

II. COMMERCIAL INFORMATION AND VERIFICATION

1. Description of Business Operations of the account holder entity:

Nature of business activity/business model :

What is the service / product being offered by the entity : _____

Total Market share (in %),	<input type="checkbox"/> <1	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5-25	<input type="checkbox"/> >25	<input type="checkbox"/>	<input type="checkbox"/>
Number of employees	<input type="checkbox"/> <10	<input type="checkbox"/> 10-50	<input type="checkbox"/> 51-100	<input type="checkbox"/> 51-100	<input type="checkbox"/> >100	<input type="checkbox"/>
Total Assets as of last Balance Sheet date (in INR):	<input type="checkbox"/> <5 Lakhs	<input type="checkbox"/> 5 - 50 Lakhs	<input type="checkbox"/> 50 Lakhs -	<input type="checkbox"/> 1Cr	<input type="checkbox"/> 1 - 20 Cr	<input type="checkbox"/> > 20 Cr
Financial Performance (Turnover INR):	<input type="checkbox"/> <1lakh	<input type="checkbox"/> 1-5 Lakhs	<input type="checkbox"/> 5 - 50 Lakhs	<input type="checkbox"/> 50 Lakhs -	<input type="checkbox"/> 1Cr	<input type="checkbox"/> >1Cr
Number of years in business	<input type="checkbox"/> <1	<input type="checkbox"/> 1-5	<input type="checkbox"/> 5-25	<input type="checkbox"/> >25	<input type="checkbox"/>	<input type="checkbox"/>
Annual Turnover during the previous financial year	(₹) _____ Fin Year _____					
Group Turnover during the previous financial year	(₹) _____ Fin Year _____					
Export Turnover during the previous financial year	(₹) _____ Fin Year _____ Currencies of Exports _____					
Total Import during the previous financial year	(₹) _____ Fin Year _____ Currencies of Imports _____					
Total Credit Facilities Outstanding	(₹) _____					

If the Entity is a marketing agency, retail trader or into investment business, please confirm if it is into Multi-Level Marketing firm which has investment/ deposit schemes, provides very high returns on these deposits etc. Yes No

2. Primary Locations and Trade Areas:

3. Names of Major Suppliers:

Locations of Major Suppliers:

4. Names of Major Suppliers:

Locations of Major Suppliers:

5. Does the entity engage in any of the following businesses? Yes No

- a) Currency Exchange
- b) Travel and tour operators, resorts, inns, hotels ,hospitals, retail establishments also providing currency exchange facilities in addition to their main line of business
- c) Retail establishments/tour and travel operators acting as agents of money transmitters such as Western Union/Moneygram etc.
- d) Issuers of prepaid cards/stored value such as mobile wallet/e-wallet including their distributors
- e) Distributor of mobile SIM cards/recharge outlets also offering mobile wallet loading and withdrawal facilities?

Addendum For Non-Profit Organizations

(Applicable for NGOs, Charitable Trusts, Societies etc.)

1. Purpose of the organization (please describe the NPO's mission and provide details of significant beneficiaries or class of beneficiaries):

2. Please provide details of any donor who provided 5% or more of the NPO's total annual collected funds:

Name of donor	% funds provided	Country of Residence

3. By what means are Funds collected by the NPO

- Direct Donations
- Corporate Sponsor
- Specific Endowments
- Aid Programs
- Other (Please Specify) _____

How are the funds distributed to the beneficiaries?

4. Please share details of government agencies/bodies or accreditation organization to which NPO is subject to oversight or supervision:

5. Description of operations: (include information about the NPO's locations, affiliates, scope of operations etc.)

6. Annual Report Audited: Yes No

Name of External Auditor: _____

SENIOR PUBLIC FIGURE (SPF) ADDENDUM

(please indicate who is a SPF)

1. Name of Senior Public Figure:

2. Describe the nature of the SPF's status (e.g., current or former senior official, family member, close associate, etc.):

3. Indicate how and when the position was assumed:

4. Indicate SPF's association with the entity:

Beneficial Ownership in the entity - Indicate percentage (must be 10% or more) _____

Controlling Position (CEO, Chairman, President, CFO) _____

5. Does the SPF currently have access to or the ability to move government funds: Yes No

If Yes, Please Explain: _____

6. Describe the SPF's source of wealth, family background and reputation:

Salaried

Profession. Please specify details of profession _____

Business. Please provide nature _____

Inheritance.

Investment

Other than above, please specify _____

7. Does SPF fall under any of the below categories:

Heads and Deputies - State/National Government - (including spouse and children)

National Government Ministers

Members of the National Legislature

Heads of the Armed Forces

Members of a country's most senior judiciary body, such as the Supreme Court or National Court

None of above