

- Minimum deposit is ₹ 15,000/-

- Please check rate of interest with your local relationship manager as the rate may differ based on deposit relationship size with Baiji Finance Ltd

- Rates offered by management will be binding on all deposits irrespective of the deposit size

PLEASE FILL IN BLOCK LETTERS AND TICK WHERE REQUIRED ☒

Investment details

1. Investment Fresh ☐ Renewal ☐ If renewal, existing deposit no.

2. Mode of Payment (Not applicable for renewal application)

<input type="checkbox"/> RTGS/NEFT	Account Name: Bajaj Finance Ltd Fixed Deposit Coll Ac Account No./Client Code: BFLFD8 IFSC Code: HDFC0004989 Bank Name: HDFC Bank Ltd Branch: Kanjurmarg, Mumbai	Note: Cancelled cheque mandatory for online transfer of funds Cheque/UTR No. _____ Cheque/Transaction date <table border="1" data-bbox="1069 504 1311 517"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y																												
D	D	M	M	Y	Y	Y	Y																															
<input type="checkbox"/> Cheque	Account payee cheque favoring "Bajaj Finance Ltd. A/c 00070350006738" (Name of 1st holder shall appear on the cheque. Else bank statement required)*	Bank Account No. <table border="1" data-bbox="978 535 1465 546"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> IFSC <table border="1" data-bbox="978 551 1311 562"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Bank Name _____ Branch _____																																				

Interest and redemption payment instruction [Bank account in my/our name]

☐ Pay in the investment account mentioned above OR☐ Pay in different bank account as mentioned below (cancelled cheque copy is mandatory)

Bank Account No.	<div></div>
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[illegible]

Bank Name _____

Branch _____

Deposit Details

Deposit Amount (in figures)	Deposit Amount (in words)	Deposit period (Months)	Tenor (in words)
<input type="checkbox"/> 15,000 <input type="checkbox"/> 50,000 <input type="checkbox"/> 1,00,000 <input type="checkbox"/> 2,00,000 <input type="checkbox"/> 3,00,000 <input type="checkbox"/> 5,00,000 <input type="checkbox"/> Other <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<div></div> <div></div> <div></div>	<input type="checkbox"/> 12 <input type="checkbox"/> 24 <input type="checkbox"/> 36 <input type="checkbox"/> 48 <input type="checkbox"/> 60 (Recommended) <input type="checkbox"/> <input type="text"/> <input type="text"/> other tenor	<div></div> <div></div> <div></div>
Interest Payout Instruction		Instruction on maturity	
<u>Cumulative Scheme</u> <input type="checkbox"/> At maturity alongwith principal (Recommended for maximum savings)	<u>Non-Cumulative Scheme</u> <input type="checkbox"/> Annually <input type="checkbox"/> Half-yearly <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly	<input type="checkbox"/> Renew Principal + Interest (recommended) <input type="checkbox"/> Renew Principal only <input type="checkbox"/> Pay at maturity (default if not selected)	

Applicant details

Type of applicant ☐ HUF ☐ Trust ☐ Sole proprietorship ☐ Partnership Firm ☐ LLP ☐ Association of Persons / Body of Individuals
☐ Society ☐ Artificial Liability Partnership ☐ Central/ State Govt. Department/ Agency ☐ Artificial Juridical Person
☐ Not Categorized ☐ Others (please specify).....

Name _____ F I R S T _____ M I D D L E _____ L A S T _____

Date of Incorporation /Registration/Formation D D M M Y Y Y Y **Landline** S T D **PAN**

Date of Commencement of Business **Country of Incorporation/ Formation**

LEI Number

LEI Renewal Date DD MM YY YY

TIN/ GST Registration Number

Correspondence Address/
Principal place of business Pin

City _____ State _____

Registered Address

City State

Email

Number of Related Persons ("Related persons" consists of Director, Promoter, Karta, Partner, Court Appointed Official, Proprietor, Beneficiary, Authorised signatory, BO, PoA holder, etc.)

1) Name	<input type="text"/>	F I R S T	<input type="text"/>	M I D D L E	<input type="text"/>	L A S T	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>	Residential Status:	Resident <input type="checkbox"/>	NRI <input type="checkbox"/>	
Designation	<input type="text"/>				Date of birth	D D M M Y Y Y Y	
CKYCR No./ KIN	<input type="text"/>	PAN/Form 60	(in absence of allotment of PAN) (mandatory)			<input type="text"/>	<input type="text"/>

2) Name	<input type="text"/>	F I R S T	<input type="text"/>	M I D D L E	<input type="text"/>	L A S T	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>	Residential Status:	Resident <input type="checkbox"/>	NRI <input type="checkbox"/>	
Designation	<input type="text"/>				Date of birth	D D M M Y Y Y Y	
CKYCR No./ KIN	<input type="text"/>	PAN/Form 60	(in absence of allotment of PAN) (mandatory)			<input type="text"/>	<input type="text"/>

3) Name	<input type="text"/>	F I R S T	<input type="text"/>	M I D D L E	<input type="text"/>	L A S T	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>	Residential Status:	Resident <input type="checkbox"/>	NRI <input type="checkbox"/>	
Designation	<input type="text"/>				Date of birth	D D M M Y Y Y Y	
CKYCR No./ KIN	<input type="text"/>	PAN/Form 60	(in absence of allotment of PAN) (mandatory)			<input type="text"/>	<input type="text"/>

For sole proprietorships only - Nomination to Deposit: Form DA 1: u/s 45 QB of RBI Act 1934

1. #Name & Address of the Nominee
 Relationship with depositor
 Please enter Date of Birth of the Nominee in DD/MM/YYYY

- Would you like to display name of nominee in the Fixed Deposit Receipt? ☐ Yes ☐ No

Mandatory
Authorised Signatory 1

Authorised Signatory 2

1. _____

The contents of the application form were explained to the applicant/ co applicant in language.


signature and employee code
of sourcing employee

I/We hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I/We hereby authorize BFL to pay the interest and Deposit amount upon maturity or upon the payment frequency selected by me/us, as the case may be, using the available online banking payment system, to the bank account stated by me/us in this Application or into such other bank account as may be instructed by me/us (jointly) in writing to BFL during the term of the Deposit. I/We state that the amount being deposited is not out of borrowed funds or funds acquired by accepting deposits from any other person or through any illegal or wrongful means. I/We confirm that I/we have read and understood the detailed terms and conditions annexed to this Application including the interest rate and other charges, the financials and other statements/particulars/representations furnished by BFL and after careful consideration, I/we am/are making the deposit with the BFL at my/our own risk and volition. I/We state that the first named depositor mentioned in this application should be treated as the payee for the purpose of deduction of tax, under Section 194 A/195 of the Income Tax Act, 1961, as may be applicable. I/We agree that any and all information provided by me/us in this application or through separate KYC form or previously submitted KYC, all deposit(s) held by me/us with BFL may be disclosed by BFL to any statutory/regulatory authorities as and when required and to provide any additional document and/or information as may be prescribed by BFL/said authorities in relation to this application. I/we agree that in case of joint fixed deposit with a survivorship clause, in the event of death of one of the depositors, BFL shall be discharged by paying the Fixed Deposit proceeds prematurely to the survivor/s on request. I/We further affirm that the payment of proceeds of such deposits to either one of us represents a valid discharge of the BFL's liability. The FATCA/ CRS declaration will be considered as per the KYC form submitted separately.


a. by verifying such details through the CKYCR number (i.e., KYC Identifier/ KIN) provided by me/ us or
b. by furnishing such other details of Applicant, as may be permitted by CKYC Registry or
c. by obtaining such CKYCR number/KIN, through details shared by me/ us for this Application Form

Signature/thumb impression of all applicants with date:

 Mandatory for Authorised Signatory 1

 Mandatory for Authorised Signatory 2

In case of thumb impression, 2 witnesses name and signature are required. Name of nominee should be same as that appearing on valid ID Proof of the nominee.

