

# COMMON APPLICATION FORM FOR FIXED & RECURRING DEPOSIT



# Interest Rates For Single Deposit < Rs. 5 Cr

# **Deposit Features & Benefits**

- I Additional Interest of 0.40% for Privilege Customers##
- I Option of Auto renewal / Auto repayment
- I Trust Deposit placed with DHFL qualifies as specified investment, as defined under the section 11(5)(ix) of the Income Tax Act, 1961
- I Additional interest of 0.15% on renewal, provided deposit is renewed on or before the maturity date

Interest rates effective from 06th Aug, 2018

Tenure in Months	Minimum Deposit	Cumulative	Non Cumulative				For Privilege	Renewals
renure in Monuis	(₹)	Guillulative	Monthly	Quarterly	Half Yearly	Annual	Customers##	nellewais
12	₹ 5000	8.00%	7.70%	7.75%	7.80%	8.00%		
13#	₹ 5000	8.00%	7.70%	7.75%	7.80%	8.00%		
14	₹ 5000	8.00%	7.70%	7.75%	7.80%	8.00%		Additional
18*	₹ 5000	8.00%	7.70%	7.75%	7.80%	8.00%		interest of 0.15%
24	₹ 5000	8.30%	8.00%	8.05%	8.10%	8.30%	Additional	where, deposit is
36	₹ 5000	8.70%	8.35%	8.40%	8.50%	8.70%	interest of 0.40%	renewed on or before the
40	₹ 5000	8.75%	8.40%	8.45%	8.55%	8.75%		maturity date
48 / 60	₹ 5000	8.70%	8.35%	8.40%	8.50%	8.70%	1	maturity date
72 / 84	₹ 5000	8.50%	8.15%	8.20%	8.30%	8.50%		
96 / 108 / 120	₹ 5000	8.30%	8.00%	8.05%	8.10%	8.30%		

# Interest Rates For Single Deposit >= Rs. 5 Cr

Interest rates effective from 06th Aug, 2018

Tourse in Manualis	Minimum	Compositations	Non Cumulative				For Privilege	Danamala
Tenure in Months	Deposit (₹)	Cumulative	Monthly	Quarterly	Half Yearly	Annual	Customers##	Renewals
12	₹ 5000	8.20%	7.90%	7.95%	8.00%	8.20%		
13#	₹ 5000	8.20%	7.90%	7.95%	8.00%	8.20%		
14	₹ 5000	8.20%	7.90%	7.95%	8.00%	8.20%		Additional
18*	₹ 5000	8.20%	7.90%	7.95%	8.00%	8.20%		interest of 0.15%
24	₹ 5000	8.30%	8.00%	8.05%	8.10%	8.30%	Additional	where, deposit is
36	₹ 5000	8.70%	8.35%	8.40%	8.50%	8.70%	interest of 0.40%	renewed on or before the
40	₹ 5000	8.75%	8.40%	8.45%	8.55%	8.75%		maturity date
48 / 60	₹ 5000	8.70%	8.35%	8.40%	8.50%	8.70%	1	maturity date
72 / 84	₹ 5000	8.50%	8.15%	8.20%	8.30%	8.50%		
96 / 108 / 120	₹ 5000	8.30%	8.00%	8.05%	8.10%	8.30%		

# Recurring Deposit Scheme

Monthly Minimum Deposit (₹)	Tenure in Months	Rate of Interest % (p.a.)
1,000	From 12 months to 120 months	8.00%

# Requirements for Opening RD Scheme

- First 2 installments to be paid by Cheque Debit NACH / ECS Mandate to be given for subsequent installments. Deposit Application Form alongwith KYC Documents.
- Account payee cheque in favour of "Dewan Housing Finance Corporation Ltd."

"Interest rates are subject to change and the rate applicable would be the rate prevalent on the date of deposit. The rate of interest table is available on the DHFL website".

Indicative Yield at various Tenure Options (Cumulative option - Indicative Maturity Value of ₹ 1 lakh\$)

	General Category			Privilege Categeory			
Tenure	ROI	Indicative Yield\$	Indicative Maturity <sup>\$</sup>	ROI	Indicative Yield\$	Indicative Maturity <sup>\$</sup>	
12	8.00%	8.00%	1,08,000	8.40%	8.40%	1,08,400	
18	8.00%	8.21%	1,12,320	8.40%	8.64%	1,12,953	
24	8.30%	8.64%	1,17,289	8.70%	9.08%	1,18,157	
36	8.70%	9.48%	1,28,437	9.10%	9.95%	1,29,860	
40	8.75%	9.71%	1,32,365	9.15%	10.20%	1,34,004	
48	8.70%	9.90%	1,39,611	9.10%	10.42%	1,41,677	
120	8.30%	12.20%	2,21,965	8.70%	13.03%	2,30,301	

**Recurring Deposit Maturity Chart** 

	Amount Invested per Month (In ₹)						
Tenure in Months	1000	2000	5000	10000			
	Maturity Amount (In ₹) <sup>s</sup>						
12	12,514	25,028	62,570	1,25,139			
24	26,029	52,058	1,30,145	2,60,289			
36	40,626	81,251	2,03,126	4,06,251			
48	56,389	1,12,778	2,81,945	5,63,890			
60	73,414	1,46,828	3,67,070	7,34,140			
120	1,81,284	3,62,567	9,06,416	18,12,832			

Maturity Value and Yield displayed above are indicative only, for cumulative interest option. The maturity value and the indicative yield shown do not include any tax deduction. The maturity amount and indicative yield will change depending upon the rate of tax deduction, if applicable.

<sup>##</sup> Privilege Category: Senior Citizens, Defence personnel, Widows, DHFL Loan borrowers. #Only for Trust. \*Only for Female Depositors

- DHFL	Mandate form for NACH/	ECS (Recurring	Deposit)					
Changing Rules Changing Lives UMRN	O F F I C E U S E	O N L Y		DATE				
Tick (√) Sponsor Bank Code	ICICOTREA00			Utility Co	ode ICI	C0026100	0001992	
Create (√)  Modify(x)  I / We hereby authorize	Dewan Housing Finance Corp	poration Ltd.	to debit (Tic	<b>k</b> √) SB/	CA/CC/SBN	IRE/SB-NR	O/OTHER	
Cancel (x) Bank A/c number								
with Bank	IFSC		or I	MICR				
an amount of Rupees				₹				
FREQUENCY √ Monthly x Quan	rterly X H-Yrly X As & when prese	nted	DEBIT TYPE √	Fixed Amo	ount <b>x</b>	Maximur	m Amount	
Reference 1 Ref No: DHFL/ Phone No.								
Reference 2 E-mail Id								
PERIOD From To Or x Until Cancelled  •This is to confirm that the declaration has be	From Signature Primary Account holder Signature of Account holder Signature of Account holder  To Signature Primary Account holder Signature of Account holder Signature of Account holder							
Have understood that I am authorized to cabank where I have authorized the debit.							oorate or the	
Know your Customer (k	(YC) : Documents Requir	ed						
For Individual - Proof of Identity  Passport  Pan Card  Driving License  Voters Identity Card  Photo Debit/Credit Card issued by bank  Photo Ration Card  Addhar Card	For Individual - Proof of Address  Latest Telephone Bill of Landline / Post Paid Mobile  Latest Electricity / Gas Bill  Ration Card  Latest Bank Account Statement  Registered Rent Agreement  Latest Demat Account Statement  Addhar Card	For Trusts / Associatio Copy of Resolution to Names and Addresses PAN card copy of Trus Operation mandate Specimen signatures Trust Deed / Bye-law	invest in DHFL FD	gnatories	• Name & S	etary Concern Signature of th copy of Propr		
Copy of Memorandum & Articles of Association Opy of Resolution to invest in DHFL FD List of Directors and Office Bearers Operational Mandate and Specimen Signatures of the	For Public Compny / Private Ltd. Company / Co-operative Banks / Scheduled Bank  • Copy of Memorandum & Articles of Association  • Copy of Resolution to invest in DHFL FD  • List of Directors and Office Bearers  • Operational Mandate and Specimen Signatures of the Authorized Persons  • PAN card copy of Company and of Authorized signatories  For Partnership Firm  • Declaration of Partnership by Partners  • Name and address of Partners  • Operation Mandate and Specimen Signatures  • Operation Mandate and Specimen Signatures  • PAN card copy of firm and Authorised signatories							
PROVISIONAL RECEIPT	(Recurring Deposit)				•	m	FT.	
Application No.:					Changin	g Rules Cha	nging Lives	
Received from								
*Cheque No.		for ₹_						
Bank		Branch						
	Scheme for a period ofm							
*Subject to Realisation Authorised Signatory								
PROVISIONAL RECEIPT	(Fixed Deposit)				1.	DН	FT.	
Application No.:					Changin	g Rules Cha	nging Lives	
Received from								
*Cheque / FD Receipt No		for ₹_						
Bank		Branch						
towards Cummulative Non-	Cummulative ( Yearly Half Yearly [	Quarterly Mo	nthly) for a period	of	month	s / days	;	
@% per annum	•		-					
∗Subject to Realisation		Aut	horised Signator	у				

# GENERAL TERMS AND CONDITIONS GOVERNING THE PUBLIC DEPOSIT SCHEMES

#### 1. Acceptance of Fixed Deposits

Deposits can be accepted from Resident individuals, NRIs/PIOs, Minors under natural/ lawful guardian, Partnership Firms, HUFs, Charitable and Religious Trusts, Association of Persons, Club.

