Form 2 A

KNOW YOUR CUSTOMER (KYC) PROFILE

(To be retained by the Participant)

In instances where the Securities Account will be maintained through a Custodian Bank, it is not mandatory to complete this Form 2A.

We declare that the information set out below is true and accurate and our investments will be in accordance with such information.

1. Nature of the Business (Product/ Service provided)

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2. Expected value of Inv	vestmo	e nt per annum (Please mark p	olacing a v	<i>V</i>	
Less than Rs. 100,000		Rs 1,000,000 to Rs 2,000,000		Rs 4,000,000 to Rs 5,000,000	
Less than Ks. 100,000				Ks 4,000,000 to Ks 5,000,000	
Rs 100.000 to Rs 500.000	_	Rs 2,000,000 to Rs 3,000,000		Rs 5,000,000 to Rs 10,000,000	
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Rs 500,000 to Rs 1,000,000		Rs 3,000,000 to Rs 4,000,000		Over Rs 10,000,000	
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3. Source of funds (<i>Please mark placing a</i> $$)													
Business Ownership		Investment Proceeds/ Savings		Commission Income									
Business Turnover		Sale of Property/ Assets		Export proceeds									
Investments		Gifts		Profits									
Contract Proceeds		Donations / Charities (Local / Foreign)		Others (Specify)									

4. Are you a US Person in terms of the Foreign Account Tax Compliance Act (FATCA) of the US? (Please mark placing a √)	Yes	No
If yes, FATCA declaration has to be submitted along with application form. If No, In the event if I/We become a US person under FATCA of US, I/ We do hereby		
undertake to inform the said fact to the Participant immediately		

5. Politically Exposed Persons (PEPs) (Please mark placing a $$)	Yes	No							
Do you have persons who are or have been entrusted domestically/ Internationally with a prominent public function (for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials.), as members of senior management or individuals who have been entrusted with equivalent functions, <i>i.e.</i> directors, deputy directors and members of the board or equivalent functions.									
If "Yes" please clarify									

6. Any other connected Businesses/ Professional activities

7. Person(s) authorized to give instructions to the Participant (Stockbroker/Custodian Bank)																						
NAME/S & DESIGNATION																						
TELEPHONE																						
FAX																						
MOBILE/S																						
E-MAIL																						
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8. Other remarks / notes (if any)