

Proposal Number:_____



AML Addendum

(To be filled in for each role-Proposer/LA/Payor - individually, as applicable)

Proposal Number				
Name of Proposer/LA/Payor(as applicable)				
1. Former / Other name (if any)- Mr. / Mrs. / Ms?				
(Supporting documents are required for former /	other name)			
Have you changed your Country / City of residence in last 3 years (i) If answered Yes for Q2, Please provide details			Yes No	
(/)				
(ii) If answered Yes for Q2, Please mention date m	oved to the new Count	ry / City		
3. Have you held any other Nationalities in the pa	nst		Yes No	
If answered Yes for Q3, Please provide your pr	evious Nationalities			
(a)				
(b)				
4.	1	2	3	4
Country of tax residence (if taxes are/are also filed outside India)				
Tax Identification No.				
5. Government issued Identification number				ort etc.,)
	_			
			Date DD/M	M/Y Y Y Y
Signature (Proposer / LA / Payor)				

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