CUSTOMER INFORMATION FORM

For Resident Individuals (To be filled by applicant only)

NOTE: 1. Please fill the form in BLOCK LETTERS and in BLACK INK only. 3. This is a MACHINE READABLE form and will pass through a SCANNER.			All fields marked * are mandatory. Account facility shall be at sole discretion of Deutsche Bank AG, India.					
Date:	Customer I			Branch		Work Item No		
Personal Details		Fc	or Bank use On	ly			For Bank use	e Only
*Title Mr	Ms Mrs	Master	Miss	Others (Please s	specify)			
*Name	100	Widots.	Niioc	Outo.0 (1 .5252	,pec.iry)	TTTT		
*Date of Birth		*Gender	M F	Т	*Nationalit	tv		
*Country of Citizenship		&			*Town/City of			
*Country of Birth				*US TIN/SSN			*US Resident	Υ
*Mother's Maiden Name				Father / Spouse	Name		W9	Υ
Passport No.			*F	PAN / Acknowledger	ment No.			
Passport Issuing Country			Date o	f Issue	Da	ate of Expiry		
Driving License No.			Date o	f Issue	Da	ate of Expiry		
Minor Yes (please provide G	uardian Details)	No	Senior	Citizen Yes (Pl	ease attach age proof)	No		
Voter ID No.			Aadha	ar Card				
KYC No.				* Proof of Identity	у			
Contact Details								
Current Residence Address								
*Address Line - 1								
*Address Line - 2								
*City			*PI	N Code				
*State				Country				
Landline No.				ountry	Mobile No.			
E-mail					Fax No.			
Office Address *Address Line - 1								
*Address Line - 2								
*City			*D	N Code				
*State				Country				
Landline No.				Journal	Mobile No.			
E-mail					Fax No.			
Permanent Address (Only if it	t is different from th	e current reside	ence address)				
*Address Line - 1								
*Address Line - 2			40					
*City				IN Code				
*State			^ C	Country	Makita Na			
Landline No.	duran David	al a sa a a A al also a		er:	Mobile No.			
Preferred Communication Addre		idence Addre		ffice Address	Permanent Address	,		
Local / Communication Addre		,		N *Proof of Addre				
Guardian Details (In case of r	fillior, please subin	iit copies of ide	illiicalion and	address document ic	- '	Data of Diath		
Name of Parent/Guardian	A A A A A A A A A A A A A A A A A A A	D. Carret (Ondon (16			Date of Birth		
	ather Mother			s, please attach a co		ease specify)		
I shall represent the minor in all t			-				minor attains ma	goirty.
I shall fully indemnify the Bank a	gainst any claim o	t the above mi	nor for any w	rithdrawi/transaction r	nade by me in his/her	account.		
Introduction Details							Guardian Signat	ture
Introduction by existing Deuts	sche Bank AG, Ind	dia Account Ho	lder					
Customer Name					Cu	stomer ID		
Account No.		lo	onfirm that I	am an account holde	r with Deutsche Bank	AG, India for ove	er six months.	
I confirm that I personally know t	he applicant/s det	ailed herein for	more than s	ix months and confire	m his/her identity, occu	upation and addr	ess.	
Certification by Employer for	Staff Payroll Acco	unt						
This is to certify that Mr./Ms.	,			is working	with our organisation.	We certify that the	ne residential add	dress, (ai
office address where applicable)	provided above is	s/areas per our	records.			,		, (3.
				Signature Ve	erified By (Name)			
	(A. (I				erified By (Signature)			
(Introducing custormer Signatur seal on behalf of the Employer)		atory with comm	non	Employee ID				
, ,					-			
Location	Date			Date of A/c o	peneu			