 Witness 1

 Witness 2

The contents of the application form were explained to the applicant/ co applicant in language.

 signature and employee code
of sourcing employee

Terms and Conditions

1. ACCEPTANCE OF DEPOSITS:

- Bajaj Finance Limited (hereinafter referred to as the 'Company'/'BFL') may accept fixed deposit ("Deposit") at its sole and absolute discretion and subject to the terms and conditions contained herein.
- The applicant agrees and acknowledges that the applicant (a) is 18 (eighteen) years of age; (b) is of sound mind; (c) has read, understood and agrees to be bound by these terms. Where the applicant is a minor, the Company may accept the Application provided the Application is signed by the natural or court appointed guardians of the minor on behalf of the minor and upon submission of such documents as may be required by the Company.
- The Company does not accept deposits from foreign nationals except Person of Indian Origin. The entities incorporated/registered/ constituted in India and carrying business in India are eligible for placing Deposit with BFL.
- The Company shall accept Deposits subject to the minimum amount of deposit prescribed by the Company under the Fixed Deposit Application Form ("Application"). In the event amount received by the Company for placing Deposit is less than the minimum amount prescribed in this regard, the Company reserves the right to reject the application for placing the Deposit. No interest shall be payable by the Company in relation to such deposits.
- Deposits shall not be accepted in cash.
- The applicant agrees to submit all documents and information as may be required by the Company in relation to the Deposit, in such form and manner as may be prescribed by the Company.
- The Company reserves the right to accept or reject any application received for opening or placing the Deposit without assigning any reason whatsoever. The amount in relation to such rejected Application will not earn any interest and the Company will endeavor to refund the said amount within 10 (ten) business days.
- If Deposit is opened by Power of Attorney ("POA") holder on the basis of valid and subsisting POA, it shall be the sole responsibility of the Applicant to immediately inform BFL about any deviation/modification/changes in the POA and shall indemnify BFL if any action is taken against BFL in relation thereto.

2. JOINT DEPOSITS:

- Application may be made in joint names subject to a maximum of two applicants. The Deposit will be opened in joint names subject to the condition that all the applicants (a) sign the Application in their individual capacities (b) submit KYC and other documents as specified by the Company and (c) meet the eligibility criteria specified by the Company.
- All communications in relation to the Deposit will be addressed in the name of the first applicant appearing in the Application. Any instructions received from the Primary Holder through mobile number and/or email id registered in the name Primary Holder (while applying for Fixed Deposit), will be binding on all the joint holder(s).
- All the payments in relation to the Deposit placed in joint names including interest and maturity proceeds, will be made in the name of the first applicant in the Application including for the purpose of deduction of tax at source and any discharge given by such first applicant in respect to any payments made by the Company will be binding on the other joint applicant(s). The proceeds will be transferred to the minor's account, if the FD is opened in minor's name.
- Any change in the joint holding of the deposit will only be considered upon receipt of joint written consent of all the deposit holders. In case of any dispute between the joint deposit holders, no change will be made in joint deposit holder details in the FD unless there is any specific direction of court of law.

3. FIXED DEPOSIT RECEIPTS

- Electronic Fixed Deposit Receipt and the physical Fixed Deposit Receipts ("FDR") will be sent to mobile no. through SMS/email id and couriered to the depositor's address, respectively, as mentioned in the Application Form by Depositor(s).
- In case of change in KYC documents/status of any of the Applicant, the Applicant shall immediately inform BFL regarding the said change and submit the revised KYC documents/ updated status to BFL within 30 days of such change, failing which BFL shall not be held responsible for any consequences, actions, claims, loss due to the said change in KYC.
- Deposit(s) are not transferable and non-assignable. Third party lien on deposit is NOT permitted under any circumstance except in favour of the holding/subsidiary and/or Group Companies of BFL.
- In the event of loss or destruction or mutilation of an FDR (for any reason) and upon request received by BFL, FDR will be re-issued by BFL in lieu of such FDR. Notwithstanding the re-issuance of FDR(s), the obligation of BFL is limited to the single FDR only, against which the money has been received by BFL. Under all circumstances, mere re-issuance of FDR(s) by BFL against single deposit of money will not result in duplication of payment or higher liability on the part of BFL. All expenses, if any, incurred in this connection will be borne by the depositor(s).

4. INTEREST:

- Rate of interest for Deposits for more than ₹ 3 Crore per deposit may vary from the published card rate and will be decided on case to case basis but within the cap on Rate of Interest specified by the Reserve Bank of India (RBI).
- Subject to approval of Application by BFL, Interest payable on a Deposit will be calculated from the date of realization of amount by BFL, where the payment is made by cheque or any other mode.
- The dates for interest payments are as follows:
 - In case of Non- Cumulative Deposits:
 - Monthly interest payments: Last date of month
 - Quarterly interest payments: 31st March, 30th June, 30th September and 31st December
 - Half yearly interest payments: 31st March and 30th September
 - Annual interest payments: 31st March
 - In case of Cumulative Deposits: Date of maturity of the Deposit
- Interest calculation methodology
 - For the purpose of interest calculation, calendar year is taken to consist of 366 days in a leap year and 365 days in a non-leap year.
E.g. FD of Rs. 10 lakhs booked on 15-Apr-2020 for Tenor 1 year @10% per annum Interest from 15-Apr-2020 till 31-12-2020, will be calculated as: $10 \text{ lakhs} \times 10\% \times 261 / 366 \text{ days} = \text{Rs. } 71311$ Interest from 01-Jan-2021 till 14-Apr-2021 will be calculated as: $10 \text{ lakhs} \times 10\% \times 104 / 365 \text{ days} = \text{Rs. } 28493/-$
 - In case your maturity payment date falls on a banking holiday, your maturity proceeds will be credited to the bank account registered with us, on the banking holiday.
- Once the applicant selects the Deposit scheme specified in the Application at the time of opening the Deposit i.e. the scheme, tenor and interest payout frequency, the applicant will not have the option to subsequently revise the Deposit scheme. In the event the scheme is not indicated in the Application received by the Company, the Deposit will suo moto be opened under cumulative deposit scheme for a period of 60 (sixty) months. In case the applicant opts for non-cumulative deposit option but the interest payout frequency is not indicated in the Application, the Deposit will be treated as placed under the annual interest payout frequency scheme.
- The interest will be paid through National Electronic Funds Transfer (NEFT)/ Real Time Gross Settlement (RTGS) only. In case of any rejection of such instruction for NEFT / RTGS due to any reason, the Company will dispatch interest cheque, in favour of the first applicant in the Application, within 10 (ten) days of the receipt of intimation by the Company from its bank about such rejection
- Customer may be offered different interest rate on a case to case basis (within the scope of Regulatory guidelines) at the discretion of BFL management.

5. NOMINATION:

- Nomination facility is available to the individual applicants & sole proprietorship only and not available for other entities. For availing the nomination facility, the applicant(s) is/are required to furnish the nominee details in this application form or applicant will be required to submit a duly filled 'Form DA 1' as prescribed by Reserve Bank of India. The "Form DA 1" is available in the branches of the Company & Company's website at <https://www.bajajfinserv.in/fixed-deposit-terms-and-conditions> ("Website"). Nomination made by the depositor/applicant(s) in the manner prescribed by the Company, shall be binding on all the joint depositor/applicant(s).
- Upon request of the depositor(s), the Company will arrange to send forms for cancellation of nomination (Form DA 2) and variation of nomination (Form DA 3).

