

Customer Declaration (Sole Proprietorship)

Important Note

- All the fields are mandatory
- Fill the form in **CAPITAL** letters and tick where applicable
- Sign in **BLACK** ink only
- Please paste the photograph at the space provided and sign across (signature 1/4th on the photograph and 3/4th on the form)
- Each page is to be signed by at least 1 authorised signatory with entity stamp
- Authenticate any overwriting/ cancellations with full signatures
- Please provide respective **proof of address** for all addresses and **proof of identity** for all individuals as mentioned in Annexure 1
- Please provide **two documents in the name of the sole proprietorship** entity as mentioned in the Annexure
- Provide separate proof of identity wherever Former or Other name is mentioned
- Please provide correct PAN with PAN Card/ Allotment Letter copy as proof. As per the new section 206AA in the Income-tax Act, 1961 it has become mandatory for payers to withhold tax at a higher rate if the payee does not provide their Permanent Account Number (PAN). This provision is applicable from 1st April 2010
- Please note that the original documents would be required to be sighted by the Bank employee for verification purpose prior to accepting any photo copies of the same

Customer ID:

Account Number:

A. Business Details

Name of the Entity:

Country and date of formation/ registration:

Permanent Account Number (PAN): *(Please tick whichever is applicable)*

Our/ My PAN is

I/ We hereby declare that we are not assessed for Income Tax, as our income is below the maximum amount which is not chargeable to Income Tax, and accordingly the provisions pertaining to PAN are not applicable in our case. *(Please provide PAN Card copy or PAN allotment letter as proof).*

Our income is exempted from tax deduction at source under the provisions of Income-tax Act, 1961. *(Please provide details along with supporting documents and PAN as applicable).*

As per the Regulatory requirement, it is mandatory to provide the PAN/ Form 60 by all the applicants during opening of a Bank account. In case the Form 60 mentions reason as 'applied for PAN', then the applicant to provide a copy of PAN Card within [30] days of making such an application to the Income Tax Authorities. Failing which the Bank reserves the right to reject the account opening/ block/ close the relationship without any further notice.

Line of Business:

Nature of Product/ Services Offered:

Name of document submitted in name of entity (1):

Name of document submitted in name of entity (2):

B. Contact Information

Registered Address:

Name of the Contact Person:

Tel.: Mobile: Fax:

E-mail:

Address:

City:

State: Pin: Country:

Business Address:

Name of the Contact Person:

Tel.: Mobile: Fax:

E-mail:

Address:

City:

State: Pin: Country:

Correspondence Address (if different from Business Address):

Name of the Contact Person:

Tel.: Mobile: Fax:

E-mail:

Address:

City:

State: Pin: Country:

C. Authorised Signatories, Sole Proprietor and Delegate(s)

Please provide details of Sole Proprietor and Authorised Signatories/Delegate(s) for all your accounts. For each Authorised Signatory/Delegate, please provide us (a) latest photograph, (b) self-attested photocopy of proof of photo-identity, (c) self-attested photocopy of proof of address and (d) self-attested photocopy of power of attorney (if applicable) as per the list of approved documents.

If you wish to add or delete Authorised Signatories/Delegate(s) or if their details have changed, please update it in our bank records by providing us a separate letter/mandate/resolution (as applicable).

Sole Proprietor details (Please note that these details are mandatory for Sole Proprietors)

Full name of Sole Proprietor:

'Former' or 'Other' Name (if any):

Nationality: Date of Birth:

Country of Residence: Occupation:

Telephone/ Mobile Number:

Residential Address:

Pin:

Permanent Address:

(if different from residential address)

Pin:

Please affix
signatory's
photograph and
sign across

Multiple Nationality (If Yes additional nationalities can be captured below) Yes No

Nationality 2:

Nationality 3:

Country of birth:

Previous Address (if resident at current address for less than 3 years):

At current address since:

List of Authorised Signatories

1. Full name of Authorised signatory:

'Former' or 'Other' Name (if any):

Nationality:

Date of Birth:

Country of Residence:

Occupation:

Telephone/ Mobile Number:

Residential Address:

Pin:

Permanent Address:

(if different from residential address)

Pin:

Please affix signatory's photograph and sign across

2. Full name of Authorised signatory:

'Former' or 'Other' Name (if any):

