

*BODeclarationV1.1*  **DECLARATION OF BENEFICIAL OWNERSHIP**   
(Applicable to Pvt Ltd Company/ Public Ltd Company (Unlisted)/ Partnership/ LLP/ AOP/ HUF/ Society/ Trust/ Club/ University/ Institution)

1. Name of the Customer: Cloudstrats Technologies (P) Ltd.

2. Customer Code/ Contract Number: 8879775885

3. Legal Constitution/ Type of Entity (Please tick): Pvt Ltd Co. Public Ltd Co. (Unlisted) LLP  
 Partnership  Trust  Association  Society  Club  HUF  University  Institution  Bank  Insurance  NGO  Mutual Fund  Government.

4. CIN or Identification Number: U72300MH2014PTC253073

5. We, as stated above, hereby confirm and declare that on the below date: (Please tick the correct box)

The following natural person(s) are the Beneficial Owners. Or

There are no natural person(s), who are Beneficial Owners; therefore details of Senior Managing Officials, who are natural person(s) are stated hereunder.

(Please attach self-attested proof of KYC documents of each Beneficial Owner/ Senior Managing Official; in case of more than 5 Beneficial Owners, please use additional form.)

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| **1** |  | | | | | | |
| **Please fill-in only (i) details of Beneficial Owner holding more than 25% controlling interest (companies) or more than 15% (for other entities); if Beneficial Owner is not identifiable, please fill-in details of Senior Managing Official.** | | | | | | | |
| Full Name of  Beneficial owner/  Senior Managing Official: | | | Mr, Ms, Mrs, Dr, | | | | Affix Photo Here |
| Gender: | | |  Male;  Female | | | |
| Date of Birth: | | |  | | | |
| Address: | | |  | | | |
| Pin Code: | | |  | | | |
| PAN: | | |  | | | | |
| KYC Documents: Identity Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| KYC Documents: Address Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| Director Identification  Number (if applicable): | |  | | | | | |
| Controlling ownership  Interest (%): | |  | | | | | |
| Mobile Number(s): | |  | | | Email:  ign/Non |  | |
| Related Type: | |  Resident Indian Individual;  Foreign/Non-Resident Indian Individual | | | | | |
| Relationship: | |  Shareholder;  Proprietor;  Partner;  Trustee;  Promoter Director;  Nominee Director;  Independent Director;  Director - Since Resigned;  Other Director;  Karta;  Chairman/ Member (Society);  Member (AoP);  Others. | | | | | |

*Page 1 of 4*

*BODeclarationV1.1*

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| **2** |  | | | | | | |
| **Please fill-in only (i) details of Beneficial Owner holding more than 25% controlling interest (companies) or more than 15% (for other entities); if Beneficial Owner is not identifiable, please fill-in details of Senior Managing Official.** | | | | | | | |
| Full Name of  Beneficial owner/  Senior Managing Official: | | | Mr, Ms, Mrs, Dr, | | | | Affix Photo Here |
| Gender: | | |  Male;  Female | | | |
| Date of Birth: | | |  | | | |
| Address: | | |  | | | |
| Pin Code: | | |  | | | |
| PAN: | | |  | | | | |
| KYC Documents: Identity Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| KYC Documents: Address Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| Director Identification  Number (if applicable): | |  | | | | | |
| Controlling ownership  Interest (%): | |  | | | | | |
| Mobile Number(s): | |  | | | Email: |  | |
| Related Type: | |  Resident Indian Individual;  Foreign/Non-Resident Indian Individual | | | | | |
| Relationship: | |  Shareholder;  Proprietor;  Partner;  Trustee;  Promoter Director;  Nominee Director;  Independent Director;  Director - Since Resigned;  Other Director;  Karta;  Chairman/ Member (Society);  Member (AoP);  Others. | | | | | |

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| **3** |  | | | | | | |
| **Please fill-in only (i) details of Beneficial Owner holding more than 25% controlling interest (companies) or more than 15% (for other entities); if Beneficial Owner is not identifiable, please fill-in details of Senior Managing Official.** | | | | | | | |
| Full Name of  Beneficial owner/  Senior Managing Official: | | | Mr, Ms, Mrs, Dr, | | | | Affix Photo Here |
| Gender: | | |  Male;  Female | | | |
| Date of Birth: | | |  | | | |
| Address: | | |  | | | |
| Pin Code: | | |  | | | |
| PAN: | | |  | | | | |
| KYC Documents: Identity Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| KYC Documents: Address Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| Director Identification  Number (if applicable): | |  | | | | | |
| Controlling ownership  Interest (%): | |  | | | | | |
| Mobile Number(s): | |  | | | Email: |  | |
| Related Type: | |  Resident Indian Individual;  Foreign/Non-Resident Indian Individual | | | | | |
| Relationship: | |  Shareholder;  Proprietor;  Partner;  Trustee;  Promoter Director;  Nominee Director;  Independent Director;  Director - Since Resigned;  Other Director;  Karta;  Chairman/ Member (Society);  Member (AoP);  Others. | | | | | |