6. PAYMENT AND RENEWAL OF DEPOSIT

- The interest payouts, premature withdrawal proceeds and maturity proceeds (unless it receives any request for renewal within the prescribed period before the date of maturity, will be made in the bank account mentioned in the Application or such other bank account intimated by the deposit holder(s) (jointly, if applicable), in writing, to the Company from time to time by way of NEFT or RTGS. In case of any rejection of such instruction for NEFT / RTGS due to any reason, the Company will dispatch the cheque of such payment in favour of the Depositor in case of single Depositor or in favor of all the Depositors, in case of joint deposit, within 10 (ten) days of the receipt of intimation by the Company from its bank about such rejection..
- In the event of death of the sole depositor and/or all the joint depositors, all payment(s) in relation to the Deposit including interest thereon will be made to the nominee appointed by the depositor(s) on production of proof of identity and on execution of such other documents as may be required by the Company in this regard. In the event there is no nomination by the sole depositor, the Deposit amount including interest thereon will be transferred to the legal heirs or legal representatives of the deceased depositor(s), as the case may be, upon submission of Succession Certificate/Letter of Administration/Probate of the Will to the satisfaction of the Company. In the case of joint depositors, the nominee's right to receive the amount of Deposit including interest shall arise only after the death of all the depositors. The nominee, in the event of death of the depositor(s) would receive such amounts in trust for the legal heirs.
- The request for renewal of the Deposit signed or consented by all the Deposit holders shall reach BFL through physical application at least 24 hours before maturity date of deposit. Renewal of Deposits will be subject to the rate of interest and other terms and conditions prevailing on the date of renewal. FDR of the existing deposit may not be required at the time of renewal of deposits as it stands null & void post its maturity date.
- In case of renewal, if specific tenure is not mentioned, renewal will be done for same term as that of the maturing Fixed Deposit.
- In case where the depositor has opted for renewal of deposit through this application form, however, wishes to cancel the renewal request, the cancellation request signed or consented by all the Deposit holders, shall reach the Company at least 24 hours before maturity date of the Deposit. The written request can be submitted at nearest branch of the Company or sending by post/ courier to the Company or to the independent financial advisors or national distributors empaneled with the Company. No requests shall be accepted post the above-mentioned period.

7. PREMATURE WITHDRAWAL:

- Premature withdrawal is permitted, provided the Deposit has completed more than 3 months from the date of issuance. The death claims will be settled in accordance with the terms and conditions applicable to Deposit.
- A request form for premature withdrawal will have to be given by all depositor(s).
- Deposits may be withdrawn prior to the date of maturity subject to the regulations of the Reserve Bank of India in this regard. Please note that premature withdrawal of Deposit (including death cases) is subject to the following conditions:
 - Up to 3 (three) months from date of Deposit: Withdrawal of the Deposit is not permitted. However:
 - In the event of death of a depositor, the Company may repay the Deposit prematurely (irrespective of the lock in period) to the surviving depositor (which in the case of joint holders will be the first in the sequence of applicants in the Application) or to the nominee/ legal heir(s) of the deceased depositor, upon the request of surviving depositor/s/nominee/legal heir, as the case may be, and only subject to submission of proof of death and other requisite documents to the satisfaction of the Company.
 - In case depositor wants premature withdrawal of his Deposit for expenses of emergent nature including on account of facing any medical emergency or expenses due to natural calamities or disaster, partial prematurity of the deposits is allowed upto lower of 50% of principal or ₹ 5 lacs. Expenses of emergent nature are subject to verification/evaluation of case as per BFL policy.
- Premature withdrawal of Deposit Amount on account of suffering on account of Critical illness, 100% of principal amount of Deposit shall be paid to the depositor, without interest. For the purposes of this clause definition of 'Critical illness', shall be as per IRDAI (Health Insurance) Regulations, 2016 and the guidelines issued thereunder, as amended from time to time.
- Deposits aggregating not exceeding an amount of ₹10,000/- of principal amount ("Tiny Deposit") will be prematurely paid to individual depositor or first named depositor holding the Deposit in the same capacity in all the Deposits, at the request of the depositor, without interest.
- (b) After 3 (three) months but before 6 (six) months from the date of the Deposit. Withdrawal of the Deposit will be permitted. However, interest shall not be payable.
- (c) After 6 (six) months but before the date of maturity of the Deposit: Withdrawal of the Deposit will be permitted. Interest shall be payable at a rate which is 2% lower than the rate specified for the period during which the deposit plan has run. In case no rate is specified for the Deposit period, interest rate payable shall be 3% lower than the lowest rate being offered by the Company.
- For prematurity, interest rates will be calculated as per table 1 of the Statutory advertisement on page 4 of this form.
- In case customer requests for prematurity of FD during intervening period e.g. after 23 months but before 24 months, interest penalty will be calculated on rates as applicable for previous month's slab.
- Income tax wherever applicable and deducted at source and remitted to the applicable tax authority by the Company on behalf of the depositor, before premature withdrawal of Deposit(s), shall not be refunded in any circumstance whatsoever.
- The prematurity proceeds will be credited in the same bank account as mentioned in the FD application form or such other bank account intimated by the deposit holder in writing to BFL subsequently.

8. LOAN AGAINST PUBLIC DEPOSIT:

- 'Loan against the deposit' facility may be provided to depositors against the Deposit(s) placed with the Company, subject to fulfilment by depositor(s) of the eligibility criteria and other conditions, as may be prescribed by the Company in this regard. Loan can be given against deposit only after 3 months from the date of Deposit. The interest rate on such loans shall be 2% higher than the rate of interest provided on the depositor's Deposit. The loan amount cannot exceed 75% of Deposit amount.
- In case application for loan against deposit is made through physical application form, then original FDR needs to be submitted to BFL along with the application form. Lien will be marked on the Deposit till all the outstanding dues under the said loan against deposit are duly repaid by the Depositor/s.
- The loan amount will be credited in the same bank account registered with BFL.

9. OTHER TERMS:

- Income-tax, wherever applicable, will be deducted at source on the Deposit in accordance with Section 194-A of the Income Tax Act, 1961 except where appropriate Certificate/Form as prescribed under the Income Tax Act, 1961 (refer to Form 15G/H enclosed with the deposit application form) is furnished to Company's registered office at least 2 (two) months prior to the due date of payment of interest. At present tax is deductible if the aggregate amount of interest paid or payable during the financial year exceeds ₹ 10,000/- (Rupees ten thousand only). It is the sole responsibility of the applicant to provide the Company with a fresh Form 15G/H for every assessment year. Non-submission of relevant form or submission of incomplete/incorrect form may result in tax deduction and BFL will not be responsible for the same. However, if the aggregate amount of interest paid or payable during the financial year exceeds ₹ 4,00,000 (Rupees four lacs only) for non senior citizens, ₹ 12,00,000 (Rupees twelve lacs only) for senior citizens and ₹ 12,00,000 (Rupees twelve lacs only) for super senior citizens (aged 80 years and above), then form 15 G/H will not be valid and tax will be deductible. In this respect the extant guidelines as amended from time to time will be applicable. Form 15G/H submitted vide this Application will be applicable for all the deposits made under this plan during the financial year. For each financial year, Applicant will have to submit separate Form 15G/H.
- TDS is applied on aggregate interest income earned by the customer and can be adjusted against interest income of any fixed deposits, which may not be proportionate to interest income on specific fixed deposit. Wherever such adjustment is carried out against cumulative fixed deposit, the interest reinvested is post TDS recovery. Therefore, the maturity amount for re-investment deposits varies to the extent of tax and compounding effect on tax for the period subsequent of deduction till maturity. BFL will not be liable to pay interest on the TDS which is deposited with IT department on quarterly basis.
- TDS is also deducted on unpaid interest accrued at the end of financial year viz. 31st March.
- When interest amount is insufficient to recover TDS, the same will be recovered from the principal of the deposit.
- In the event of cheque bounce, the cheque will be sent back to applicant's address mentioned on the Application within 15 (fifteen) days. For all RTO (Return to Origin) cheque cases, the cheque will be held by the Company until the validity of the instrument, post which it will be destroyed without further notice to the applicant.
- In the event of death of any of the joint depositors, any modification in the names of the deposit holders appearing on the FDR and/or change in the bank account where interest and/or maturity proceeds are to be credited, shall be effected only upon submission of a notarized copy of the death certificate in the name of the deceased depositor along with appropriate instruction, to the Company, issued jointly by all the surviving deposit holder(s), in writing, to carry out such modifications.
- The Company will send all communications to the deposit holder(s) in electronic form from time to time at the email ID mentioned in the Application and through SMS on the registered mobile number. In case of failure in transmission of such communication, the Company will send physical copy of such communication within 10 (ten) days of such failure of transmission.
- Any change in the address, email ID, bank account etc., mentioned in the Application shall be effected by the Company only on the basis of written instruction signed by all the concerned deposit holder(s).
- The Company reserves the right to alter, amend or delete any or all the conditions stipulated above or to vary them in special cases or to accept Deposits only for such periods as it may decide from time to time and to repay the Deposits prematurely before the date of maturity.
- The accompanying advertisement inviting fixed deposits forms part of the Deposit Application form.
- Disputes, if any, arising in connection with the Deposit, will be subject to the exclusive jurisdiction of Courts at Pune.
- Requests related to any change in bank details should reach us at least 7 days prior to the interest or maturity payment

