

Change of Signature / Name Request Form for Individual



SUNDARAM MUTUAL
— Sundaram Finance Group —

1. Unit Holder Details :

Folio Number(s)			
Name of the sole/First Unit Holder: (Name as per PAN card)	FIRST	MIDDLE	LAST
Status of First / Sole Applicant [Please ✓]:	FIRST	MIDDLE	LAST
<input type="checkbox"/> Individual <input type="checkbox"/> Company <input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> Minor through guardian Body <input type="checkbox"/> Corporate <input type="checkbox"/> NRI-Non-Repatriable	<input type="checkbox"/> HUF <input type="checkbox"/> Trust <input type="checkbox"/> FII/Sub account of FII	<input type="checkbox"/> Partnership <input type="checkbox"/> Mutual Fund <input type="checkbox"/> QFI <input type="checkbox"/> Society/Club <input type="checkbox"/> Fund of Funds in India <input type="checkbox"/> Others (please specify).....

2. Request For [Please ✓]	Change of Signature	Change of Name Holder
Mandatory documents as per request	<input type="checkbox"/> Banker's attestation/letter of new signature (refer point number 6).	<input type="checkbox"/> Self Attested KYC Letter in new name. <input type="checkbox"/> Self Attested PAN card copy in new name. <input type="checkbox"/> Attested copy of Marriage certificate/Divorce Deed/Press Release. <input type="checkbox"/> Valid photo identity proof (for PAN exempt cases only). <input type="checkbox"/> FATCA / Additional KYC

Note: Please produce originals for verification, if copies are not attested by Notary/Gazetted Officers/Bank Managers/Indian Embassy/Consulate General. The Fund House and the RTA reserve a right to call the customer for any additional documents or in-person verification (refer point 6) and keeps this request pending.

3. Bank Account Details for verification	Date of Bank Account Opening
Bank Name Account No. MICR Code*	Bank Branch & City Account Type IFSC/RTGS Code*

*(9-digit number next to your cheque number)

(*11 character code printed on a cheque / passbook)

4. Old & New Names of unit holders and New Specimen Signatures:

I/we request Sundaram Mutual Fund (the fund) to update new name/s and/or signature/s and various records in the folio/s as per details mentioned above & below. I/we hereby agree that new name/s and/or signature/s will be valid and effective only after the changes are updated and a confirmation is received by me/us. After the new name/signature updation, any requests with old names/signatures will not be honoured by the fund.

First/Sole Applicant **Old Name** (Old name for records)

FIRST	MIDDLE	LAST
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First/Sole Applicant **New Name** (Name as per PAN card)

FIRST	MIDDLE	LAST	PAN*	DOB*	D	D	M	M	Y	Y	Y	Y
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Second Applicant **Old Name** (Old name for records)

FIRST	MIDDLE	LAST
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Second Applicant **New Name** (Name as per PAN card)

FIRST	MIDDLE	LAST	PAN*	DOB*	D	D	M	M	Y	Y	Y	Y
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Third Applicant **Old Name** (Old name for records)

FIRST	MIDDLE	LAST
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Third Applicant **New Name** (Name as per PAN card)

FIRST	MIDDLE	LAST	PAN*	DOB*	D	D	M	M	Y	Y	Y	Y
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New Specimen Signature/s	First/Sole Applicant	Second Applicant	Thire Applicant
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5 ☐ Bankers Attestation of Customer's Signature & Bank Account Details

Name of the Banker: Designation: Employee Code:	Signature with Bank's Seal:
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6 IPV Section (For office Use) (In case the Fund House/R&T feels the need for IPV as an additional verification procedure)

<input type="checkbox"/> Verification with PAN Card/Photo Identification Proof <input type="checkbox"/> Signed in official's presence <input type="checkbox"/> Sign matches with signature on Bank attestation	Name:..... Designation:..... Organization:..... Employee No:..... Location:..... Date of IPV:.....	Official signature, with Company Seal
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Request Date.....

Place.....