PAN number is mandatory where the deposit amount, including aggregate of all existing deposits, is equal to or more than ₹ 50,000 failing which the application will be rejected

#### 2. Non- Resident Indians(NRIs)/Persons of Indian Origin(PIOs)

Deposit from NRIs and Person of Indian Origin (PIOs) would be accepted on non-repatriation basis only,in accordance with RBI regulations governing the acceptance of deposits from NRIs, and for a maximum period of 3 years. The interest/maturity payment shall be made only by credit to NRO account with banks, after deduction of tax at source as applicable to NRO deposit of NRIs / PIOs.

#### 3. Joint Deposits Holders

Deposit can be made in the joint names with maximum of 3 persons. The interest on such joint deposits will be paid /accrued to the first named depositor and discharge given by him /her will be binding on the joint holders. The repayment of deposit will be made as per mandate provided in the application form, and discharge by such person(s) will be binding on the joint holders.

#### 4. Death Claim Settlement

In the event of death of the depositor without a nominee or without leaving a Will, the repayment of the deposit and interest due shall be made to the legal heirs and/or legal representative of the deceased on production of the following as applicable: On similar lines, in the event of death of the first depositor in a joint account, the deposit amount and interest earned shall be paid to the next in order of joint holding where as in case of death of all joint deposit holders without a nominee or a Will, deposit and interest due shall be made to the legal heirs and/or legal representative on submission of the following documents as applicable.

a) Death Claim Form b) Death certificate | Affidavit c) Indemnity bond

# 5. Application

The prescribed application form, duly accompanied by Cheque / Pay Order / Demand Draft in favour of Dewan Housing Finance Corporation Ltd. / cash (less than ₹ 20,000/- and within the Provision of the Income Tax Act) should be sent/submitted to DHFL branch. Alternatively remittance is accepted for deposit through NEFT / RTGS.

Interest rate applicable would be the rate prevalent on the date of deposit.

Application can be made in the prescribed form duly completed and accompanied by Cheque / Pay Order

/ Demand Draft / NEFT drawn in favour of 'Dewan Housing Finance Corporation Ltd'
Beneficiary Name : DEWAN HOUSING FINANCE CORPORATION LIMITED
Account No.: 914020054640010 IFSC Code : UTIB0001051
Bank Name and Branch : Axis Bank Ltd., Bandra Reclamation Branch

#### 6. Payment & Interest

Interest on the fixed deposit will be payable from the date of realisation of cheque/DD or T+2 working days, whichever is earlier, where T is the date of submission of duly completed application form at any of DHFL offices. For RTGS/NEFT fund transfers to DHFL bank account, the interest will be payable from the date of RTGS/NEFT credit in DHFL account, subject to timely intimation to DHFL. The interest for the broken period during which the deposit has been made, shall be paid at the end of the tenure. Under monthly income scheme, interest for the broken period will be paid in next month.

The Interest payment/accrual will happen on fixed dates as per schedule given below:

Interest payment option	Date of interest payment
Non Cumulative – Monthly interest option	First day of every month
Non Cumulative – Quarterly interest option	1st July, 1st October, 1st January, 31st March
Non Cumulative – Half yearly interest option	1st October, 31st March
Non Cumulative – Yearly option	31st March
Cumulative Deposits (Accrued)	31st March

In case the above mentioned dates are Sunday / holiday, then the Interest shall be payable on immediate next working day. In Cumulative Schemes, for all the New Deposit / Renewal received from 1st July 2018, Interest will be compounded on yearly basis on 31st March of every year after deducting the tax, wherever applicable. For existing Deposit / Renewal received prior to 1st July 2018, Interest will be compounded on half yearly basis, on 30th September and 31st March of every year after deducting the tax, wherever applicable. The principal along with interest will be paid on maturity once the discharged deposit receipt is received by us. In the event of death of the first/sole depositor the repayment of deposit and payment of interest will be made to the joint depositor first in order of survivors /nominee on submission of death certificate without reference to the heirs and/or legal representation of the deceased. Repayments can be done to legal heir, only on submission of required documents

To facilitate interest payment in non-cumulative scheme by direct credit to the depositor's Bank account through RTGS/NEFT depositors are required to provide copy of cancelled cheque for details on Bank Account number /branch/MICR/IFSC Code.

#### 7. Deduction of Tax at Source

Income Tax will be deducted at source under section 194A of the Income Tax Act, 1961 on interest payment of above ₹ 5000/- in a financial year subject to changes/ alterations in the said provisions by the relevant authorities. Upto and inclusive of ₹ 5000/- TDS is not applicable. For exemption of TDS, Depositors should submit to the company Form 15G/ 15H/ Order U/s10/ Order U/s 197 (as the case may be)

# 8. Nomination

Depositor can nominate another person under this facility. In joint account, the first depositor or all jointly can nominate a person. The nominee shall be recognized as the Holder of the title of the Fixed Deposit on death of the depositor/s. Power of Attorney holder investing on behalf of a depositor or a guardian investing on behalf of a minor, cannot nominate.

### 9. Deposit Receipt / Statement

DHFL Fixed Deposit Receipt (FDR)

Basis option indicated by the depositor, the deposit receipt will be sent to branch for hand delivery or dispatched by speed post/courier at the address given in the application form and the Company shall not be held responsible for any loss or delay in transit. If the deposit receipt is not received by the depositor for any reason, the depositor should write to enquire with the Company. In the event of loss / destruction / mutilation of deposit receipt, the Company may at its sole discretion issue a duplicate receipt upon receiving an Indemnity Bond executed by the depositor in the form prescribed by the Company. The deposit receipt is not transferable. In case depositor requires DHFL to send / handover the FDR to concerned intermediary, an "Authority Letter" has to be submitted by the depositor.

## Recurring Deposit Statement (RD)

After the RD account is created, the RD statement will either be couriered to depositor or would be available at the branch for pick up, as per option chosen by depositor. For subsequent RD statements, customer can either request for statements to be mailed to their registered Email ID or if physical copy is required. can, collect it from the branch.

# 10. Renewal and Repayment of Deposit

**DHFL Fixed Deposit** 

The interest on deposit will cease from the date of maturity. The depositor can choose option of 'Auto

Renewal of deposit in the application form in which case the deposit will be automatically renewed on the date of maturity for the same tenure / scheme (or nearest tenure / scheme - in case the original tenure / scheme is discontinued subsequently) as that of the matured deposit at the interest rate prevailing on the date of maturity. In case Auto Renewal option is not selected, and there are no subsequent instructions for renewal of deposit either, the matured proceeds will be credited directly into depositors account on the date of maturity. Provided that in the case of maturity for the second tenure (post first auto renewal), the amount will be automatically remitted to the designated bank account at maturity, in absence of any specific instruction from the depositor otherwise. In case one intends to modify renewal/repayment instructions (different from the one provided at the time of account opening), such revised instructions must reach DHFL at least 15 working days before the maturity date or else it would get processed as per original instructions. Additional Interest of 0.15% on all Renewals, wherethe deposit is renewed on or before the maturity date. When the date of maturity falls on any day on which the company's office / banks remains closed the repayment will be made on the next working day. Recurring Deposit

In case of conversion, final amount on the closure of Recurring Deposit can be converted to Fixed Deposit. For this a fresh Application Form duly filled should accompany the discharged Recurring Deposit Statement.