10. HOW TO APPLY

- Applicant(s) are requested to go through the terms and conditions as mentioned above. These terms and conditions form part of the Application.
- The attached deposit application form should be duly filled and signed by the applicant(s). The amount should be deposited only by online transfer or by a CTS compliant account payee cheque drawn in favour of 'Bajaj Finance Ltd. A/c 00070350006738' clearly stating the deposit amount along with the application number on the rear side of the cheque.
- In case of investment through cheque, application form along with the cheque and required documents may be submitted with any of Company's branch or authorised distributors. In case Deposit is being placed through direct credit to the BFL investment account, Application form along with copy of bank statement showing debit of funds and other required documents may be submitted with any of Company's branch or authorised distributors. For investment through NEFT/RTGS, please use the following details: Beneficiary Name: Bajaj Finance Ltd Fixed Deposit Coll Ac, Bank acc no.: BFLFD8 (numerical account number is replaced by ECMS Collection code - BFLFD8), Account Type: current account, Bank Name: HDFC Bank Ltd, IFSC: HDFC0004989, Branch name: Kanjur Marg, Mumbai.
- For any investment queries or information about our affiliated partner websites, write to us at we care@bajajfinserv.in or call us on +91 8698010101
- Introduction of all the applicants is compulsory. Such introduction may be by any one of the following methods:
 - The applicant can also obtain introduction from any other fixed deposit holder with BFL. The said existing depositor will be required to disclose his/her name and fixed deposit receipt number and provide his/her signature, as per specimen signature in BFL records;
 - The applicant can also introduce himself/herself by producing original of any one of the documents (which contains the photograph of the applicant) mentioned in the list of Mandatory and Officially Valid Documents provided in the Application and a recent coloured photograph to BFL for verification. The aforesaid coloured photograph and a copy of such document produced is required to be attached with the Application.

11. IMPORTANT INFORMATION

- In the event of non-repayment of the Deposit or part thereof as per the terms and conditions of such Deposit, the depositor may approach National Company Law Tribunal, Mumbai Bench at: 6th Floor, Fountain Telecom, Building 1, Mahatma Gandhi Road, Fort, Mumbai, Maharashtra 400001.
- In case of any deficiency by the Company in servicing its Deposit, the depositor may approach the National Consumers Disputes Redressal Forum, the State Level Consumers Disputes Redressal Forum or the District Level Consumers Disputes Redressal Forum for relief.
- For any queries, visit our website <https://www.bajajfinserv.in/reach-us>. Select the <Email Us> tab and follow the directions to get your query resolved. You may also call BFL Customer Care at 8698010101 or visit our nearest branch. This is not a toll-free number and normal call charges will be applicable.

Application Form No.:

FATCA/CRS Details for non-Individual Applicants (mandatory)

Name of the entity

Type of address given at KYC: Residential or Business ☐ Residential ☐ Business ☐ Registered Office ☐

Note: "Address of tax residence would be taken as available in KRA (KYC Registration Agency) database.

In case of any change, please approach KRA & notify the changes"

PAN Date of Incorporation/Registration/Formation

LEI Number LEI Renewal Date

City of incorporation..... Country of incorporation.....

Contact No. Email ID

Entity Constitution Type: Partnership Firm ☐ HUF ☐ Society ☐ AOP/BOI ☐ Trust ☐ Liquidator ☐

Limited Liability Partnership ☐ Artificial Juridical Person ☐ Others specify.....

Please tick the applicable tax resident declaration –

Is "Entity" a tax resident of any country other than India? Yes ☐ No ☐

If 'yes', please fill below details for all countries (other than India) in which the entity is a resident for tax purposes as well as Ultimate Beneficiary Ownership (UBO) declaration on the next page

Country of tax residency	Tax Identification number or functional equivalent	Identification type (TIN or other, please specify)*

*If TIN is not available please tick reason A, B or C

Reason A – The country where applicant is liable to pay taxes does not issue Tax Identification number to its residents

Reason B – No TIN required (Select this only if the authorities of the respective country of tax residence do not require TIN to be collected)

Reason C – Any other reason

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person,

mention Entity's exemption code here.....

FATCA & CRS Declaration

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

In case the Entity Country of Incorporation/Tax residence is US but entity is not specified US person mention entity exemption code

Entity exemption code are provided below in table which can be enclosed with application form for ease of customer to mention the exemption code same.

Code	Sub category	Code	Sub category
A	An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)	G	A real estate investment trust
B	The United States or any of its agencies or instrumentalities	H	A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
C	A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities	I	A common trust fund as defined in section 584(a)
D	A corporation the stock of which is regularly traded on one or more established securities markets, as described in Reg. section 1.1472-1(c)(1)(i)	J	A bank as defined in section 581
E	A corporation that is a member of the same expanded affiliated group as a corporation described in Reg. section 1.1472-1(c)(1)(i)	K	A broker
F	A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state	L	A trust exempt from tax under section 664 or described in section 4947(a)(1)
		M	A tax exempt trust under a section 403(b) plan or section 457(g) plan

PART A [to be filled by Financial Institutions or Direct Reporting Non-Financial Entities (NFEs)]

We are a: Financial institution <input type="checkbox"/> OR Direct reporting NFE <input type="checkbox"/>	GIIN (consists of 19 characters) GIN is applied but not yet issued <input type="checkbox"/> Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Name of sponsoring entity.....
--	---

If GIIN not available and If the entity is a financial institution(tick whichever is applicable): Not required to apply for ☐ Not obtained – Non-participating FI ☐

PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

1.	Is the Entity an active NFE	Yes <input type="checkbox"/> (If yes, please fill UBO declaration in the next section.) No <input type="checkbox"/> Nature of Business.....
2.	Is the Entity a passive NFE	Yes <input type="checkbox"/> (If yes, please fill UBO declaration in the next section.) No <input type="checkbox"/> Nature of Business.....

Name of the entity PAN

Limited Liability Partnership ☐ Artificial Juridical Person ☐ Others specify.....

1.	Name of Beneficial owner / Controlling person..... Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Tax ID Type (TIN or Other, please specify)..... Beneficial Interest %..... Address type: Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/>	Address - Include State, Country, PIN / ZIP Code & Contact Details:
2.	Name of Beneficial owner / Controlling person..... Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Tax ID Type (TIN or Other, please specify)..... Beneficial Interest %..... Address type: Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/>	Address - Include State, Country, PIN / ZIP Code & Contact Details:
3.	Name of Beneficial owner / Controlling person..... Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Tax ID Type (TIN or Other, please specify)..... Beneficial Interest %..... Address type: Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/>	Address - Include State, Country, PIN / ZIP Code & Contact Details:

1.	PAN, Passport, Election ID, Govt. ID, Driving Licence, NREGA Job Card, Others..... City / Country of Birth Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Occupation Type - Service, Business, Others..... Nationality..... Father's Name	Date of birth..... Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender / Others <input type="checkbox"/>
2.	PAN, Passport, Election ID, Govt. ID, Driving Licence, NREGA Job Card, Others..... City / Country of Birth Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Occupation Type - Service, Business, Others..... Nationality..... Father's Name	Date of birth..... Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender / Others <input type="checkbox"/>
3.	PAN, Passport, Election ID, Govt. ID, Driving Licence, NREGA Job Card, Others..... City / Country of Birth Country of Tax residency..... Tax ID No. - Or functional equivalent for each country.....	Occupation Type - Service, Business, Others..... Nationality..... Father's Name	Date of birth..... Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender / Others <input type="checkbox"/>

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me / us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

I/ we understand that my/our purchase from the Company may create legal, tax or other financial/ reporting obligations for me/us under the laws of the country of which I/we hold citizenship or reside in. I/we shall be solely responsible for undertaking and fulfilling any obligations that I/we may have under the laws of such country/ies and shall not hold the Company liable under any circumstance in the event of a default on my/our part in fulfilling the said obligations. I/ We agree that, as may be required by domestic regulators/ tax authorities the Company may also be required to report, reportable details to CBDT or close or suspend my/ our applications/ contracts.

