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Is the	e entity in	nvol	ved		Fo	rei	on F	x c ł	ange	/		YES					ambling / YES Any other information [if applicable]																						
in / providing any of Services Foreign Exchange / Money Changer Services NO Lottery Se [e.g. casi												asino	s,		N	О	I	Lauı		Money ng / Pa		ning		NO	\mathbf{I}														
these	these services:														ates]	٦									\checkmark													
Entity Constitution Type Please tick as appropriate Partnership Firm HUF Priva. Trust Liquidator Limited Liabilit																			_						mpan				ciety ecify] A(OP/BO	ΟI						
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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/les in which the entity is a resident for tax purposes and the associated Tax ID number below														ber below.)																									
											ntif	tification Number										_										specify)							
*In case Tax Identification Number is not available, kindly provide its functional e												l eau	jivalent or Company Identification Number or Global Entity Identification Number																										
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or GIIN above and indicate your sponsor's name below											7 3																												
Direct reporting NFFE Name of sponsoring entity																																							
	(please t	ick a	s appro	pr	iate))																											\Box						
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1.	Is the Entity a publicly traded company(that is, a company whose shares are regularly traded on an established securities market)													\ L	Yes No (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange																								
2.	Is the En												omp	any		Yes No (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)																							
	(a compa establishe						eguu	arı	y ira	aea	on	an				Name of listed company Nature of relation: Subsidiary of the Listed Company or Controlled by a Listed Company															nv								
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3. Is the Entity an <i>active</i> NFE													7	es			N	0		Natu	re of	Bu	sines	s				_											
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4.	Is the E	ntity	a <i>pass</i>	siv	e Ni	FΕ	,									7	Yes No Nature of Business Cerms and Conditions																						
Towards compliance with tax information sharing laws, such as FATCA, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any tim subsequently. In certain circumstances we may be obliged to share information on your account with relevant tax authorities. If you have any questions about you tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. 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 sums from your account or close or suspend your account(s). 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. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010 Please.																																							
with the US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010. Pleas note that you may receive more than one request for information if you have multiple relationships. Therefore, it is important that you respond to our request, eve if you believe you have already supplied any previously requested information.																																							
Certification: I have understood the information requirements of this Form (read along with the Instructions & Definitions) and hereby confirm that the information provided by													ided by																										
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