In case of repayment via RTGS/NEFT/Cheque, duly discharged Recurring Deposit Statement should be surrendered at least 5 working days before the date of maturity. To facilitate maturity payment by direct credit to the depositor's Bank account through RTGS/NEFT depositors are required to provide copy of cancelled cheque for details on Bank Account number /branch/MICR/IFSC code, then the deposit proceeds will be credited to the bank account of the depositor via RTGS / NEFT on the maturity date. In case depositor opts for manual payment, the deposit will be repaid through cheque in depositor's favour with his a/c number and bank name. When the date of maturity falls on any day on which company's office / banks remains closed, the repayment will be made on the next working day.

#### 11. Premature Withdrawal

Premature withdrawal of deposit can be permitted as per Directions issued by National Housing Bank (NHB) from time to time. In such cases, the interest rates applicable on the premature withdrawal of deposit shall be:

Sr. No.	Period completed from date of deposit	Particulars
Α	Minimum Lock-in-period	Three Months
В	Above 3 months before 6 months	Interest payable shall be 4% p.a. for individual depositors. No interest is payable in case of other category of depositors
С	After 6 months but before the date of maturity	The interest payable shall be 1% lower than the interest rate applicable to a public deposit for the period for which the deposit has run or if no rate has been specified for that period, then 2% lower than the minimum rate at which the public deposits are accepted by DHFL.

- a) Provided that, in the event of death of a depositor, the public deposit shall be paid prematurely to the surviving depositor/s in the case of joint holding with the survivor clause, or to the nominee or legal heir/s of the deceased depositor, on the request of the surviving depositor/s/nominee/legal heir/s of the deceased depositor, and only against submission of proof of death, to the satisfaction of DHFL, with interest at the contracted rate up to the date of repayment.
- b) Provided further that in order to meet certain expenses of an emergent nature (includes medical emergency or expenses due to natural calamities/disaster or notified by concerned Government/authority), subject to the satisfaction of DHFL about such circumstances
- Tiny deposits (aggregate amount of deposits not exceeding ₹ 10,000/-) may prematurely be paid to
  individual depositors, at the request of the depositor, before the expiry of three months from the date
  of acceptance of such deposits, in entirety, without interest;
- 2. In case of other public deposits, not more than fifty per cent of the amount of the principal sum of deposit or ₹ 5 lakh, whichever is lower, may be prematurely paid to individual depositors, at the request of the depositors, before the expiry of three months from the date of acceptance of such deposits, without interest. The remaining amount with interest at the contracted rate shall continue as per the existing terms & conditions
- 3. Provided further that in cases of Critical Illness (For the definition of 'Critical illness', the IRDAI (Health Insurance) Regulations, 2016 and the guidelines issued there under, will be taken into consideration), hundred percent of the amount of the principal sum of deposit, may be prematurely paid to individual depositors, at the request of the depositors, before the expiry of three months from the date of acceptance of such deposits, without interest.

#### 12. Loan against Deposit

Loan may be granted at the sole discretion of the Company, against Fixed Deposit upto 75% of the Principal amount carrying interest @2% per annum (at monthly rest) above the deposit interest rate and other charges as applicable on such deposit, provided the deposit has run for a minimum period of three months. The outstanding loan together with interest shall be settled before deposit maturity by the depositor or shall be adjusted on maturity from the deposit proceeds. In case of non cumulative deposit, the interest payment will be blocked till the time loan remains outstanding. Loan disbursement will be done by RTGS/NEFT to the depositor's account registered with DHFL or by cheque in favour of customer with his account number and bank name.

# 13. Know Your Customer (KYC) Compliance

In terms of the Prevention of Money Laundering Act, 2002, the rules notified there under and KYC guidelines issued by the National Housing Bank (NHB), every depositor is required to comply with the KYC requirements by submitting the required documents for various categories mentioned on the second page of this Application Form and providing any other additional information sought to comply with the reporting requirements under Section 285 BA of the Income-Tax Act,1961. In case the documents are submitted in any of the previous deposits, within the last 5 years, please provide the customer ID number.

# 14. For Authorized Agents / Distributors / Brokers

Distributors/Brokers are not authorized to accept cash or issue any receipt on behalf of the company. For applications sourced by Distributors/Brokers, they must ensure that their agency name and code is clearly mentioned in the application form to enable payment of brokerage. Brokerage will be paid to registered distributors/brokers at rate decided by the management as per NHB guidelines. No brokerage will be paid to depositor.

The brokerage is paid to distributor/broker for the entire tenure of fixed deposit. In case of premature withdrawal the brokerage payable will be calculated on a pro-rate basis for the actual tenure completed, and the excess brokerage paid to distributor/broker will be recovered from either the depositor or the broker/distributor.

#### 15 Genera

- i. Deposit will be subject to the rules/guidelines framed from time to time by National Housing Bank (NHB) or any other statutory authority and or Central/ State Government in connection with acceptance of deposits by Housing Finance Companies, the terms and conditions of which form part of the prescribed FD application form.
- ii. The Company reserves the right to alter or amend from time to time the terms and conditions without assigning any reasons, if so required by NHB regulations / guidelines.
- iii. Brokerage will not be paid to the Depositors as per the NHB regulations.
- iv. The total amount of exposures, other than investments in shares, including the non-fund based facilities, to companies in same group or other entities or business ventures in which directors and / or the Company are holding substantial interest as on March 31, 2018 was ₹ 62.91 crore.
- v. The fixed deposit schemes of the Company has a rating of CARE AAA(FD): Stable from CARE ratings and BWR FAAA; Stable from Brickwork ratings which indicates the highest safety regarding timely servicing of financial obligations.

# GENERAL TERMS AND CONDITIONS GOVERNING THE PUBLIC DEPOSIT SCHEMES

- vi. In case of non-repayment of the deposit or part thereof in accordance with the terms and conditions of the deposit, the depositor may make an application to an authorized officer of the National Housing Bank.
- vii. Company has a customer grievance redressal mechanism in place to look into customer grievances in the services provided by the company.
- viii. In case the depositor is not satisfied with the services provided or the grievance redressal of the Company, the depositor may approach the National Consumers Disputes Redressal Forum or the State Level Consumers Disputes Redressal Forum or the District Level Consumers Disputes Redressal Forum for relief.
- ix. The Board of Directors certify that all the relevant information regarding the Scheme as well as the financial position of the Company are correctly declared.
- x The deposit acceptance activities of the Company are regulated by the National Housing Bank. It must ,however, be distinctly understood that the Fixed Deposit Application Form should not in any way be deemed or construed to have been cleared or approved by NHB, who does not undertake any responsibility either for the financial soundness of any scheme or for the statements made in the Fixed Deposit Application Form or of any of the statements or representations made or opinions expressed by the Company, and for repayment of deposit/discharge of liabilities of the Company,
- xi. DHFL will not be responsible for non-receipt/ loss/delay in transit of the FDR / Cheque / Warrant sent to the depositor/ first depositor by Registered post/Courier. However, in case of loss/misplacement of FDR/Cheque by the depositor, duplicate FDR/ Cheque will be issued to the depositor upon complying with the required procedure.
- xii. Periodical payment of interest on Deposit will be made through RTGS/NEFT, by directly crediting depositor's account or through warrants/cheques
- xiii. Change of address of the depositor/first depositor should be intimated to DHFL.
- xiv. All disputes relating to acceptance of deposit shall be subject to Mumbai jurisdiction only.
- xv. Depositor must mention PAN while placing deposit in excess of ₹ 50,000/- including the past deposits already placed.
- xvi. Please note if at the time of creation of subsequent deposits a change is requested in demographic details i.e. address, mobile, email ID, name change, then the new details will be updated in all the existing live deposits in the customer ID.

# PARTICULARS AS PER NON-BANKING FINANCIAL COMPANIES AND MISCELLANEOUS NON-BANKING COMPANIES (ADVERTISEMENT RULES) 1977 AS AMENDED

- (a) Name of the Company: Dewan Housing Finance Corporation Limited (DHFL)
- (b) Date of Incorporation: April 11, 1984.
- (c) Business carried on by the Company and its subsidiary with details of branches: DHFL is a Public Limited Company and is primarily engaged in the business of providing housing finance for the purposes of purchase / construction of residential houses. As on date, the Company has three(3) wholly owned subsidiaries namely DHFL Advisory & Investments Private Limited, engaged in the business of providing advisory/consultancy services and to undertake investments, DHFL Investments Limited, which carries on the business of an Investment Company and acquires, holds, sells, buys or otherwise deals in the securities of other Companies (including Group Companies) and DHFL Changing Lives Foundation, incorporated on December 1, 2017, as a Non-Profit Company, limited by guarantee, registered under Section 8 of the Companies Act, 2013 in order to take forward the Company's CSR Vision and implement social programmes in a far more collaborative and participative way.
- (d) Brief particulars of the Management of the Company: The day to day affairs of the Company are managed by Mr. Kapil Wadhawan, Chairman & Managing Director of the Company subject to the superintendence, control and direction of the Board of Directors. Mr. Harshil Mehta, Joint Managing Director & Chief Executive Officer of the Company assists the Chairman & Managing Director in carrying out the business operations and expansion / diversification plans of the Company.