Customer ID:

'FORM NO. 15G'

Application Form No.:

[See section 197A(1), 197A(1A) and rule 29C]

Declaration under section 197A (1) and section 197A(1A) to be made by an individual or a person
(not being a company or firm) claiming certain incomes without deduction of tax.

PART I

1. Name of Assessee (Declarant) **First** **Middle** **Last** 2. PAN of the Assessee
3. Status (tick whichever applicable): **HUF** 4. Previous year (PY) (for which declaration is being made): 20__ - 20__
5. Residential Status (tick whichever applicable): Indian/Other 6. Complete address including PIN code:
7. Email: 8. Telephone/mobile no:
- 9(a). Whether assessed to tax under the Income-tax Act, 1961: ☐ Yes ☐ No 9(b). If yes, latest assessment year for which assessed:
10. Estimated income for which this declaration is made:
11. Estimated total income of the PY. in which income mentioned in column 10 to be included:
12. Details of Form No. 15G other than this form filed during the previous year, if any:
- Total no. of Form No. 15G filed: Aggregate amount of income for which Form No. 15G filed:
13. Details of income for which the declaration is filed

Sr. no.	Identification number of relevant investment/account, etc.8	Nature of income	Section under which tax is deductible	Amount of income
1		Fixed Deposit Interest	194 A	
2		Fixed Deposit Interest	194 A	
3		Fixed Deposit Interest	194 A	
4		Fixed Deposit Interest	194 A	

14. Declaration/Verification

*I/We do hereby declare that to the best of *my/our knowledge and belief what is stated above is correct, complete and is truly stated. *I/We declare that the incomes referred to in this form are not includible in the total income of any other person under sections 60 to 64 of the Income- tax Act, 1961. *I/We further declare that the tax *on my/our estimated total income including *income/incomes referred to in point 10 *and aggregate amount of *income/incomes referred to in point 13 computed in accordance with the provisions of the Income-tax Act, 1961, for the previous year ending on 31.03..... relevant to the assessment year 20.....-20..... will be nil. *I/We also declare that *my/our *income/incomes referred to in column 11 *and the aggregate amount of *income/incomes referred to in column 13 for the previous year ending on 31.03..... relevant to the assessment year 20.....-20..... will not exceed the maximum amount which is not chargeable to income-tax.

Place Date

Signature of the Declarant

PART II

[To be filled by the person responsible for paying the income referred to in column 11 of Part I]

Name of the person responsible for paying **BAJAJ FINANCE LIMITED**

Unique Identification No.

PAN of the person responsible for paying **AABCB1518L**Complete Address: **4TH FLOOR, BAJAJ FINSERV CORPORATE OFFICE, OFF PUNE AHMEDNAGAR ROAD, VIMAN NAGAR, PUNE - 411014**TAN of the person responsible for paying: **PNEB00001B**

Email ID.....

Telephone No. (with STD Code) and Mobile No. **020-30405060**Amount of income paid **Gross Interest for FY**Date on which Declaration is received

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 Date on which the income has been paid/credited (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place

Date

Signature of the person responsible
for paying the income referred to in column 10 of Part I

*Delete whichever is not applicable

As per provisions of section 206AA(2), the declaration under section 197A(1) or 197A(1A) shall be invalid if the declarant fails to furnish his valid Permanent Account Number (PAN). Declaration can be furnished by an individual under section 197A(1) and a person (other than a company or a firm) under section 197A(1A).

- Enter the name of the declarant
- Enter the PAN of the declarant
- Tick whichever status is applicable
- The financial year to which the income pertains.
- Please mention the residential status as per the provisions of section 6 of the Income-tax Act, 1961.
- 6-8. Enter residential address and contact details
- Please mention 'Yes' if assessed to tax under the provisions of Income-tax Act, 1961 for any of the assessment year out of six assessment years preceding the year in which the declaration is filed.
- Please mention the amount of estimated total income of the previous year for which the declaration is filed including the amount of income for which this declaration is made.
- Enter income from all sources, including income filled in 10. above
- In case any declaration(s) in Form No. 15G is filed before filing this declaration during the previous year, mention the total number of such Form No. 15G filed along with the aggregate amount of income for which said declaration(s) have been filed.
- Mention the distinctive number of shares, account number of term deposit, recurring deposit, National Savings Schemes, life insurance policy number, employee code, etc.
- Indicate the capacity in which the declaration is furnished on behalf of a HUF, AOP, etc.

Before signing the declaration/verification, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income-tax Act, 1961 and on conviction be punishable-

- In a case where tax sought to be evaded exceeds twenty-five lac rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine;
- In any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.

The person responsible for paying the income referred to in column 10 of Part I shall allot a unique identification number to all the Form No. 15G received by him during a quarter of the financial year and report this reference number along with the particulars prescribed in rule 31A(4)(vii) of the Income-tax Rules, 1962 in the TDS statement furnished for the same quarter. In case the person has also received Form No.15H during the same quarter, please allot separate series of serial number for Form No. 15G and Form No. 15H.

The person responsible for paying the income referred to in column 10 of Part I shall not accept the declaration where the amount of income of the nature referred to in sub-section (1) or sub-section (1A) of section 197A or the aggregate of the amounts of such income credited or paid or likely to be credited or paid during the previous year in which such income is to be included exceeds the maximum amount which is not chargeable to tax. For deciding the eligibility, he is required to verify income or the aggregate amount of incomes, as the case may be, reported by the declarant in columns 10 and 12.

KYC DOCUMENTATION FOR OPENING ACCOUNT

Please note that these guidelines are based on the RBI Master Directions - Know Your Customer (KYC) Direction, 2016 updated as on January 04, 2024 and the PMLA and UIDAI Notifications issued thereafter.

(A) KYC Documents for an Account of Individual, and for Karta, Trustee, Partner, Proprietor, Authorised Signatory, Power of Attorney Holder:

- (1) One recent **Photograph**
- (2) **PAN** or Form 60 if PAN is not allotted
- (3) **Certified Copy** * of one of the Officially Valid Documents (OVDs) listed below:

Sr. No.	Proof of Identity (PoI)	Proof of Address (PoA)
i	Valid Passport	Valid Passport
ii	Valid Driving License	Valid Driving License
iii	Voter's Identity Card issued by Election Commission of India	Voter's Identity Card issued by Election Commission of India
iv	Proof of possession of Aadhaar Number (i.e. Aadhaar letter downloaded from UIDAI website, Aadhaar card) **	Proof of possession of Aadhaar Number (i.e. Aadhaar letter downloaded from UIDAI website, Aadhaar card) **
v	Job Card issued by NREGA duly signed by an officer of the State Government	Job Card issued by NREGA duly signed by an officer of the State Government
vi	-	Letter issued by the National Population Register containing details of Name, Address of the customer
* Obtaining a Certified Copy by Reporting Entity (this includes our Company) means comparing the copy of Officially Valid Document (OVD) so produced by the client (i.e. customer) with its Original and recording the same on the copy by the authorised officer of the Reporting Entity"		
** To Ensure that the first Eight Digits of Aadhaar No. (on copy of Aadhaar Letter/Aadhaar Card obtained), must be redacted or blackened and it is not legible and the Aadhaar No. should not be entered/stored in any system .		