*Page 2 of 4*

*BODeclarationV1.1*

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| **4** |  | | | | | | |
| **Please fill-in only (i) details of Beneficial Owner holding more than 25% controlling interest (companies) or more than 15% (for other entities); if Beneficial Owner is not identifiable, please fill-in details of Senior Managing Official.** | | | | | | | |
| Full Name of  Beneficial owner/  Senior Managing Official: | | | Mr, Ms, Mrs, Dr, | | | | Affix Photo Here |
| Gender: | | |  Male;  Female | | | |
| Date of Birth: | | |  | | | |
| Address: | | |  | | | |
| Pin Code: | | |  | | | |
| PAN: | | |  | | | | |
| KYC Documents: Identity Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| KYC Documents: Address Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| Director Identification  Number (if applicable): | |  | | | | | |
| Controlling ownership  Interest (%): | |  | | | | | |
| Mobile Number(s): | |  | | | Email: |  | |
| Related Type: | |  Resident Indian Individual;  Foreign/Non-Resident Indian Individual | | | | | |
| Relationship: | |  Shareholder;  Proprietor;  Partner;  Trustee;  Promoter Director;  Nominee Director;  Independent Director;  Director - Since Resigned;  Other Director;  Karta;  Chairman/ Member (Society);  Member (AoP);  Others. | | | | | |

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| **5** |  | | | | | | |
| **Please fill-in only (i) details of Beneficial Owner holding more than 25% controlling interest (companies) or more than 15% (for other entities); if Beneficial Owner is not identifiable, please fill-in details of Senior Managing Official.** | | | | | | | |
| Full Name of  Beneficial owner/  Senior Managing Official: | | | Mr, Ms, Mrs, Dr, | | | | Affix Photo Here |
| Gender: | | |  Male;  Female | | | |
| Date of Birth: | | |  | | | |
| Address: | | |  | | | |
| Pin Code: | | |  | | | |
| PAN: | | |  | | | | |
| KYC Documents: Identity Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| KYC Documents: Address Proof: | | | |  Voter ID;  Passport;  Driving License;  UID;  NPR Letter | | | |
| Director Identification  Number (if applicable): | |  | | | | | |
| Controlling ownership  Interest (%): | |  | | | | | |
| Mobile Number(s): | |  | | | Email: |  | |
| Related Type: | |  Resident Indian Individual;  Foreign/Non-Resident Indian Individual | | | | | |
| Relationship: | |  Shareholder;  Proprietor;  Partner;  Trustee;  Promoter Director;  Nominee Director;  Independent Director;  Director - Since Resigned;  Other Director;  Karta;  Chairman/ Member (Society);  Member (AoP);  Others. | | | | | |

*Page 3 of 4*

*BODeclarationV1.1*

We undertake that the facts stated above are true and correct. We also undertake and agree that we will notify **Sundaram Finance Limited** without delay of any changes in the Beneficial Owners/ Senior Managing Officials as declared.

For and on behalf of [name of Customer]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature & Seal of the Authorised Official\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name of the Authorised official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation/ Position: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Place:

(\* The declaration should be signed by an active/ designated partner in case of Partnership Firm/ LLP, a trustee in case of Trust, a senior member in case of AOP, Society, Club and member of the Managing Committee in case of University and Institution, Karta in case of HUF)

**Beneficial Owner Definition:**

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| **Legal Constitution** | **Beneficial Owner Identification** |
| Company | Beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical persons, has/ have a controlling ownership interest or who exercises control through other means.  “Controlling ownership interest” means ownership of/ entitlement to **more than 25 per cent** of the shares or capital or profits of the company.  “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. |
| Partnership | Beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical person, has/ have ownership of/ entitlement to **more than 15 per cent** of capital or profits of the partnership. |
| Unincorporated  association or body of individuals (includes societies and HUF) | Beneficial owner is the **natural person(s)**, who, whether acting alone or together, or through one or more juridical person, has/ have ownership of/entitlement to **more than 15 per cent** of the property or capital or profits of the unincorporated association or body of individuals. |
| Company/ Partnership/ Unincorporated  association or body of individuals (includes societies) | Where no natural person is identified, the beneficial owner is the relevant natural person who holds the position of Senior Managing Official. |
| Trust | Beneficial owner(s) shall include identification of:  the author of the trust,  the trustee,  the beneficiaries with 15% 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. |

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We certify that the Beneficial Owners of the said customer has/ have been recorded on the basis of declaration made by the customer.

Signature of the Official: Date: Name: Place: Employee No.:

*Page 4 of 4*