### (e) Name, addresses and occupations of Directors

Name	Address	Occupation
Mr. Kapil Wadhawan Chairman & Managing Director	22-23, Sea View Palace, Pali Hill, Bandra (West), Mumbai - 400050	Business
(DIN-00028528)	, , , , , , , , , , , , , , , , , , , ,	
Mr. Dheeraj Wadhawan	22-23, Sea View Palace,	
Non Executive Director	Pali Hill, Bandra (West),	Business
(DIN-00096026)	Mumbai - 400050	
Mr. G. P. Kohli	1403/04, Dheeraj Enclave, (A1 Tower),	
Independent Director	Off Western Express Highway,	Managemen
(DIN-00230388)	Borivali (East), Opp- Bhor Industries,	Consultant
	Mumbai - 400 066	
Mr. V. K. Chopra	Flat No. 4 A, 4th Floor, Harmony Tower,	
Independent Director	Dr. E Moses Road, Worli Naka,	Professional
(DIN-02103940)	Worli, Mumbai - 400 018	
Mr. Mannil Venugopalan	Mannil House, House No. 17/229,	Professional
Independent Director	Thalakkoly Desom, Ernakulum Aluva	
(DIN-00255575)	Kerala - 683 102	Professional
Ms. Vijaya Sampath	14/403, Heritage City, Gurgaon,	Professional
Independent Director	Haryana - 122 002	
(DIN-00641110)		
Mr. Harshil Mehta	2101, Clover Regency,	Service
Joint Managing Director &	Ramji Ashar Lane, Off M.G. Road,	
Chief Executive Officer	Ghatkopar (East), Mumbai- 400077	
(DIN-03038428)		

#### (f) & (a) Profit and Dividend

(5)			
Financial Year ended	Profit Before Tax	Profit After Tax	Dividend
	(₹ lakh)	(₹ lakh)	(₹ Per share)
31st March, 2018	1,75,662	1,17,213	5.5
31st March, 2017	3,37,182*	289,645*	4
31st March, 2016	1,10,217	72,920	8

\*Includes profit on exceptional Item ₹1,96,943

# (h) Summarised Financial Position of the Company as appearing in the last two audited Balance Sheets

Particular	As at March 31, 2018 (₹ lakh)	As at March 31, 2017 (*lakh)
Liabilities		
Share Capital	31,366	31,315
Reserves & Surplus	848,198	768,265
Money Received Against Share Warrants	-	-
Secured Loans	7,383,345	6,934,513
Unsecured Loans	1,441,989	888,067
Current Liabilities & provisions	1,052,349	607,638
Total	10,757,247	9,229,798
Assets		
Fixed Assets	97,884	84,267
Investments	807,651	1,353,490
Current Assets	514,019	459,770
Loans & Advances	9,337,693	7,332,271
Misc. Expenditure	-	-
Profit & Loss account	-	-
Total	10,757,247	9,229,798

CONTINGENT LIABILITY	As at March 31, 2018 (₹ lakh)	As at March 31, 2017 (₹ lakh)
Guarantees provided by the Company	10,730	24,130
Claims against the Company not acknowledged as debts	1,891	919
Income Tax Demand (Net of amount deposited under protest ₹ 50 lakh)		-

- i) The amount of Public Deposits which the Company can raise under the Housing Finance Companies (NHB) Directions, 2010 is equivalent to 5 times of the net owned funds i.e. ₹40111.90 crore as on March 31, 2018, whereas the total Public Deposits as on March 31, 2018, was ₹9757.31 crore with 241204 number of deposits.
- There are no overdue deposits other than unclaimed deposits.
- We declare that:

Place : Mumbai

Date: June 27, 2018

- The Company has complied with the provisions of the NHB directions as applicable to it and i) the above mentioned rules.
- The compliance with the said Directions does not imply that the repayments of deposits are guaranteed by Reserve Bank of India and National Housing Bank.
- The deposits accepted by the company are unsecured and rank pari passu with other unsecured liabilities, save & except the floating charge created on the statutory liquid assets maintained in terms of sub section (1) and (2) of Section 29B of the National Housing Bank Act,
- I) The Deposits solicited by the company are not insured.

This full text of advertisement has been approved by the Board of Directors at its meeting held on June 27, 2018 and is being issued on the authority and in the name of the Board of Directors of the Company, A copy of this advertisement duly signed by all the Directors of the Company has been filed with the National Housing Bank, New Delhi.

> By Order of the Board For Dewan Housing Finance Corporation Ltd. Kapil Wadhawan Chairman & Managing Director

Disclaimer: The Company is having a valid Certificate of Registration dated 31/07/2001 issued by the National Housing Bank under Section 29A of the National Housing Bank Act, 1987. However, the National Housing Bank does not accept any responsibility or guarantee about the present position as to the financial soundness of the company or for the correctness of any of the statements or representations made or opinions expressed by the Company and for repayment of deposits/discharge of the liabilities by the Company.

For further enquiries, contact your Advisor or Email: response@dhfl.com Sales Enquiry Toll Free : 1800 22 34 35 Customer Care Toll Free : 1800 3000 1919 Dewan Housing Finance Corporation Ltd. DeWall Housing Finance Corporate Identity Number (CIN) - L65910MH1984PLC032639
Regd. Office: Warden House, 2nd Floor, Sir P.M. Road, Fort,
Mumbai - 400 001 Fax: 02271583344

#### DEWAN HOUSING FINANCE CORPORATION LTD. Branch Network:

National Office - (022) 61558100 / 101/150 /284170338 / 339 | Dahlear West - (1022) 61593332 / 44 | Bonvali East - (1022) 28875116 / 28817116 / 2881716 / 28

As regards deposit taking activity of the company, the viewers may refer to the advertisement in the newspaper/ information furnished in the application form for soliciting public deposits. The Company is having a valid Certificate of Registration dated 31/07/2001 is sused by the National Housing Bank under Section 29A of the National Housing Bank Act, 1987. However, the National Housing Bank been of acceptant yre prosposibility or quarantee about the present position as to the financial sounders of the Company of for the correctness of any of the statements or representations made or opinions expressed by The Company and for repayment of deposits/discharge of the liabilities by The Company.



Channel:

	Product Code:					
innel:	Application Date:		М	М	Y	
Broker	Transaction Branch Code:					
Direct	Customer Base Branch Code:					