Phone Banking Access Reque	est						
Phone Banking Access* Yes No *Note: Phone Banking access can be given to all individual customers except to accounts with Joint operations. Using Phone Banking services, you can have all your queries and requests addressed either through the Interactive Voice Response (IVR) service or through one of our phone banking officers 24 hours a day, 7 days a week.							
Communication with Customer							
Deutsche Bank AG, India ("Bank") reserves the right at its discretion to: i) e-mail the statement of account to your e-mail ID provided; ii) send account related service alerts through SMS & e-mail; iii) replace certain periodic paper statements with e-mail statements. You may choose to unsubscribe to this mode of communication by sending a request to the Bank at any time.							
*Banking Relationships (with							
Bank Name (1)	Account No.		0	verdraft Facility Exists : Yes No			
Bank Name (2)	Account No.		0	verdraft Facility Exists : Yes No			
Other Details				, <u> </u>			
Educational Qualification	Undergraduate G	raduate Post-	-graduate (General)	Post-graduate (Professional)			
Marital Status	Married Unmarried	Others No.	of Dependents :	Adults Children			
*Employment Details							
Occupation Salaried (Pvt.	Pub. Gov.) Self-em	nployed/ Professional	Business	etired Student Housemakee			
Name of the Company	Des	ignation	If self-employed				
(NA. for Student, Housemaker and Retire		_	_	(Profession)			
If in business				Partnership Others			
Annual household income	< Rs. 250,000 Rs.	250,000-500,000	Rs. 500,000-1,000,000	> Rs.1,000,000			
Estimated Agricultural Income (in fig	gure)	Estimated Non	-agricultural Income (in fig	gure)			
**Now have read and understood Bank's General Business Conditions (a copy of which has been sent to me/us is in my/our possession) governing the business relationship with the Bank and those special conditions relating to various services including but not limited to Accounts, ATM, Phone Banking, Debit Card, Internet Banking, Bill Payment, etc. (We accept and agree to be bound by the said Bank's General Business Conditions including flows excluding/himiting the Bank has liability. (Whe understand that Bank may at its abank produce (personal or public) to meivs. (We agree that Bank may debit my account for service charges as applicable from time to time. (We confirm that I/We am/are resident of India. (We hereby irrevocably authorize the Bank to any other branch of the Bank and any of its subsidiaries or affiliates or Regulators or to any Authority or Credit Bureaus or third party without my/our specific consent The Bank's General Business Conditions, the receipt and acceptance of which I/We hereby irrevocably authorize or to any Authority or Credit Bureaus or third party without my/our specific consent The Bank's General Business Conditions, the receipt and acceptance of which I/We hereby irrevocably authorized or the Bank has deviced and the Bank has a special bank and any of its as ubsidiaries or affiliates or Regulators or to any Authority or Credit Bureaus or the payor and account as a normal savings account with a average quarterly balance requirement & applicable schedule of charges if salary and We take note to update my/our contact details with the registry whenever I/Wewhit to. "Adahar and a possession of a salary and advanced and a above under intrination tome." All present, I/We do not wish into include my/our contact details with the registry whenever I/Wewhit to. "Adahar a registry businiting Adahara ard and be Deutsche Bank, I/We confirm and agree that the Bank has duly explained to me/us that submission of Aadhaar number/Aadhar							
Name:		Place :	Date :	Photograph			
For Bank Use Only							
*Customer Category Advantage Batter *Source of Lead Yes No	anking Personal Ban omer Managed by VKYC Reference ID :	king Private Ban	king Business E	Banking Others			
Deutsche Bank Staff Expanded initial of Name for PCR	e Bank Group Staff	Deutsche Bank Indi2		Employee ID			
Branch Manager Name/Service Manage			iiiagiiig QO Doii				
Branch Manager Signature/Service Manager			Employee ID	Date Date			

SELF CERTIFICATION FOR INDIVIDUAL CLIENTS

(Only valid along with the Customer Information Form)

The U.S. Foreign Account Tax Compliance Act (FATCA) and the OECD Common Reporting Standard (CRS) require Deutsche Bank AG and its affiliates (collectively "Deutsche Bank") to collect and report certain tax related information about its clients.

Please complete the sections below as directed and provide any additional information as may be required. If the tax residence of an Account Holder is located outside the country of the Deutsche Bank entity requesting this form and also in a Reportable Jurisdiction then the Account Holder will be a Reportable Jurisdiction Person and Deutsche Bank is legally bound to report the relevant information on this form to the appropriate tax authorities.