- (4) In case **OVD** does not have **Current Address** of the client, obtain below listed documents which are treated as **Deemed to be Officially Valid Documents (DOVD)** for the limited purpose of **Proof of Address**:

Sr. No.	Proof of Address (PoA)
i	Utility bill , in the name of the client, which is not more than two months old of any service provider (Electricity, Telephone, Post-paid Mobile Phone, Piped Gas, Water bill)
ii	Property or Municipal tax receipt
iii	Pension or Family Pension Payment Orders (PPOs) issued to retired employees by Government Departments or Public-Sector Undertakings, if they contain the address
iv	Letter of Allotment of Accommodation from Employer issued by State Government or Central Government Departments, Statutory or Regulatory Bodies, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and Listed Companies, and Leave & License Agreements with such employers allotting official accommodation
In case a client submits Deemed to be OVD (DOVD) towards Current Address, client must submit an OVD mentioned in (A)(3) , updated with Current Address, within three months of submission of the DOVD.	

(B) KYC Documents for an Account of SOLE PROPRIETORSHIP CONCERN:

- (1) **KYC Documents** of the **Proprietor** as per the KYC Documents for Individual mentioned in **Point A**, and
- (2) Any of the **Two** documents in the name of the Proprietorship Concern as **Proof of Business / Activity** mentioned below:

Sr. No.	Proof of Business/ Activity in the name of the Proprietorship Concern
i	Registration certificate including Udyam Registration Certificate (URC) issued by the Government
ii	Certificate / License issued by the Municipal Authorities under Shop & Establishment Act
iii	Sales and Income Tax returns
iv	GST/ CST/ VAT certificate (Provisional / Final)
v	Certificate / Registration document issued by Sales Tax / Service Tax / Professional Tax Authorities
vi	Importer Exporter Code (IEC) issued to the Proprietorship Concern by the office of DGFT/ Licence/Certificate of Practice issued in the Name of the Proprietorship Concern by any Professional Body Incorporated under a Statute
vii	The complete Income Tax return (not just the acknowledgement) in the Name of the Sole Proprietor where the firm's income is reflected and the same is duly authenticated / acknowledged by the Income Tax Authorities
viii	Utility Bills such as Electricity, Water, and Landline Telephone bills in the Name of the Proprietorship Concern
ix	Udyam Registration Certificate (URC) issued by the Government

(C) KYC Documents for an Account of PARTNERSHIP FIRM:

Sr. No.	Document Name
i	Registration Certificate
ii	PAN of the Firm (PAN is mandatory)
iii	Partnership Deed
iv	One recent Photograph, PAN or Form 60, and valid OVD of the person holding an Attorney to transact on its behalf as per Point (A)
v	Beneficial Ownership Declaration & KYC Documents of BO as per Point (A)
vi	Document specifying the names of all the partners
vii	Address proof of the registered office, and the principal place of its business, if it is different.

(D) KYC Documents for an Account of TRUST:

Sr. No.	Document Name
i	Registration Certificate
ii	Trust Deed
iii	PAN / Form 60 of the Trust
iv	One recent Photograph, PAN or Form 60, and valid OVD of the person holding an Attorney to transact on its behalf as per point (A).
v	Beneficial Ownership Declaration & KYC documents of BO as per Point (A)

(E) KYC Documents for an Account of an UNINCORPORATED ASSOCIATION OR BODY OF INDIVIDUALS:

Sr. No.	Document Name
i	Resolution of the Managing Body of such Association or Body of Individuals
ii	Permanent Account Number or Form No. 60 of the unincorporated association or a body of individuals
iii	Power of Attorney (POA) granted to attorney holder to transact on its behalf
iv	One recent Photograph, PAN/ Form 60 and valid OVD of the person holding an Attorney to transact on its behalf. (Attorney holder means Manager, Officer, Employee, Authorised Signatory, etc. holding an Attorney to transact on behalf of the client as mentioned in Point (A))
v	Such information as may be required to collectively establish the legal existence of such Association or Body of Individuals
vi	Beneficial Ownership Declaration & KYC documents of BO as per Point (A)

(F) KYC Documents for an Account of HINDU UNDIVIDED FAMILY (HUF):

Sr. No.	Document Name
i	Deed of Declaration of HUF or HUF Letter having Name and Signature of all Adult Male and Female Co-Parceners
ii	PAN of HUF
iii	One recent Photograph, PAN or Form 60, and valid OVD of the person holding an Attorney to transact on its behalf as per Point (A).

(G) KYC Documents for an Account of a LIMITED LIABILITY PARTNERSHIP FIRM:

Sr. No.	Proof of Business/ Activity in the name of the Proprietorship Concern
i	Limited Liability Partnership Agreement
ii	Certificate of Incorporation
iii	PAN of the LLP (PAN is mandatory)
iv	List of all existing designated partners of the LLP along with the Designated Partner Identification Number (DPIN) issued by the Central Government (on the letterhead of the LLP)
v	Resolution passed at the meeting of the Designated Partners for placing such Deposit/borrowing request with BFL.
vi	Proof of Address in the name of LLP
vii	One recent Photograph, PAN or Form 60, and valid OVD of the person holding an Attorney to transact on its behalf as per Point (A).
viii	Beneficial Ownership Declaration & KYC documents of BO as per Point (A).

(H) KYC Documents for an Account of ARTIFICIAL JURIDICAL PERSON:

Sr. No.	Proof of Business/ Activity in the name of the Proprietorship Concern
i	Document showing name of the person authorised to act on behalf of the entity
ii	One recent Photograph, PAN or Form 60, and valid OVD of the person holding an Attorney to transact on its behalf as per Point (A).
iii	Such documents as may be required by the RE to establish the legal existence of such an entity/juridical person

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Deposit ID (for existing customers) _____ Customer ID (for existing customers) _____

[illegible][illegible]

I / We the undersigned hereby declare that our company/ holding company is listed on _____ Stock Exchange.

Name of the Holding Company, M/s _____

In case of Any Entity other than a Listed Company, Section – I, and if applicable, Section – II to be ticked and filled in.

I / We, the undersigned, hereby declare that following persons own Controlling Ownership Interest of more than 10% in case of Company, 10 % or more in case of Trust, more than 10% in case of Partnership Firm and more than 15% in case of Unincorporated Association or Body of Individuals. (Refer Notes - A)

Sr. No.	Name of Shareholders / Beneficial Owners / Partners / Trustees etc.	Address of Share-holders / Beneficial Owners / Partners / Trustees etc.	Beneficial Owner Type (Refer Note C)	Details of KYC Doc. & KYC Identifier	PAN / Registration No.	Nationality	% of Shareholding Profits / Interest / Ownership in the Entity
1.							
2.							
3.							
4.							

Please use additional sheet in case of more information to disclose

Applicable only if there is / are non-individual shareholder(s) / partners etc. having controlling ownership interest in excess of the prescribed threshold as declared in **Section - I (i)**

Following persons(s), have controlling ownership interest in Beneficial Owner of the Entity as declared in **Section - I (i)** above.

Sr. No.	Name of Shareholders / Beneficial Owners / Partners / Trustees etc.	Address of Share-holders / Beneficial Owners / Partners / Trustees etc.	Beneficial Owner Type (Refer Note C)	Details of KYC Doc. & KYC Identifier	PAN / Registration No.	Nationality	% of Shareholding / Profits / Interest / Ownership in the Entity
1.							
2.							
3.							
4.							

Please use additional sheet in case of more information to disclose

Section – II

Applicable, if no person has controlling ownership in excess of the prescribed threshold as declared in **Section – I.**

Please provide the details of natural person(s) holding the position of Directors/ Senior Management in the entity (e.g., Directors/ Partners/ Trustees/ etc.) details in Section I (ii).

☐ I / We declare that no person / entity holds controlling ownership in the captioned company in excess of the threshold limit prescribed below.