FIXED DEPOSIT APPLICATION FORM

			I IXED DEI	0011							
Broker Name: SPA Capital Services Ltd Broker Code: 03242 Sub-Broker Name: Sub Broker Code:											
Sales Executiv	re N	ame:						Sal	es Executiv	re ID:	
DEPOSIT DETAILS											
Fresh Deposit Renewal Old FDR No. for months (for Renewal) @ prevailing interest rates											
Cheque/UTR No./Cash											
Date:				Bank A	A/C No:						
Bank Branch:				Bank	Name:						
Period	in I	Months	Scheme	Cate	egory	Privil	lege C	ategory		Status	
Aashray Deposit	S	pecial Deposit	Cumulative	DHFL	Promoter	-	ior Citize		Resident		ı.
12 60 14 72	13	(Only for Trust)	Non Cumulative		Director	Dofo	FL Loan I ence Per	Borrower	HUF	(Non-profit organization)	
24 84	18	(Only for Female Depositors)	Yearly Half Yearly		ve of Director	Wide		Some	NRI	Co-op Society	
36 96 40 108			Quarterly		Shareholder er of Public	<u> </u>	L Emplo		1-1	Partnership Firr	n
48 120			Monthly	IVIEITID	er or Public	Proof attac				Others	
Auto Renewal		Yes No	If Yes,	Full ma	aturity am	ount (de	efault)	Princ	cipal only		
FIRST APPLIC	CAN	IT Aad	har No.:					Custor	mer ID:		
Name (In Full):		RST	NAME.				NA	JMEC		ST NAME	
Date of Birth:			G G	ender:	Male	Female	: Ti	ransgend	ler [		7
Guardian's Nan	ne:										
n case of minor) Permanent Account No: 1st Applicant Guardian's PAN Affix a											
Address Line 1:										latest photograph	
Address Line 2:										of the First Applicant	
Landmark:					City:					i iiot / tppiiosiiit	
State:						P	incode				
Mobile** (+91):					one No.:		1-[				۱-
E-mail ID **:				(with :	STD Code)						-
Annual Income:		Up to ₹ 2 lakh	₹ 2 lakh to ₹ 5	lakh ₹	₹ 5 lakh to	₹ 10 lakl	h [₹	<sup>5</sup> 10 lakh t	to ₹ 25 lakh	₹ 25 lakh & above	e
Occupation:	•	Private Sector				rofession		Retired	Housewi	·	
000042		Others (Please	t								
Politically Expo	sec	Person [PEP]:		elated to F	PEP N	Not Appli	cable				
, ,			/ / Prematurity) to		h			icant or S	urvivor/s (D	Default)	
		done via C			erson from					· ,	
** Either the Mobile numb	er or F	E-mail ID is mandatory	· · · · · · · · · · · · · · · · · · ·								_
SECOND APP	LIC	ANT Aad	har No.:					Custor	mer ID:		
Name (In Full):			NAME							8 TONAME	
Date of Birth:			] Y  Y  G	ender:	Male	Female	; Tı	ransgend	ler		
Address Line 1:	:									A 55'	
Address Line 2:	:									Affix a latest photograph	
Landmark:					City:					of the	
State:						P	incode	: [ ] [		Second Applicant	
E-mail ID **:											
Mobile** (+91):					one No.: STD Code)		]-[				
Annual Income:	:	Up to ₹ 2 lakh	₹ 2 lakh to ₹ 5	lakh ≀₹	₹ 5 lakh to	₹ 10 lakl	h   ₹	10 lakh 1	to ₹ 25 lakh	₹ 25 lakh & above	<b>–</b> е
Occupation:		Private Sector Others (Please	L	Busir	ness P	rofessio	nal	Retired	Housewi	ife Student	
Politically Expo	sec	Person [PEP]:		ated to Pl	EP No	t Applica	able	 PAN No	.:[][][		
** Either the Mobile numb	er or f	E-mail ID is mandatory									

THIRD APPLICANT Aadhar No.:	
Name (In Full): FIRST NAME MIDDLE NAME	A STONAME
Date of Birth: DDMMYYYY Gender: Male Female Transgender	
Address Line 1:	
Address Line 2:	Affix a latest photograph
Landmark: City: City:	of the
State: Pincode:	Third Applicant
E-mail ID**:	
Mobile** (+91): Phone No.: (with STD Code)	
Annual Income: Up to ₹ 2 lakh  ₹ 2 lakh to ₹ 5 lakh  ₹ 5 lakh to ₹ 10 lakh  ₹ 10 lakh to ₹ 25	lakh  ₹ 25 lakh & above
	sewife Student
Others (Please specify)	
Politically Exposed Person [PEP]: Yes Related to PEP Not Applicable PAN No.:	
** Either the Mobile number or E-mail ID is mandatory	
NAME OF TRUST / SOCIETY / CLUB / ASSOCIATION / CORPORATE Customer ID No.	
Name:	
Date of Incorporation: D D M M Y Y Y Y Permanent Account No. (PAN):	
First Trustee / Authorised Signatory:	
Second Trustee / Authorised Signatory:	
Third Trustee / Authorised Signatory:	
TDS to be deducted If NO, please provide any one 15G 15H Order u/s 197 Order u/s 10	My / Our interest for the year
Yes No Above is already submitted for current financial year with FDR No.	will be less than ₹ 5000
BANK A/C DETAILS: FIRST APPLICANT / TRUST / SOCIETY / CLUB / ASSOCIATION / CORPORATE *Please provide a cancelled cheque of	f below mentioned account. (Mandatory)
Bank A/C No: Account Type: S	avings A/C Current A/C
Bank Name:	
Bank Branch: IFSC Code: IFSC Code:	
	of below mentioned account. (Mandatory)
Bank A/C No: Account Type: S	avings A/C Current A/C
Bank Name:	
Bank Branch: IFSC Code:	
	f below mentioned account. (Mandatory)
	avings A/C Current A/C
Bank Name:	
Bank Branch: IFSC Code:	
NOMINATION DETAILS	
Name of the Nominee: Relationship:	
Guardian's Name: (In case of minor)  Nominee DOB:	
Address of the Nominee:	
No Newigon Declaration (NV, and that (NV, burn by a public of books by a factor) (NV, and the control of the co	Signature of Nominee (optional)
No Nominee Declaration: I/We confirm that, I/We have been explained about the benefits of Nomination facility to my/our FD Account. However I/We state that inspite of the explanation of the said benefits I/We do not wish to nominate any person to the above mentioned DHFL Account. I/We request you to kindly process	
my/our FD Account opening/renewal form without the nomination facility.	Signature of the First Applicant
DECLARATION  Declaration: I/We hereby declare that above information is true and to the best of my knowledge and belief. I/We further declare that the deposit made under the deposit application is through	h legitimate source and does not include
directly/indirectly any proceeds of schedule of offense and/or is not designed for the purpose of contravention or evasion under PML Act 2002 or any other law. I/We hereby declare that the fit application is the beneficial owner of this deposit and as such he/she should be treated as the payee for the purpose of tax deduction under section 194A of the Income Tax Act 1961.	
I/We have gone through the financial and other statements/particulars/representation furnished/made by the Company and after careful consideration, I/We am/are making the deposit with the own risk and violation. I/We have also gone through the General Terms and Conditions governing Public Deposit Schemes and I/We accept the same	e Company at my/our
I/We understand brokerage will be payable to authorized broker, if any, and if the deposit is withdrawn prematurely, proportionate brokerage will be recovered from the deposit proceeds	
I hereby give my explicit consent to the housing finance company to duly renew principal / renew principal and interest / pay, in entirety, the principal and interest to my designated Bank Account	unt mentioned herein on maturity of the deposit.
APPLICANT'S SIGNATURE	
	pplicant/Trustee/Authorised Signatory
FOR OFFICE USE ONLY Customer ID: FDR No: Rate of Int	(
FD Amount ₹: Maturity Amount ₹: Maturity Dat	e: D   D   M   M   Y   Y   Y   Y   Y
Maker: Checker: Checker:	FDR to be sent to customer through:
Signature:   Signature:	Hand Delivery Courier (Default Option)

# **INCOME - TAX RULES, 1962**

FORM NO. 15H

[See section 197A(1C) and rule 29C]

Declaration under section 197A(1C) to be made by an individual who is of the age of sixty years or more claiming certain incomes without deduction of tax.

PART I

							0 Dot( D' ''	2	
1. Name of Assessee (Declarant)		2. PAN of th	e Assessee <sup>1</sup>	1			3. Date of Birth (DD/MM/YYY	Y)	
4. Previous year(P.Y.) <sup>3</sup> (for which declaration is being made)		5. Flat/Door	/Block No.				6. Name of Pre	emises	
7. Road/Street/Lane		8. Area/Locali	ity		9. 7	Town/City/District		10. State	
11. PIN					Email		13. Te	elephone No.	(with STD Code) and Mobile No.
14 (a) Whether assessed to tax <sup>4</sup> : (b) If yes, latest assessment year for which assessed	Yes		No [						
15. Estimated income for which this declaration is made		timated total oned in colum			hich income				
17. Details of Form No.15H other than this form filed for the pre	evious year, if any	y <sup>6</sup>		•	•			•	
Total No. of Form No.15H filed							Aggre	gate amount	t of income for which Form No.15H filed
18. Details of income for which the declaration is filed									
SI. Identification number of relevant No. investment/account, etc. <sup>7</sup>					ire of ome		ction under which tax is deductible		Amount of income
1									
2									
3 4									
						I			1
relevant to the assessment year			V	viii de nii.					
ate :									Signature of the Declarant
. Substituted by IT (Fourteenth Amdt.) Rules 2015 ,w.e.f. 1-10-2015. Lules,1990,w.e.f. 20-11-1990 and IT (Twelfth Amdt.) Rules,2002,w.e				(Eigth Amdt	.) Rules,2003,w-e.f.				
[To be f	filled by the pers	son respons	ible for pa		RT II come referred to in	ı column 15 of Pa	rt I]		
1. Name of the person responsible for paying						2. Unique Identific	ation No. <sup>9</sup>		
3. PAN of the person responsible for paying 4	4. Complete Addre	ess				5. TAN of the pers	on responsible for	paying	
6. Email 7	7. Telephone No. (	(with STD Co	de) and Mo	bile No.	l			8. Amount	of income paid <sup>10</sup>
9. Date on which Declaration is received (DD/MM/YYYY)				1	0. Date on which the	income has been p	aid/credited		
Place :									
							•	•	ne person responsible for paying
late :							the	income ref	erred to in column 15 of Part I
Delete whichever is not applicable.									