You are required to state the tax residence (or residencies) of the Account Holder. For joint or multiple Account Holders, please complete a separate form for each Account Holder.

U.S. tax forms may be required in addition to this Self-Certification.

- If you are not a U.S. citizen or resident of the U.S., receiving income that constitutes U.S. Source Fixed and Determinable Annual or Periodical (FDAP) income, please provide a completed IRS W-8 series tax form.
- If you are a U.S. citizen or resident of the U.S. for tax purposes, please provide a completed IRS Form W-9.

This form is for an Individual Account Holder only. Do not complete this form for an entity, nominee or other intermediary. Instead you should complete and provide the appropriate Self Certification for Entity Clients which can be obtained from your Deutsche Bank Relationship Manager.

If the account is held for the benefit of another individual, as agent, custodian, nominee, signatory, investment adviser, intermediary or other similar capacity please provide:

- This Self Certification Form for Individual Clients with your details as Account Holder, duly completed and signed, and
- A separate duly completed and signed Self Certification Form for Individual Clients for each Beneficiary containing the Beneficiary's details.

If you have any remaining questions about how to complete this form or about how to determine your tax residence status you should contact your tax adviser or local tax authority. Deutsche Bank will not be in a position to provide assistance beyond the information contained within this guide as by law we are not permitted to give tax advice.

are not permitted to give tax advice.	·	·	•		
Part 1 — Certification of U.S./Non U.S. Status					
I hereby certify that					

I am a U.S. person, including a U.S. citizen and resident alien' individual or I am not a U.S. person

If you are a U.S. Person please provide TIN² below:

Note: If you are a U.S citizen, U.S. tax resident, or other U.S. person including a resident alien individual, please also enclose a completed and signed IRS-Form W-9.

Part 2 — Country of Residence for Tax Purposes and related TIN or functional equivalent

Please complete the following table indicating (i) where the Account Holder is tax resident and (ii) the Account Holder's TIN for each country indicated.

If the Account Holder is tax resident in more than three countries please use a separate sheet.

If a TIN is unavailable please provide the appropriate reason ${\bf A}, {\bf B}$ or ${\bf C}$ where appropriate:

- **Reason A** The country where I am liable to pay tax does not issue TINs to its residents.
- **Reason B -** The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason)
- Reason C No TIN is required. (Note: only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed)

Country of Tax Residence	Local Tax Identification Number (TIN)	TIN Type	If no TIN available enter Reason A, B or C

Please explain in the following boxes why you are unable to obtain a TIN if you selected Reason B above.

15. I certify that for the purposes of taxation the Account Holder is not Tax Resident in any other country other than the countries indicated in Part 3 above.

Note: If you are a U.S citizen, U.S. tax resident, or other U.S. person including a resident alien individual, please also enclose a completed and signed **IRS-Form W-9**.

'Resident alien:

Anon U.S. national who meets one of two tests. (1) The "green card" test: The individual holds a U.S. alien registration card, Form 1-551 (i.e., green card), at any time during the calendar year (even if not residing in the U.S.) or (2) The "substantial presence" test: To meet this test, a non U.S. national must be physically present in the U.S. on at least:

- a. 31 days during the current year, and
- b. 183 days during the 3-year period that includes the current year and the 2 years immediately before that, counting:
 - · All the days you were present in the current year, and
 - 1/3 of the days you were present in the first year before the current year, and
 - 1/6 of the days you were present in the second year before the current year.

²TIN Type Examples: U.S. Federal Taxpayer Identification Number (U.S. TIN), Individual Taxpayer Identification Number (ITIN) or Social Security Number (SSN)

Appendix 1: Due Diligence for Citizenship / Residency by Investment

Due Diligence for Citizenship / Residency by Investment

"Citizenship by Investment" (CBI) and "Residence by Investment" (RBI) schemes are being offered by a substantial number of jurisdictions / countries and allow foreign individuals to obtain citizenship or temporary or permanent residence rights on the basis of local investments or against a flat fee.