Nationality:

Date of Birth:

Country of Residence:

Occupation:

Telephone/ Mobile Number:

Residential Address:

Pin:

Permanent Address:

(if different from residential address)

Pin:

Please affix signatory's photograph and sign across

List of Delegates

1. Full name:

'Former' or 'Other' Name (if any):

Nationality: Date of Birth:

Country of Residence: Occupation:

Telephone/ Mobile Number:

Residential Address:

 Pin:

Permanent Address:
(if different from residential address)

 Pin:

Please affix signatory's photograph and sign across

2. Full name:

'Former' or 'Other' Name (if any):

Nationality: Date of Birth:

Country of Residence: Occupation:

Telephone/ Mobile Number:

Residential Address:

 Pin:

Permanent Address:
(if different from residential address)

 Pin:

Please affix signatory's photograph and sign across

Customers are advised to inform the bank, in writing and along with a valid proof of address, of any change in registered, correspondence or business address within two weeks of such a change taking place.

Signature

D. Declaration

I/ We also hereby agree to the contents of this declaration (including the photographs of the Authorised Signatories/ Delegates) and that confirm all the details provided therein are true and correct, which the Bank is entitled to verify directly or through any third party agent. I/We also agree that, if any such declarations made by me/ us are found to be incorrect, the Bank is entitled to terminate the account relationship.

I/ We confirm that I/ we am/ are complying with the Foreign Exchange Management Act of 1999 (FEMA) and the rules and regulations made there under and any amendments thereto. I/ We understand and acknowledge that any violation or non-observance of the undertakings given herein will be subject to action under FEMA and FCRA.

E. Consent Clause

1. I/ We, declare that the information and data furnished by me/ us to the Bank is true and correct.
2. I/ We, undertake that:
 - a. the CIBIL and/ or any other agency so authorised may use, process the said information and data disclosed by the Bank; and
 - b. the CIBIL and/ or any other agency so authorised may furnish for consideration, the processed information and data of products thereof prepared by them, to banks/financial institutions and other credit grantors, as may be specified by the Reserve Bank in this behalf.

3. I/ We authorise the Bank

- a. to submit or make available to any member(s) of the HSBC Group^v, HSBC Group means HSBC Holdings plc, its subsidiaries, associated and affiliated companies or any designated agent of theirs, any application(s) made by me/ us to any member(s) of the HSBC Group for availing financial product(s) and services, together with any related documentation or information; and
- b. to obtain and to give or make available to any member(s) of the HSBC Group, or their agents, credit information about me/ us (including credit scores and reports from credit reference agencies) for the purpose of assessing my/ our qualification for the requested financial product(s), and in addition to obtain, give or make available to any member(s) of the HSBC Group credit scores and reports in connection with any update, renewal, extension, collection or review of any of the accounts opened pursuant to my/ our application(s).
- c. in the course of managing our relationship with you and where necessary to comply with our money laundering prevention obligations, to record, obtain and to give or make available to any member(s) of the HSBC Group, or their agents, information about your directors and employees.
- d. unless and until I/we direct otherwise, to update information about me/us as provided hereinabove and/or in any such application(s) or related documentation, or obtained in the course of or for the purpose of making any application for financial products and services (including but not limited to any credit information), onto a database which may be accessed by the member(s) of the HSBC Group.

^v HSBC Group means HSBC Holdings plc, its subsidiaries, associated and affiliated companies.

I/ We agree that the Bank should consider only the above signatories as authorised for the account.

I/ We agree that the Bank will not be liable if any cheque/ ECS/ transactions/ standing instructions, which are signed by any person other than the above mentioned signatories, are presented hereafter, even though dated prior to this date.

I/ We declare that the information given herein by me/us for each of the account(s) and customer number is true and correct, which the Bank is entitled to verify directly or through any third party agent. I/ We also agree that, if any such declarations made by me/ us are found to be incorrect, the Bank is not bound to pay any interest on the account(s) opened by me/ us and is entitled to terminate the relationship.

Signature of Sole Proprietor with rubber stamp of entity

Date: _____

Place: _____

For Office use only:

Name: _____

PSID: _____

Date: _____

Place: _____

Signature: _____