1As per provisions of section 206AA(2), the declaration under section 197A(1C) shall be invalid if the declarant fails to furnish his valid Permanent Account Number (PAN)

<sup>2</sup>Declaration can be furnished by a resident individual who is of the age of 60 years or more at any time during the previous year.

<sup>3</sup>The financial year to which the income pertains.

Please mention "Yes" if assessed to tax under the provisions of Income-tax Act, 1961 for any of the assessment year out of six assessment years preceding the year in which the declaration is filed.

Please mention the amount of estimated total income of the previous year for which the declaration is filed.. including the amount of income for which this declaration is made.

eln case any declaration(s) in Form No. 15H is filed before filing this declaration during the previous year, mention the total numbe of such Form No. 15H filed along with the aggregate amount of income for which said decla-

\*Mention the distinctive number of shares, account number of term deposit, recurrin deposit, National Savings Schemes, life insurance policy number, employee code, etc.

Before signing the declaration/verification, the declarant should satisfy himself that the information furnished in thi form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income-tax Act, 1961 and on conviction be punishable-

- (i) in a case where tax sought to be evaded exceeds twenty-five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine;
- (ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.

The person responsible for paying the income referred to in column 15 of Part I shall allot a unique identification number to all the Form No. 15H received by him during a quarter of the financial year and report this reference number along with the particulars prescribed in rule 31A(4)(vii) of the Income-tax Rules, 1962 in the TDS statement furnished for the same quarter. In case the person has also received Form No.15G during the same quarter, please allot separate series of serial number for Form No.15H and Form No.15G.

10The person responsible for paying the income referred to in column 15 of Part I shall not accept the declaration where the amount of income of the nature referred to in section 197A(1C) or the aggregate of the amounts of such income credited or paid or likely to be credited or paid durin the previous year in which such income is to be included exceeds the maximum amount which is not chargeable to tax after allowing for deduction(s) under -Chapter VI-A, if any, or set off of loss, if any, under the head "income from house property" for which the declarant is eligible. For deciding the eligibility, he is required to verify income or the aggregate amount of incomes, as the case may be, reported by the declarant in columns 15 and 17".

# **INCOME - TAX RULES, 1962**

¹FORM NO. 15G [See section 197A(1), 197A(1A) and rule 29C]

Declaration under section 197A (1) and section 197A(1A) to be made by an individual or a person (not being a company or firm) claiming certain incomes without deduction of tax.

	. Name of Assessee (Declarant)								
3. Status <sup>2</sup> 4. Previous year(P.Y.) <sup>3</sup> (for which declaration is bein				ade)		5. Residential St	atus <sup>4</sup>		
6. Flat/Door/Block No.	7. Name of Prem	ises		8. Road/Street/Lan	е		9. Area/Loc	9. Area/Locality	
10. Town/City/District	11. State			12. PIN 13. Email					
4. Telephone No. (with STD lode) and Mobile No. (b) If (a) Whether assessed to tax under the Income-tax Act, 1961s; (b) If yes, latest assessment year for which		h assessed	Yes	No 🗖					
6. Estimated income for which this declaration	is made			e of the P.Y. in whic column 16 to be inc					
18. Details of Form No. 15G other than this form	n filed during the previo	us year, if any <sup>7</sup>							
Total No. of Form No. 15G filed				Aggregate amount	of income for v	vhich Form No.15G	filed		
19. Details of income for which the declaration i	is filed								
SI. Identification num			N	ature of		Section under which	1	Amount of income	
No. investment/acc	ount, etc.8		i	ncome		tax is deductible		Amount of income	
1									
3									
4									
do hereby declare that ole in the total income of any other person unde ggregate amount of *income/incomes referred twill be nil. *I/We also declare threlevant to the assessment year	er sections 60 to 64 of th to in column 18 compute nat *my/our *income/inc	ne Income-tax Act, 1 ed in accordance wi omes referred to in	1961. *I/We furth th the provisions column 16 *and	er declare that the ta of the Income-tax Ad the aggregate amout	x *on my/our e ct, 1961, for the nt of *income/ir	stimated total incon previous year endi	ne including ' ng on	income/incomes referred to in colur relevant to the assessmer	
							Sig	nature of the Declarant <sup>9</sup>	
tituted by IT (Fourteenth Amdt.) Rules 2015 ,w.e. Rules,1990,w.e.f. 20-11-1990 and IT (Twelfth Amdi		ART II	50 5) 110 11 (Eigen	, , ,				.f.19-02-2013.	
Rules,1990,w.è.f. 20-11-1990 and IT (Twelfth Amdi	P	ART II		of Part I]	tion No.11			.f.19-02-2013.	
Rules,1990,w.è.f. 20-11-1990 and IT (Twelfth Amdi [To be filled by the person re [. Name of the person responsible for paying	P	ART II e income referred t	to in column 16 (	,	ition No. <sup>11</sup>	E TAN of the	000 r0000-11		
Rules,1990,w.è.f. 20-11-1990 and IT (Twelfth Amdi [To be filled by the person re 1. Name of the person responsible for paying 3. PAN of the person responsible for paying	P	ART II e income referred t  4. Complete Addr	io in column 16 o	of Part I]  2. Unique Identifica	tion No. <sup>11</sup>	5. TAN of the per			
[To be filled by the person re  I. Name of the person responsible for paying  B. PAN of the person responsible for paying  B. PAN of the person responsible for paying  C. Email	P. Pesponsible for paying th	ART II e income referred t	io in column 16 o	of Part I]  2. Unique Identifica and Mobile No.		8. Amount of inc			
Rules,1990,w.è.f. 20-11-1990 and IT (Twelfth Amdi [To be filled by the person re 1. Name of the person responsible for paying 3. PAN of the person responsible for paying	P. Pesponsible for paying th	ART II e income referred t  4. Complete Addr	io in column 16 o	of Part I]  2. Unique Identifica		8. Amount of inc			

inclu vear. on... Place

Place

Date

1As per provisions of section 206AA(2), the declaration under section 197A(1) or 197A(1A) shall be invalid if the declarant fails to furnish his valid Permanent Account Number (PAN).

<sup>2</sup>Declaration can be furnished by an individual under section 197A(1) and a person (other than a company or a firm) under section 197A(1A).

The financial year to which the income pertains.

<sup>4</sup>Please mention the residential status as per the provisions of section 6 of the Income-tax Act, 1961.

Please mention "Yes" if assessed to tax under the provisions of Income-tax Act, 1961 for any of the assessment year out of six assessment years preceding the year in which the declaration is filed

Please mention the amount of estimated total income of the previous year for which the declaration is filed including the amount of income for which this declaration is made.

In case any declaration(s) in Form No. 15G is filed before filing this declaration during the previous year, mention the total number of such Form No. 15G filed along with the aggregate amount of income for which said

declaration (s) have been filed.

\*Mention the distinctive number of shares, account number of term deposit, recurring deposit, National Savings Schemes, life insurance policy number, employee code, etc.

Indicate the capacity in which the declaration is furnished on behalf of a HUF, AOP, etc.

1ºBefore signing the declaration/verification, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income-tax Act, 1961 and on conviction be punishable—
(i) in a case where tax sought to be evaded exceeds twenty-five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine;
(ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.

the income referred to in column 16 of Part I

in The person responsible for paying the income referred to in column 16 of Part I shall allot a unique identification number to all the Form No. 15G received by him during a quarter of the financial year and report this reference number along with the particulars prescribed in rule 31A(4)(vii) of the Income-tax Rules, 1962 in the TDS statement furnished for the same quarter. In case the person has also received Form No.15H during the same quarter, please allot separate series of serial number for Form No.15H.

