

Annexure - For Serving Defence Personnel Only

Fatca And Crs - Self Certification Form For Individuals

(Please consult your professional tax advisor on your tax residency and related FATCA and CRS guidance)

A. FATCA and CRS Information (Self Certification)

PAN												
Name												
Type of Address (given at KRA)	<input type="checkbox"/> Residential		<input type="checkbox"/> Business		<input type="checkbox"/> Residential/Business		<input type="checkbox"/> Registered Office		<input type="checkbox"/> Unspecified			
Nationality/Citizenship	Gender			Date of Birth			D	D	M	M	Y	Y
Mobile	Place of Birth			Country of Birth								
US Person	<input type="checkbox"/> Yes		<input type="checkbox"/> No									
Father's Name												
Spouse's Name												
Identification Document (if PAN not Provided)	<input type="checkbox"/> Passport		<input type="checkbox"/> Election ID Card		<input type="checkbox"/> Govt. ID Card		<input type="checkbox"/> Driving Licence					
	<input type="checkbox"/> UIDAI Card		<input type="checkbox"/> NREGA Card		<input type="checkbox"/> Others _____							
Identification number of the document provided												

In case you are declaring US person status as 'No' but your Country of Birth is US please provide document evidencing of Citizenship. If not available provide reasons for not having relinquishment certificate.
Please also fill Annexure: Self-Certification.

Are you a tax resident of country other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:				
S. No.	Country of Tax Residency #	Tax Payer Identification Number^	Identification Type (TIN or other, please specify)	If no TIN available, enter reason A ~, B ~ or C ~
1.				

#To also include USA, where the individual is a citizen/green card holder of USA.

^In case Tax Identification Number is not available, kindly provide its functional equivalent.

- ~ Reason A - The country where the Account Holder is 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
- ~ Reason C - No TIN is required. (Only select this reason if the authorities of the country of tax residence entered above do not require the TIN to be disclosed)

In case any of the parameters above indicates that you are a US person or a person resident outside of India for tax purpose and you do not have Taxpayable Identification Numbers/Functional equivalent, Please complete and sign the Annexure: Self-Certification

B. Customer Declaration (Applicable for all customers)

(i) Under penalty of perjury, I/we certify that:

1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person)
 2. The applicant is an applicant taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the account holder is a tax resident outside of India)
- (ii) I/We understand that the Pramerica Life Insurance Limited is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA/CRS. The Pramerica Life Insurance Limited is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/We shall seek advice from professional tax advisor for any tax questions.
- (iii) I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- (iv) I/We agree that as may be required by domestic regulator/tax authorities the Pramerica Life Insurance Limited may also be required to report, reportable details to CBDT or close or suspend my account.
- (v) I/We certify that I/We provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

Date:

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

Name:

Signature

Annexure: Self-Certification

To be filled only if-

- a) Name of the country in Part-A is other than India and TIN or functional equivalent is not available. or
- b) US person is mentioned as Yes in Part-A, and TIN in not available

	Signature
--	-----------

Annexure - For Serving Defence Personnel Only

Document Proof submitted (Please tick document being submitted)

Passport
 Election ID Card
 PAN Card
 Driving License
 UIDAI Letter
 NREGA Job Card
 Govt. Issued ID Card

63. Details of Related Person: (In case additional related persons, please fill Related Person details)

Addition of related Person
 Deletion of Related Person
 KYC Number of Related Person (is available)

Related Person Type
 Guardian of Minor
 Assignee
 Authorized Representative

Name
 Prefix
 First Name
 Middle Name
 Last Name

(In KYC number and name are provided, below details of section 6 are optional)

Proof of Identity [PoI] of Related Person (Please see instruction (H) at the end)

A- Passport Number
 Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence
 Driving Licence Expiry Date

E- UID (Aadhaar)

F- NREGA Job Card

Z- Others (any document notified by the central government)
 Identification Number

S- Simplified Measures Account - Document Type code
 Identification Number

64. Remarks: (If any)

65. Address in the Jurisdiction details where applicant is resident outside India for tax purposes (Applicable if section 2 of part A is ticked)

Same as Current / Permanent / Overseas Address details
 Same as Correspondence / Local Address details

Line 1

Line 2

Line 3
 City / Town / Village

State
 ZIP / Post Code
 ISO 3166 Country Code

66. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I 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 hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date:
 Place:
 Signature/Thumb Impression of Applicant

67. Attestation / For Office use only

Documents Received Certified Copies

KYC Verification Carried out by	Institution Details
Date <input type="text"/>	Name <input type="text"/>
Emp. Name <input type="text"/>	Code <input type="text"/>
Emp. Code <input type="text"/>	
Emp. Designation <input type="text"/>	
Emp. Branch <input type="text"/>	
Employee Signature <input type="text"/>	Institution Stamp <input type="text"/>

Annexure – 'A'
Section 45 – Policy shall not be called in question on the ground of mis-statement after three years

1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later. (2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. (3) notwithstanding anything contained in sub-section(2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer:- Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive. (4) A policy of the life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of the revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of the fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation. Mis-statement of or suppression of shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer, the onus is on the insurer to show that had the insurer been aware of the said fact no life insurance policy would have been issued to the insured. (5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if it is entitled to do so, and no policy shall be deemed to be called in question merely because the term of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal. Please refer to our website or contact our office for the details under the above mentioned Section 45.