Authorised Signatory (ies) (i) _____

Signature _____

Authorised Signatory (ies) (ii) _____

Signature _____

Authorised Signatory (ies) (ii) _____

Signature _____

A. As per the Prevention of Money laundering (Maintenance of Records) Rules, 2005,

The beneficial owner for the purpose of sub-rule (1) shall be determined as under –

- (a) Where the client is a **Company**, the beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical person, has a **controlling ownership interest** or who **exercises control through other means**. Explanation - For the purpose of this sub-clause-
 - i. **"Controlling ownership interest"** means ownership of or entitlement to more than 10% of shares or capital or profits of the company;
 - ii. **"Control"** shall include the **right to appoint majority of the directors or to control the management or policy decisions** including by virtue of their shareholding or management rights or shareholders' agreements or voting agreements;
- (b) Where the client is a **Partnership firm**, the beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical person, has **ownership of / entitlement to more than 10% of capital or profits** of the partnership;
- (c) Where the client is an **Unincorporated Association or Body of Individuals**, the beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical person, has **ownership of or entitlement to more than 15% of the property or capital or profits** of such association or body of individuals;
- (d) Where no natural person is identified under (a) or (b) or (c) above, the beneficial owner is the **relevant natural person who holds the position of senior managing official**;
- (e) Where the client is a **Trust**, the identification of beneficial owner(s) shall include **identification of the author of the trust, the trustee, the beneficiaries with ten percent or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership**; and
- (f) Where the customer or the owner of the controlling interest is a Company listed on a stock exchange in India, or is a subsidiary of such a company, or is an entity resident in jurisdictions notified by the Central Government and listed on stock exchanges in such jurisdictions, it is NOT necessary to identify and verify the identity of any shareholder or beneficial owner of such companies.

B. Beneficial Ownership Declaration is NOT required in following cases:

Individual accounts, Sole Proprietorship accounts, HUF, Government Departments, Public Sector Undertaking, Local Government Bodies (Municipal Corporation, Gram Panchayats etc.), Company listed on a recognized stock exchange. An entity resident in jurisdictions notified by the Central Government and listed on stock exchanges in such jurisdictions Majority owned subsidiary of a Company listed on a recognized stock exchange.

C. Beneficial Ownership Declaration to provide details of following

Partnership Firm / LLP: natural persons / partners,	Club: Members / Authorised Signatories / Beneficiary
Trust: Trustees / Settlor / Protector / Beneficiary	Association of Persons: Members / Auth. Signatories / Beneficiary
Foundation: Founder managers/Directors / Beneficiary	Pvt. Ltd companies and Unlisted Public Ltd Companies: Shareholder / Directors / Other Beneficiaries
Society: Members/Authorised Signatories / Beneficiary	In case of Foreign Entity: Shareholder/Director/Other Beneficiaries

D. Signature on Declaration form

Sr. No.	Type of Entity	Signatory (ies) for Signing BO Declaration
i	Partnership Firm / LLP / Trust / Foundation / Society / Club	Authorised Signatories should sign as per the Mode of Operations
ii	Association	All Authorised Signatories should sign
iii	Unlisted Public Limited Companies and Private Limited Companies	Any two Directors or Company Secretary or Authorised Signatories as per Mode of Operations
iv	Foreign Entity	All Authorized Signatories should sign

E. KYC Documents of Beneficial Owners should be submitted as per the OVD under PMLA and RBI Guidelines.

- (1) One recent Photograph
- (2) PAN or Form 60 if PAN is not allotted
- (3) Certified Copy * of one of the Officially Valid Documents (OVDs) listed below:

Sr. No.	Proof of Identity (PoI)	Proof of Address (PoA)
i	Valid Passport	Valid Passport
ii	Valid Driving License	Valid Driving License
iii	Voter's Identity Card issued by Election Commission of India	Voter's Identity Card issued by Election Commission of India
iv	Proof of possession of Aadhaar Number (i.e. Aadhaar letter downloaded from UIDAI website, Aadhaar card) **	Proof of possession of Aadhaar Number (i.e. Aadhaar letter downloaded from UIDAI website, Aadhaar card) **
v	Job Card issued by NREGA duly signed by an officer of the State Government	Job Card issued by NREGA duly signed by an officer of the State Government
vi	-	Letter issued by the National Population Register containing details of Name, Address of the customer

* Obtaining a Certified Copy by Reporting Entity (this includes our Company) means comparing the copy of Officially Valid Document (OVD) so produced by the client (i.e. customer) with its Original and recording the same on the copy by the authorised officer of the Reporting Entity"

** To Ensure that the Aadhaar No. (on copy of Aadhaar Letter/Aadhaar Card obtained), must be redacted or blackened and it is not legible and the Aadhaar No. should not be entered/stored in any system.