Under Section VII of the CRS, financial institutions are required to perform additional due diligence if the individual account holder(s) or beneficial owner(s) and controlling person(s) of the entity account has sole tax residency in a CBI or RBI jurisdiction (per the OECD list')

1.	Did you obtain residence rights under a CBI / RBI scheme?	Yes 🔲	No 🔲
2.	Do you hold residence rights in any other jurisdiction(s)?	Yes	No 🔲
3.	Have you spent more than 90 days in any jurisdiction(s) during the previous or current calendar year?	Yes	No 🗌
4.	Have you filed income tax returns in any other jurisdiction(s) during the previous or current calendar year?	No 🗌	Yes

If you have answered "Yes" to any of the above questions, please list the jurisdiction(s) not already reflected on Part 2 above.

In addition, please reflect these jurisdiction(s) as Country of Tax Residence along with Tax Identification Number (TIN) in the Part 2 above or provide a reasonable explanation why the jurisdiction(s) is not a tax residency.

Part 3 — Declaration and Signature

I understand that the information supplied by me in this Self-Certification form (including any attachment hereto) is covered by the full provisions of the terms and conditions governing my/the Account Holder's relationship with Deutsche Bank setting out how Deutsche Bank may use and share the information supplied by me to Deutsche Bank.

I acknowledge that the information contained in this Self-Certification form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I declare that all statements made in this Self-Certification are, to the best of my knowledge and belief, correct and complete. I undertake to advise Deutsche Bank promptly of any change in circumstances which causes the information contained herein to become incorrect and to provide Deutsche Bank with a suitably updated Self-Certification within 30 days of such change in circumstances.

I certify that I am the Account Holder or authorised to sign for the individual who is the Account Holder of all the income to which this Self-Certification form relates and/or am using this Self-Certification to document myself as an individual who is the Account Holder.

Deutsche Bank also hereby remind you that the information supplied by you in this Self-Certification is provided pursuant to the full terms and conditions governing the Account and your contractual relationship with Deutsche Bank, setting our how Deutsche Bank may use and share the information supplied by you to Deutsche Bank.

Print Name:	Signature:
Date (dd/mm/yyyy):	
Note: If you have signed this Self-Certification on behalf of the Account Holder, please indicate the capacity in which you are acting. If signing under a power of attorney please also attach a certified copy of the power of attorney.	Capacity:

¹Jurisdictions as of Q2-2021: Antigua and Barbuda, Bahamas, Bahrain, Barbados, Cyprus, Dom'nica, Grenada, Malta, Panama, Saint Kitts and Nevis, Saint Lucia, Seychelles, Turks and Caicos Islands, United Arab Emirates and Vanuatu. This reflects the current state of the OECD's analysis of CBI/RBI schemes as of Q2-2021, and will be updated by OECD on an ongoing basis.

Appendix 2 Instructions Section A - General

1. Foreign Account Tax Compliance Act (FATCA)

FATCA is a component of the Hiring Incentives to Restore Employment Act (the HIRE Act), which was enacted by the U.S. Congress and signed into law on March 18, 2010. FATCA's objective is to reduce tax evasion by U.S. individuals receiving income from financial assets held outside the United States. FATCA has worldwide impact. Its provisions are designed with incentives for Foreign Financial Institutions (FFIs) to provide information to the U.S. Internal Revenue Service (IRS) on financial accounts held by U.S. persons. While foreign institutions are outside of U.S. jurisdiction and have no formal reporting obligation to the U.S., they will be incentivised to comply in order to avoid a 30% withholding tax on payments received from sources within the U.S. levied on non-compliant individuals or entities.

FATCA compliance requires that an FFI, including foreign subsidiaries of U.S.-based organizations, takes steps to:

- Conduct Due Diligence procedures on new and pre-existing accounts to classify account holders or investors as either U.S. or non-U.S.
- · Report account information to the IRS or, if under a Model I IGA, to the local tax authorities
- Potentially withhold 30% tax on certain payments to individuals and entities that fail to comply.

