

Foreign Account Tax Compliance Act (FATCA)/ Common Reporting Standard (CRS)/ C-KYC Declaration Form – For Individual only (including sole proprietors)

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

Registered & Corporate Office: SBI Life Insurance Co. Ltd. Natraj, M.V. Road & Western Express Highway Junction, Andheri (East), Mumbai - 400 069. IRDAI Registration No. 111. | Toll Free: 1800 267 9090 (Customer Service timing: 24X7) | Email: info@sbilife.co.in | Website: www.sbilife.co.in | CIN: L99999MH2000PLC129113. | Trade logo displayed above belongs to State Bank of India and is used by SBI Life under license.

Policy No.	<input style="width: 95%;" type="text"/>	C-KYC No.	<input style="width: 95%;" type="text"/>
Claimant Name	<input style="width: 95%;" type="text"/>		
Country of Birth	<input style="width: 80%;" type="text"/>	Place of Birth	<input style="width: 80%;" type="text"/>
		GSTIN	<input style="width: 80%;" type="text"/>
Residential Status:	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Foreign National <input type="checkbox"/> Person of Indian Origin		
Father's Name	<input style="width: 95%;" type="text"/>		Spouse's Name <input style="width: 95%;" type="text"/>

IDENTIFICATION PROOF:

<input type="checkbox"/> PAN / Voter ID Card/ NREGA Job Card (please tick appropriate option)	Identification No. _____
<input type="checkbox"/> Passport	Identification No. _____ Expiry Date _____
<input type="checkbox"/> Driving License	Identification No. _____ Expiry Date _____

Simplified Measure Account:

<input type="checkbox"/> ID card with photo issued by Central/ State govt dept, Statutory/ Regulatory authorities, PSUs, Scheduled Commercial Banks and Public Financial Institutions	Identification No. _____
<input type="checkbox"/> Letter issued by a gazetted officer with a duly attested copy	Identification No. _____

Address Proof: Passport Driving License Voter ID Card NREGA Job Card Simplified Measures Account

Select occupation: Service Business Other Document Type: _____

In case you have selected "Service" as your occupation, please specify the nature of your Organization: Private Sector Public Sector Government Sector

Are you a tax resident of any country other than India? Yes No

If yes, please provide details below:

Please indicate all countries in which you are resident for tax purposes and associated details)

SI No	Country/(ies) of Tax residency [#]	Tax Identification Number (TIN)/Functional equivalent number [*]	Identification Type (TIN or Other ^{*,} please specify)
1			
2			

[#]To also include United States of America (USA), where the individual is a citizen/ green card holder of USA. ^{*}In case such number is not available, kindly provide an explanation and attach it to this form.

Residence address/(es) for Tax purposes: (include City, State, Country & Pin code)

Address Type: Residential or Business Residential Business Registered Office

Contact details: Country code Telephone/ Mobile No

Certification - Under penalty of perjury, I certify that:

I am aware that Central Board of Direct Taxes ("CBDT") has notified Rules 114F to 114H as part of the Income-tax Rules, 1962, (read alongwith FATCA/CRS instructions given below) which require Indian financial institutions such as SBI Life to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our proposers/ accountholders.

I understand that SBI Life is relying on information provided in this form for the purpose of determining the status of the accountholder in compliance with FATCA/CRS. SBI Life is not able to offer any tax advice on FATCA or CRS or its impact on me.

I acknowledge my responsibility to seek advice from professional tax advisor for any tax questions. I agree to submit a new form within 30 days if any information or certification on this form changes or becomes incorrect.

I agree that as may be required by domestic regulators/tax authorities, SBI Life may be required to report, reportable details to CBDT or other authorities/agencies or may be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the policy/(ies) or any proceeds in relation thereto or even close or suspend my policy/(ies), as appropriate.

I hereby declare that the details furnished in this declaration are true and correct to the best of my knowledge and belief and I undertake to inform SBI Life of any changes there in, immediately. In case any of information furnished in the policy no. specified above and in this declaration is found to be false or untrue or misleading or misrepresenting, I am aware that I may be liable.

I hereby authorize SBI Life to consider details furnished in the policy no. specified above and in this declaration for the purpose of Central KYC Registry and to provide my details to CERSAI in the prescribed format. I further hereby consent to receiving information from Central KYC Registry through SMS/Email or registered mobile number/email address mentioned in the policy no. specified above.

I hereby authorize the Company to provide my/our details to banks, financial institutions and third party service providers that the Company may have tie-ups with, for verification of proposal details and for servicing of resulting policy.

Signature of Claimant

Date: _____

Place _____

FATCA/CRS Instruction Section :

In case Claimant has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, Claimant to provide relevant Curing Documents as mentioned below:

FATCA/CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/CRS indicia
	If Claimant does not agree to be Specified USA person/reportable person status
a. United States of America ("USA") place of birth	<ol style="list-style-type: none"> Self-certification (as stated above) that the Claimant is neither a citizen of USA nor a resident for tax purposes of USA; Non-USA passport or any non-USA government issued document evidencing nationality or citizenship (refer list below); AND Any one of the following documents: <ol style="list-style-type: none"> Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the Claimant does not have such a certificate despite renouncing USA citizenship; or Reason the Claimant did not obtain USA citizenship at birth
b. Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> Self-certification (as stated above) that the Claimant is neither a citizen of USA nor a resident for tax purposes of USA or any other foreign jurisdiction; AND Documentary evidence (refer list below)
c. Telephone number in a country other than India (and no telephone number in India provided)	<ol style="list-style-type: none"> Self-certification (as stated above) that the Claimant is neither a citizen of USA nor a resident for tax purposes of USA or any other foreign jurisdiction; AND Documentary evidence (refer list below)
d. Standing instructions to transfer funds to an account maintained in a country other than India	<ol style="list-style-type: none"> Self-certification (as stated above) that the Claimant is neither a citizen of USA nor a resident for tax purposes of USA or any other foreign jurisdiction; AND Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body**
- Valid identification issued by an authorized government body**(e.g.Passport,National Identity card, etc.)

**Government/ agency thereof or a municipality of the country or territory in which the Claimant claims to be a resident.