Vernacular Declaration Form

English	<input type="checkbox"/>	I/We confirm that the content of this Application / Terms and Conditions were read out and explained to me / us in English and I/We confirm to have understood the same.
Hindi	<input type="checkbox"/>	मैं/हम यह पुष्टि करता हूँ/करती हूँ/करते हैं कि इस आवेदन/नियम एवं शर्तों की सामग्री को हिंदी में पढ़ कर मुझे/हमें समझाया गया था और मैं/हम उनके समझने की पुष्टि करता हूँ/करती हूँ/करते हैं।
Bengali	<input type="checkbox"/>	আমি / আমরা নিশ্চিত করছি যে এই আবেদন / নিয়ম এবং শর্তাবলী সম্পর্কে বিস্তারিত সামগ্রীটি পড়েছি এবং আমাকে / আমাদের সেটা বাংলায় ব্যাখ্যা করে বোঝানো হয়েছে এবং আমি / আমরা এটিকে বুঝেছি বলে নিশ্চয়তা প্রদান করছি
Tamil	<input type="checkbox"/>	இந்த விண்ணப்பம்/வரையறைகள் மற்றும் நிபந்தனைகளிலுள்ள விபரங்களை எனக்கு / எங்களுக்கு தமிழில் படித்துக் காட்டி விளக்கப்பட்டது என்றும் அவற்றை நான்/நாங்கள் புரிந்து கொண்டிருக்கிறேன்/புரிந்து கொண்டிருக்கிறோம் என்று நான்/நாங்கள் உறுதி அளிக்கிறோம்.
Punjabi	<input type="checkbox"/>	ਮੈਂ/ਅਸੀਂ ਪੁਸ਼ਟੀ ਕਰਦੇ ਹਾਂ ਕਿ ਇਸ ਬਿਣ-ਪੱਤਰ/ਨਿਯਮ ਅਤੇ ਸ਼ਰਤਾਂ ਦੀ ਸਮੱਗਰੀ ਮੈਨੂੰ/ਸਾਨੂੰ ਪੰਜਾਬੀ ਵਿੱਚ ਪੜ੍ਹ ਕੇ ਸੁਣਾਈ ਗਈ ਅਤੇ ਸਮਝਾਈ ਗਈ ਸੀ ਅਤੇ ਮੈਂ/ਅਸੀਂ ਪੁਸ਼ਟੀ ਕਰਦੇ ਹਾਂ ਕਿ ਸਾਨੂੰ ਇਸ ਦੀ ਸਮਝ ਲੱਗ ਗਈ ਹੈ।
Urdu	<input type="checkbox"/>	میں/ہم تصدیق کرتا ہوں/کرتے ہیں کہ اس درخواست/ شرائط و ضوابط کے متن کو مجھے/ہمیں انگریزی میں پڑھ کر سنا دیا گیا ہے اور اس کی وضاحت کردی گئی ہے اور میں/ہم تصدیق کرتا ہوں/کرتے ہیں کہ میں/ہم نے اسے سمجھ لیا ہے۔
Malayalam	<input type="checkbox"/>	ഈ അപേക്ഷ / നിബന്ധനകളും വ്യവസ്ഥകളും എന്നിവയിലെ ഉള്ളടക്കം എനിക്ക്/ഞങ്ങൾക്ക് വായിച്ചുതരികയും മലയാളത്തിൽ എനിക്ക്/ഞങ്ങൾക്ക് വിശദീകരിച്ചുതരികയും ചെയ്തതായി ഞാൻ / ഞങ്ങൾ സ്ഥിരീകരിക്കുന്നു. എനിക്ക്/ഞങ്ങൾക്ക് അവ മനസ്സിലായി എന്ന് ഞാൻ / ഞങ്ങൾ സ്ഥിരീകരിക്കുകയും ചെയ്യുന്നു.
Gujarati	<input type="checkbox"/>	આથી હું/અમે એ વાતની પુષ્ટિ કરીએ છીએ કે, આ અરજી/નિયમો અને શરતોના લખાણને મારી/અમારી સમક્ષ ગુજરાતીમાં વાંચી સંભળાવવામાં આવ્યું હતું અને અમને સમજાવવામાં આવ્યું હતું અને મેં/અમે તેને સમજી લીધું હોવાની હું/અમે પુષ્ટિ કરું છું/કરીએ છીએ.
Telugu	<input type="checkbox"/>	ఈ అప్లికేషన్/నియమ నిబంధనల్లోని విషయంనాకు/మాకు తెలుగులోచదివి వినిపించబడిందని మరియు వివరించబడిందని మరియు నేను/మేము దీనిని అర్థం చేసుకున్నామని నేను/మేము ధృవీకరిస్తున్నాం.
Oriya	<input type="checkbox"/>	ମୁଁ/ଆମେ ସ୍ୱାକ୍ଷର କରୁଅଛୁ ଯେ ଏହି ବରଖାସ୍ତ/ନିୟମ ଓ ସର୍ତ୍ତାବଳୀର ବିଷୟବସ୍ତୁ ଆମକୁ ଇଂରାଜୀରେ ପଢ଼ି ଶୁଣାଇ ଦିଆଯାଇଛି ଏବଂ ବୁଝାଯାଇଛି ଏବଂ ମୁଁ/ଆମେ ତାହାକୁ ବୁଝିପାରୁ। ସମ୍ମତି ଜଣାଉଛୁ ।
Kannada	<input type="checkbox"/>	ಈ ಮೂಲಕ ನಾನು/ಪತ್ರದಲ್ಲಿರುವ ನಿಮಯ ಮತ್ತು ಷರತ್ತುಗಳನ್ನು ನಮಗೆ ಕನ್ನಡದಲ್ಲಿ ಓದಿ ಹೇಳಲಾಗಿದೆ ಮತ್ತು ನಾನು/ನಾವು ಅದನ್ನು ಅರ್ಥೈಸಿಕೊಂಡಿದ್ದೇವೆ.
Marathi	<input type="checkbox"/>	मी/आम्ही यास पुष्टी देतो/देते की या अर्जातील/नियम व अटीमधील मजकूर मला/आम्हाला मराठीत वाचून दाखवण्यात आला आणि समजावून देण्यात आला आणि मला/आम्हाला तो समजला असल्याची मी/आम्ही पुष्टी देतो/देते.
Assamese	<input type="checkbox"/>	মই/আমি নিশ্চিতি কৰিছো যে এই আবেদন / নীতি আৰু চৰ্তাৱলীত থকা সবিশেষ তথ্য আমি ভালদৰে পঢ়িছো আৰু মোক / আমাক এই বিষয়ে সবিশেষ অসমীয়াত বাখ্যা কৰি বুজোৱা হৈছে আৰু মই / আমি এই বিষয়ে সমগ্ৰ কথা বুজি পাইছো বুলি নিশ্চিতি প্ৰদান কৰিলো।
Konkani	<input type="checkbox"/>	ह्या अर्जाची/नेम आनी अटींची सामुग्री कोंकणी भाशेंतल्यान वाचून दाखोवन, म्हाका/आमकां वर्णीत केल्या हाची हांव/आमी खात्री दितां/दितात आनी हांव/आमी ती समजलां/समजल्यात म्हूण खात्री दितां/दितात.



Authorised Signatories/PoA Holder/Karta



Authorised Signatories/PoA Holder/Karta



Thank you for trusting us

Application Acknowledgement

Application Number

Name of Applicant F I R S T M I D D L E L A S T

Cheque/UTR No.

Amount INR Tenor Months ROI %

Bank name Branch Account type

Bank account No. IFSC Transaction date D D M M Y Y Y Y

Write to us at wecare@bajajfinserv.in or call our IVR on **8698 01 01 01**

This application acknowledgement is valid only till the issuance / rejection of the Fixed Deposit Receipt.

For BAJAJ FINANCE LTD

*Rate of Interest applicable and Interest payable on a Deposit will be calculated from the date of receipt/realization of amount by BFL.

Beneficial Owner - Know Your Customer (KYC) and FATCA/CRS Form

Personal Details ☐ Mr. ☐ Ms. ☐ Mrs.

Name of applicant F I R S T M I D D L E L A S T

[illegible]

Customer Category ☐ Relative of Director ☐ Director or Promoter of BFL ☐ Shareholder ☐ Politically Exposed Person (PEP) ☐ Relative of PEP

Gender ☐ Male ☐ Female ☐ Third Gender / Others **Marital Status** ☐ Married ☐ Unmarried ☐ Others

Email ID

[illegible]

Annual income ☐ Up to Rs. 15 Lakhs ☐ Rs. 15 Lakhs – Rs.50 Lakhs ☐ above Rs.50 Lakhs

Occupation ☐ Self-employed/Business ☐ Private sector Job ☐ Public Sector Job ☐ Govt. Job

☐ Retired ☐ Professional ☐ Housewife ☐ Student ☐ Others

Family Details ☐ Father ☐ Mother ☐ Spouse

Name F I R S T M I D D L E L A S T

Please do not staple

Deemed to be OVDs***

Proof of Identity (PoI)	Proof of Address (PoA)	PoI/ PoA No.	Expiry Date	Documents
<input type="checkbox"/> Aadhaar* <input type="checkbox"/> Valid Passport <input type="checkbox"/> Valid Driving Licence <input type="checkbox"/> Voter ID Card <input type="checkbox"/> NREGA Job Card *First 8 digits of Aadhaar No. must be blackened/redacted before submission to BFL	<input type="checkbox"/> Aadhaar* <input type="checkbox"/> Valid Passport <input type="checkbox"/> Valid Driving Licence <input type="checkbox"/> Voter ID Card <input type="checkbox"/> Letter issued by National Population Register <input type="checkbox"/> NREGA Job Card	***** <div> <div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div> </div> ***** *****	***** <div> <div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>D</div><div>D</div><div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> ***** *****	<input type="checkbox"/> Utility bill (not more than two months old) <input type="checkbox"/> Property/Municipal tax receipt <input type="checkbox"/> Pension or Family Pension Payment Orders (PPOs) <input type="checkbox"/> Letter of allotment of accommodation from employer issued by SG/CG, Statutory/Regulatory bodies, PSU, SCB, FIs & Listed Co. and LL agreement with such employers allotting official accommodation

FATCA (to be filled only if BO is NRI/OCI/PIO/Foreign National)[illegible][illegible][illegible]

Visa Type

Visa Issue Date

D

D

M

M

Y

Y

Y

Y

[illegible][illegible][illegible]

US Person ☐ No ☐ Yes, I am a US citizen ☐ Yes, I am a green card holder

Are you tax resident in any other country outside India ☐ No ☐ Yes

If yes, country of Tax Residence Tax identification No (TIN) or functional equivalent

Type of Tax Identification ☐ TIN ☐ SSN ☐ Passport ☐ Others

Permanent Address Details

[illegible][illegible]

Address Proof Document No

Document Expiry Date DD MM YY YY ☐ **Is Preferred Communication Address**

☐ Is Residence Address same as Permanent Address?

Current Address Details

Area/Locality Landmark

City

State

Pin

Address Proof Document No

Document Expiry Date ☐ Is Preferred Communication Address