<sup>12</sup>The person responsible for paying the income referred to in column 16 of Part I shall not accept the declaration where the amount of income of the nature referred to in sub-section (1) or sub-section (1A) of section 197A or the aggregate of the amounts of such income credited or paid or likely to be credited or paid during the previous year in which such income is to be included exceeds the maximum amount which is not chargeable to tax. For deciding the eligibility, he is required to verify income or the aggregate amount of incomes, as the case may be, reported by the declarant in columns 16 and 18.;

# FATCA/CRS DECLARATION FORM

Note – The information in this section is being collected in order to fully comply with Foreign Account Tax Complianc Act (FATCA) requirements and the Common Reporting Standards (CRS) requirements.

Changing Rules Changing Lives

For more information refer.

Note-

1)

The term United States person means:

number, Alien card number, etc.

a) An individual, being a citizen or resident of the United States of America;

Partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;

trust; and ii. one or more U.S. persons have the authority to control all substantial decisions of the trust;

An estate of a decedent who was a citizen or resident of the United States of America.

A trust if: i. a court within the United States of America would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the

Functional Equivalent of TIN includes the following: A social security/insurance number, citizen/personal identification/services code/national identification number, a resident / population registration

FATCA: http://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA

5: http://www.oecd.org/ctp/exchange-of-tax-information/automatic-exchange-financial-account-information-common-reporting-standard.pdf

#### **Term and Condition FATCA - CRS**

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian Financial Institutions to seek additional personal, tax and beneficial owner information and certain certain certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Towards compliance with tax information sharing laws, such as FATCA and CRS, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days from the date of change in such information.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

For Details of Abbreviations used in this forms please refer to the "Fatca – Abbreviations", 1	from our websi	te	
FATCA/C	RS Declara	ation Form – Individ	duals
Appendix D: Draft Self Certification for Individuals for Foreign Account Tax Compliance At (Please consult your professional tax advisor for further guidance on your tax residency, FAT To: Dewan Housing Finance Limited Customer ID:			ards(CRS)
Name:			
Part I- Please fill in the country for each of the following (Applicable for all customers):  1. Country of:  a) Birth b) Citizenship c) Residence for Tax Purposes d) Current Residence (Overseas Country for NRI) 2. US Person (Yes / No) Refer definition on page 2 Part II- Please note: A. If in all fields above, the country mentioned by you is India (except in case of se			
the specific country in the table below:  a) TIN	or	Functional equivalen	t
(please specify name and number) Country of Issue	UI	·	
b) TIN (please specify name and number) Country of Issue	or	Functional equivalen	t
c) TIN	or	Functional equivalen	t
(please specify name and number) Country of Issue  C. If you satisfy the criteria mentioned in II (B) above but do not have Taxpayer Identi I am a person resident out of India with (choose only if applicable):	ification Numbe	er/functional equivalent, pl	ease tick the reason for the same as given below:
Country not issuing TIN/Functional equivalent     Dependent visa			mention Visa / Residence / Work permit number) mention dependent visa number)
Student visa			(mention dependent visa number)
Seafarer status     Going to the country of residence for first time	(mention vies		(mention CDC/visa number) juivalent to be communicated to the DHFL within 90 days, else account will get
closed).	_(montion visa i	nambor. mw/tanononar oq	divalent to be communicated to the Biri E within 30 days, class account win get
I am a person resident in India as well as resident for tax purposes in India (Please D. In case you are declaring US person status as 'No' but your Country of Birth is US, relinquishment certificate  Please also fill Part IV Self-Certification.  Part III- Customer Declaration (Applicable for all customers)  I. Under penalty of perjury, I certify that:  a) The applicant is (i) an applicant taxable as a US person under the laws of the Usany  other states of the U.S., (ii) an estate the income of which is subject to U.S. federal person) or b) The applicant is taxable as a tax resident under the laws of country of II. I understand that the DHFL is relying on this information for the purpose of determing I shall seek advice from professional tax advisor for any tax questions.  III. I agree to submit a new form within 30 days if any information or certification on the IV. I agree that as may be required by domestic regulators/tax authorities the DHFL may to certify that I provide the information on this form and to the best of my knowledge equivalent number of the applicant.  Signature:	United States of I income tax rejutside India. (Thining my statushis form become ay also be requ	f America ("U.S.") or any s gardless of the source the his clause is applicable or s in compliance with FATC nes incorrect.	state or political subdivision thereof or therein, including the District of Columbia o reof. (This clause is applicable only if the account holder is identified as a US ally if the account holder is a tax resident outside of India) CA/CRS. The DHFL is not able to offer any tax advice on FATCA/CRS or its impact.
Date (DD/MM/YYYY):			
Part IV- Self-Certification (Not Applicable for NRI customers except for point (b) below):			
To be filled only if —  a) Any of the indicia parameters is outside India and TIN or functional equivalent is not b) Country of Birth is US and US person is mentioned as "No" in Part I	ot available sind	ce not a resident for tax pu	urpose outside India, or
I confirm that I am not a US person or a resident for Tax purpose in any country other than I following document as proof of my citizenship and / or residency.  Signature:	ndia, though or	ne or more parameters su	ggest my relation with the country outside India. Therefore, I am providing the
Document Proof submitted (Pls tick document being submitted) Passport, Election Id Card	I DAN Card D	riving License IIIIALL co	tor NREGA Joh Card Gout Issued ID Card
Document Froot Submitted (Fis tick document being submitted) Passport, Election id Card	i, ran cara, D	riving License, UIDAI Let	ICI, NNEUA JUU CATU, UUVI. ISSUEU ID CATO

# FATCA/CRS Declaration Form - Non Individual



		Entities (Non-Individual) for Foreig Visor for further guidance on your to			dards(CRS)	
	ewan Housing Finance Limited	g 311 your w	,	/		Changing Rules Changing Lives
Custo	mer ID:			MOBILE NO:		
Name	:					
Part I						
		it Body/ International Organization/li	sted on any recognized stock exch	ange. (YES/NO)		
i	. If yes and you are listed please	specify the name of the stock excha	inge,	, ii. If no proceed t	to point (B),	
		cial Institution) tax resident of any co	ountry, other than India (YES/NO)			
	. If yes pls fill FATCA/CRS self-c	,		ii. If no proceed t	to point (C)	
	s the account holder an Indian Fina					
	. If yes please provide your GIIN		,if any	ii. If no proceed t		
	Are Substantial owners or controll	ng persons in the entity or chain of (	ownership resident for tax purpose	in any country outside india or no ii. If no please si		
	mer Declaration () Under penalty			ii. Ii iio piease sii	gii tile deciaration	
	The applicant is	or perjury, 1/ we certify that.				
	• • • • • • • • • • • • • • • • • • • •	erson under the laws of the United S	tates of America ("U.S.") or any st	ate or political subdivision thereof	or therein, including the District of	Columbia or any other states of the U.S.
		is subject to U.S. Federal Income ta				
		sident under the laws of the country	,			,
i	. I/We understand that the DHFL	is relying on this information for th	e purpose of determining the statu	s of the applicant in compliance wi	th FATCA/CRS. The DHFL is not at	ole to offer any tax advice on FATCA or
	CRS or its impact on the applic	cant. I/We should seek advice from p	rofessional tax advisor for any tax	questions		-
		m within 30 days if any information				
		uired by regulatory authorities, the D				
i	v. I/We certify that I/we provide the	he information on this form and to tl	ne best of my/our knowledge and b	elief the certification is true, corre	ct, and complete including the taxp	payer identification number of the applicant.
Name	of the Entity					
	er MOP) Signature1		Signature 2	Sigr	nature 3	
Date (	DD/MM/YYYY):					
PART	П					
	on 1: Entity Information					
	Name of Entity	b) Customer ID(if e	xisting)	c) Entity Constitution Type	d) Entity	Identification Type T G C E O
6	e) Entity Identification No	f) Entity Identificat	ion issuing Country	g) Country of Residence for tax	purpose	•
Section	on 2: Classification of Non Financ	ial Entitie				
	(on behalf of entity) certify that the					
	,	able in US(Specified US Person) YES				
		able outside of India (other than US)		de your TIN or its functional equiv	alentProvide your	TIN issuing country
	<ul> <li>Please provide the following ac A/CRS classification for Non-Fina</li> </ul>	Iditional details of you are not a spec	citied US person			
		NFFE without any controlling perso	n c) Passive NFFE with con	ntrolling person(s): US	Others	
		e this if any entity has registered itse				number:
	on 3: Classification of Financial I		is. aour reporting for TATOA at	Still E to not roquitou to do	and reporting), rouse provide time	
	(on behalf of entity) certify that the					
	An entity is a US financial instit					
	i. Please provide your Taxpa	ayer Identification Number(TIN)		ii. Please provide GIIN, if any	If "NO" please	tick one of the following boxes below
FATC	A Classification – Please Provide	the Global Intermediary Identificat	ion Number (GIIN) or other inforn	nation wherever applicable		
•		stitution in a Model 1 Inter Governme	ent Agreement(IGA) Jurisdiction		nstitution in a Model 2 Inter Govern	nment Agreement(IGA) Jurisdiction
•	Participating FFI in an Non IGA	Jurisdiction		Non Reporting FI		
	Non Participating FI			<ul> <li>Owner Documented FI with s</li> </ul>	pecified US owners	
	on 4: Controlling Person Declarati		or Dooumonted FELT or "On !!!	d IIC Dargan" places provide the	following datailo	
ıı you <b>I</b>	are crassined as "Passive NFFE V	vith Controlling Person(s)" or "Owi	iei Documenten FFI., ot "Sbecille	u oo rersuii , piease provide the	ionowing details	
	Name of	Correspondence	Country of Residence	TIN	TIN issuing	Controlling
	Controlling Person	Address	for TAX purpose		Country	Person Type
- 1	22	1.00.000				

