wherever available, in public domain.

Signature of the Employee: Employee Name: Employee Code: Date:



As per RBI KYC Master Direction, Beneficial Owner (BO) is defined as:

a. Where the customer is a **Company**, the beneficial owner is the natural person(s), who, whether acting alone or together, or through one or more juridical persons, has/have a controlling ownership interest or who exercise control through other means.

Explanation- For the purpose of this sub-clause-

"Controlling ownership interest" means ownership of/entitlement to more than 10 per cent of the shares or capital or profits of the company.

"Control" shall include the right to appoint majority of the directors or to control the management or policy decisions including by virtue of their shareholding or management rights or shareholder's agreements or voting agreements.

b. Where the customer is a **Partnership firm**, the beneficial owner is the natural person(s), who, whether acting alone or together, or through one or more juridical person, has/have ownership of/entitlement to more than 15 per cent of capital or profits of the partnership.

c. Where the customer is an **Unincorporated association or Body of individuals**, the beneficial owner is the natural person(s), who, whether acting alone or together, or through one or more juridical person, has/have ownership of/entitlement to more than 15 per cent of the property or capital or profits of the unincorporated association or body of individuals.

Explanation: Term 'body of individuals' includes societies.

Where no natural person is identified under (a), (b) or (c) above, the beneficial owner is the relevant natural person who holds the position of senior managing official.

d. Where the customer is a **Trust**, the identification of beneficial owner(s) shall include identification of the author of the trust, the trustee, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.