Acknowledgement (To be filled in by the investor) Change of Signature/Name	Sundaram Mutual Fund
Received, subject to verification, request for change of Signature/Name from:.....	
Folio No: (1) (2)..... (3).....	Time Stamp & Signature

Contact No. 1860 425 7237 (India) +91 40 2345 2215 (NRI) • E-mail: customerservices@sundarammutual.com (NRI): nriseservices@sundarammutual.com

KYC details (Mandatory) (refer instruction 3) ☐ Individual ☐ Non-Individual (Please attach mandatory FATCA-CRS Annexure for Entities including UBO)

Status of First/Sole Applicant [Please (✓)]
☐ Listed Company
☐ Unlisted Company
☐ Individual
☐ Minor through guardian
☐ HUF
☐ Partnership
☐ Society/Club
☐ Company
☐ Body Corporate
☐ Trust
☐ Mutual Fund
☐ FPI
☐ NRI-Repatriable
☐ NRI-Non-Repatriable
☐ FI/ Sub account of FI
☐ Fund of Funds in India
☐ QFI
☐ Others..... (please specify)

Occupation Details [Please (✓)]
(To be filled only if the applicant is an individual)
First Applicant
☐ Private Sector Service ☐ Public Sector Service
☐ Government Service ☐ Business
☐ Professional ☐ Agriculturist
☐ Retired ☐ Housewife
☐ Student ☐ Forex Dealer
☐ Others..... (please specify)
Second Applicant
☐ Private Sector Service ☐ Public Sector Service
☐ Government Service ☐ Business
☐ Professional ☐ Agriculturist
☐ Retired ☐ Housewife
☐ Student ☐ Forex Dealer
☐ Others..... (please specify)
Third Applicant
☐ Private Sector Service ☐ Public Sector Service
☐ Government Service ☐ Business
☐ Professional ☐ Agriculturist
☐ Retired ☐ Housewife
☐ Student ☐ Forex Dealer
☐ Others..... (please specify)

Gross Annual Income (in ₹) [Please (✓)]
First Applicant
☐ Below 1 Lac ☐ 1-5 Lacs
☐ 5-10 Lacs ☐ 10-25 Lacs
☐ > 25 Lacs - 1 Crore ☐ > 1 Crore (or)
 Net-worth (Mandatory for non-individuals) ₹
 as on
 |D|D|M|Y|Y|Y|Y| (Not older than one year)
Second Applicant
☐ Below 1 Lac ☐ 1-5 Lacs
☐ 5-10 Lacs ☐ 10-25 Lacs
☐ > 25 Lacs - 1 Crore
☐ > 1 Crore (or) Net-worth.....
Third Applicant
☐ Below 1 Lac ☐ 1-5 Lacs
☐ 5-10 Lacs ☐ 10-25 Lacs
☐ > 25 Lacs - 1 Crore
☐ > 1 Crore (or) Net-worth.....

PEP Status
First Applicant
For Individuals [Please (✓)] Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)
☐ I am PEP
☐ I am related to PEP ☐ Not Applicable
For Non-Individuals providing any of the below mentioned services [Please (✓)]
☐ Foreign Exchange/Money Changer Services
☐ Gaming/Gambling/Lottery/Casino Services
☐ Money Lending/Pawning
☐ None of the above
Second Applicant
(To be filled only if the applicant is an individual)
☐ I am PEP
☐ I am related to PEP
☐ Not Applicable
Third Applicant
(To be filled only if the applicant is an individual)
☐ I am PEP
☐ I am related to PEP
☐ Not Applicable

FATCA-CRS DETAILS **For Individuals & HUF (Mandatory)** **Non Individual investors should mandatorily fill separate FATCA-CRS Annexure**

The below information is required for all applicant(s) / guardian / PoA holder

Category	First Applicant/Guardian	Second Applicant	Third Applicant
1. Are you a Tax Resident of Country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is your Country of Birth/ citizenship other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is your Residence address / Mailing address / Telephone No. other than in India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Is the PoA holder / person to whom signatory authority is given, covered under any of the categories 1, 2 or 3 above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered YES to any of above, please provide the below details

Country of Tax Residence			
Nationality			
Tax Identification Number\$ or Reason for not providing TIN			
Identification Type (TIN or Other, please specify)			
Residence address for tax purposes (include City, State, Country & Pin code)			
Address Type	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
City of birth			
Country of birth			




\$ In case any of applicant being resident/ tax payer in more than one country, provide tax identification number for each such country separately.

FATCA-CRS Instructions

Details under FATCA-CRS/Foreign Tax Laws: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income Tax Rules 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities/appointed agencies. If you have any questions about your 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, 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 you are a US citizen or resident or greencard holder, please include United States in the Country of Tax Residence field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation with supporting documents and attach this to the form.

 Signature of First / Sole Applicant / Guardian	 Signature of Second Applicant	 Signature of Third Applicant
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