2. Intergovernmental Agreements (IGA)

The U.S. Treasury published two Model Intergovernmental Agreements (Model 1 and Model 2 IGAs) for implementing the broad- ranging provisions of FATCA globally. Non-U.S. countries may enter into one of these agreements with the U.S. and following this, introduce local regulations to implement the agreement. Under a Model 1 IGA, a Foreign Financial Institution (FFI) in a respective partner country is required to report U.S.-owned account information directly to their local tax authority, rather than to the Internal Revenue Service (IRS). The local authority would then share that information with the IRS. However, a Model 2 IGA requires FFIs to report certain information directly to the IRS.

3. Common Reporting Standard (CRS)

On 20 July, 2013, the G20 leaders endorsed the OECD proposals for a global model of automatic information exchange as the expected new standard on information exchange. This directive was carried out on 13 February, 2014, when the OECD released the Common Reporting Standard ("CRS") and model Competent Authority Agreement ("CAA"). On 15 July, 2014, the Council of the OECD published its detailed commentary on both the CRS and Model CAA.

In order to promote adoption of the Common Reporting Standard within the European Union, a revised Directive on Administrative Cooperation ("DAC") was published on 09 December, 2014 requiring EU Member States to begin the automatic exchange of information under the revised DAC no later than end of September 2017, which will be in line will other OECD "Earlier Adopter" countries. Per the DAC, the deadline for Member States to adopt local legislation will be 31 December, 2015, with the revised DAC "go- live" date commencing on 1 January, 2016. As of June 17, 2015, more than 90 countries and jurisdictions have signed up for the CRS, including at least 50 who have committed to be a part of the early adopter group, which phases in beginning 01 January, 2016. It is expected that more countries will opt to implement the standard as the initial go-live date approaches.

CRS introduces requirements on top of other global and local implementation programs (e.g. FATCA, EUSD, QI) aiming at a uniform global standard of information exchange. Both the Model CAA and CRS each have a foundation that is substantially similar to that of the FATCA Intergovernmental Agreements (IGAs), with subtle differences imposed by the OECD and influenced through local law. Just as with FATCA, the CRS therefore impose obligations on Financial Institutions resident in those territories to report information on financial accounts held by foreign tax residents to the local tax authorities.

4. Legal Disclaimer

The above tax regulations require Deutsche Bank to collect certain information about each account holder's tax residence. Please note that Deutsche Bank cannot provide you with tax advice, including tax residence.

If you are unsure about how to complete this form, please consult your tax adviser.

It is the responsibility of the Account Holder to ensure that the information provided is complete and accurate and to provide Deutsche Bank with any additional documentation, information or replacement forms when requested or required.

Deutsche Bank assumes no responsibility for the independent verification of any information provided on this Form and will rely on such information as being complete and accurate in all material respects. Deutsche Bank is also under no obligation to accept a form if we have either reason to know, believe or have actual knowledge that the information provided in the form is invalid or incorrect.

The Deutsche Bank entity requesting this form will operate under the regulations applicable to its local tax jurisdiction or country where the person is located.

5. Who should complete this form?

This form is to be completed by all account holders. The person may be the account holder or acting on behalf of other clients/account holders. Please do not use this form for entity account holders. Instead, the Self Certification Form for Entity Clients should be used.

Please contact your Deutsche Bank Relationship Manager for blank copies of this form or for the Self Certification Form for Individual Clients.

6. Expiration of the Self-Certification

Generally, the self certification will remain valid indefinitely unless there is a change in circumstances, in which case you are required to notify Deutsche Bank within 30 days of the change in circumstances and provide us with an updated self certification.

7. Consequences of non-provision of a valid form

Deutsche Bank is required to validate the information provided in this form against other information that we hold about the account holder. If, for any reason, conflicting information is identified, then the form may be rejected. Deutsche Bank may need to request additional supporting information as necessary under the rules.

In the case where the discrepancies cannot be resolved, the below are some possible consequences:

• The person can be treated as a Reportable account and as a consequence account holder information, account balances and payments may be reported by Deutsche Bank to the relevant local tax authority for onward exchange of information to the tax authority where the person is tax resident.