ACCOUNT OPENING FORM SUPPLEMENT - FATCA (Individuals)

INTEGRATED ENTERPRISES (INDIA) LIMITED
'Kences Towers' No.1, Ramakrishna Street,
North Usman Road, T. Nagar, Chennai-600 017.

PLEASE FURNISH THE BELOW INFORMATION ALONG WITH SUPPORTING DOCUMENTS.

Please check (✓) Yes or No to each of the following questions Please complete in BLOCK LETTERS

	1st Applicant	2nd Applicant	3rd Applicant
Name			
Country of Residence			
Country of Birth			
1. Are you a U. S. Resident?	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
2. Are you a U.S. Citizen?	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
3. Do you hold a U.S. Permanent Resident Card (Green Card Holder)?	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
4. If answer to any of the questions from 1 to 3 is Yes then please provide your Tax Identification Number which is your Social Security Number in Form W9	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
5. Resident/Citizen of any other Country Specify the Country	Yes ☐ No ☐ _____	Yes ☐ No ☐ _____	Yes ☐ No ☐ _____

I hereby confirm that the information provided above is true, accurate and complete.

Subject to applicable laws I hereby consent for INTEGRATED or any of it's affiliates (including branches) (collectively INTEGRATED) to share my information with domestic or overseas regulators or tax authorities where necessary to establish my tax liability in any jurisdiction.

Where required by the domestic or overseas regulators or tax authorities, I consent and agree that INTEGRATED may withhold from my account(s) such amounts as may be required according to applicable laws, regulations and directives.

I undertake to notify INTEGRATED within 30 Calendar Days if there is a change in any information which I have provided to INTEGRATED.

1. X_____ 2. X_____ 3. X_____

Signature of the Applicant (s)