Name of Controlling Person	Correspondence Address	Country of Residence for TAX purpose	TIN	TIN issuing Country	Controlling Person Type

Details	Controlling Person 1	Controlling Person 2	Controlling Person 3	Controlling Person 4	Controlling Person 5
Identification Type					
Identification Number					
Occupation Type					
Occupation					
Birth Date					
Nationality					
Country of Birth					

- I. Under penalty of perjury, I/We certify that:
  - a) The number shown on this form is the correct taxpayer identification number of the applicant and
  - b) 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. or
  - c) The applicant is taxable as a tax resident under the laws of country outside India.
- II. I understand that the DHFL is relying on this information for the purpose of determining my status in compliance with FATCA/CRS. The DHFL is not able to offer any tax advice on FATCA/CRS or its impact. I shall seek advice from professional tax advisor for any tax questions.
- III. I agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.
- IV. I agree that as may be required by domestic regulators/tax authorities the DHFL may also be required to inform reportable details to CBDT or close or suspend my account.
- I certify that I provide the information on this form and to the best of my knowledge and belief the certification is true, correct, and complete including the taxpayer identification number /functional equivalent number of the applicant.

Λ	/e	herel	by	confirm	that	details	provided	are	accurat	e, correct	t and	comp	lete

Authorized Signatories and Company Seal (If applicable)									
Name:		Date (DD/MM/YYYY) _							



С	hanı	nel:
	_	

Broker Direct

Product Code:
Application Date:
Transaction Branch Code:

Customer Base Branch Code:

•		
•		I M
•		
•		
•		



# RECURRING DEPOSIT APPLICATION FORM

Broker Name: SPA Capital Services Ltd		Broker Code:	03242		
Sub-Broker Name:		Sub Broker C	ode:		
Sales Executive Name:		Sales Execut	ive ID:		
DEPOSIT DETAILS					
I/We apply for New RD at	branch for	months @ prev	ailing interest rates		
Cheque/UTR No./Cash	Amount in	-			
Date: DDMMYYYY	Bank A/C No:				
Bank Name:					
Period in Months Category	Status		Privilege Category		
12 84 DHFL Promoter	Resident Individual	NRI			
48 96 DHFL Director		HUF	······		
24 60 108 Relative of DHFL Director	Partnership Firm		DHFL Employee		
36 72 120 Member of Public	Trust/Society/Association	Club			
1	(item rion organizations)				
FIRST APPLICANT Aadhar No.:		Customer ID:			
Name (In Full): FIRST NAME	1	MEMILA	ST NAME		
Date of Birth: DDMMYYYY Gende	er: Male Female Tra	ansgender	d tunning tunning tunning tunning tunning		
Guardian's Name:					
(in case of minor) Permanent Account No: 1st Applicant	Guardian's PAN		Affix a		
Address Line 1:			latest photograph		
Address Line 2:			of the First Applicant		
Landmark:	City:		i iist Applicant		
State:	Pincode:				
Mobile** (+91):	Phone No.:		.i.		
E-mail ID**:	(with STD Code)				
Annual Income: Up to ₹ 2 lakh  ₹ 2 lakh to ₹ 5 lakh	₹ 5 lakh to ₹ 10 lakh ₹	10 lakh to ₹ 25 lakl	h   ₹ 25 lakh & above		
\$ \$			· · · · · · · · · · · · · · · · · · ·		
Others (Please specify)					
lamanus l	d to PEP Not Applicable	_			
Deposit Repayable (On Maturity / Prematurity) to First Applicant First Applicant or Survivor/s (Default)					
Annual Control of the	in person from the Branch	ant of Garvivon's (	Doladity		
** Either the Mobile number or E-mail ID is mandatory	· 				
SECOND APPLICANT Aadhar No.:		Customer ID:			
Name (In Full): FIRST NAME DE			J <mark>S T N A M E</mark>		
Date of Birth: Gende	er: Male Female Tra	ansgender	,		
Address Line 1:			Affix a		
Address Line 2:			latest photograph		
Landmark:	City:		of the		
State:	Pincode:		Second Applicant		
E-mail ID **:					
Mobile** (+91):	Phone No.: (with STD Code)				
Annual Income: Up to ₹ 2 lakh  ₹ 2 lakh to ₹ 5 lakh	₹ 5 lakh to ₹ 10 lakh ₹	10 lakh to ₹ 25 lakl			
Occupation: Private Sector Public Sector 6 Others (Please specify)	Business Professional F	Retired Housev	vife Student		
Politically Exposed Person [PEP]: Yes Related	to PEP Not Applicable	PAN No.:			
** Either the Mobile number or E-mail ID is mandatory	* *				

THIRD APPLICANT	Aadhar No.:		Customer ID:
Name (In Full):	STNAME		NAME LAST NAM
Date of Birth:	MYYYY (	Gender: Male Female	Transgender
Address Line 1:			
Address Line 2:			Affix a
Landmark:		City:	latest photograph of the
State:		P	incode: Third Applicant
E-mail ID **:			
Mobile** (+91):		Phone No.: (with STD Code)	
	o₹2 lakh	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	h  ₹ 10 lakh to ₹ 25 lakh  ₹ 25 lakh & abov
•	te Sector Public Sector		
·	rs (Please specify)		
Politically Exposed Person	,	elated to PEP Not Applica	able PAN No.:
** Either the Mobile number or E-mail ID i	is mandatory	Notice Control	Command Comman
NAME OF TRUST / SO	CIETY / CLUB / ASSOCIA	ATION / CORPORATE	Customer ID No.:
Name:			
Date of Incorporation:		Permanent Acco	ount No. (PAN):
First Trustee / Authorised			
Second Trustee / Authorite Third Trustee / Authorise	• • • • • • • • • • • • • • • • • • • •		
TDS to be deducted If NO, ple	- tunned to		ler u/s 10 My / Our interest for the ye will be less than ₹ 5000
Vanishing Committee	e is already submitted for currer	- variable variable	
	ST APPLICANT / TRUST / SOCIETY /	CLUB / ASSOCIATION / CORPORATE #F	Please provide a cancelled cheque of below mentioned account. (Mandato
Bank A/C No:			Account Type: Savings A/C Current A/
Bank Name:  Bank Branch:			IFSC Code:
BANK A/C DETAILS: SE	COND APPLICANT		"Please provide a cancelled cheque of below mentioned account. (Mandat Account Type: Savings A/C Current A/
Bank Name:			Cavings A/O Guirent A/
Bank Branch:			IFSC Code:
BANK A/C DETAILS:TH	IDD ADDI ICANT		
Bank A/C No:	IRD APPLICANT		Please provide a cancelled cheque of below mentioned account. (Mandato Account Type: Savings A/C Current A/
Bank Name:			
Bank Branch:			IFSC Code:
NOMINATION DETAILS	annal Samual	ummil tummil tummil tummil tummil tummil tummil tummil	
Name of the Nominee:			Relationship:
Guardian's Name:			Nominee DOB: DDMMYYY
Address of the Nominee:			
			Signature of Nominee (option
		about the benefits of Nomination facility to my/or person to the above mentioned DHFL Account	
my/our RD Account opening/renewal form	*		Signature of the First Applicant
DECLARATION			
			ade under the deposit application is through legitimate source and does not include
application is the beneficial owner of this depo	osit and as such he/she should be treated as the	payee for the purpose of tax deduction under section	
		d/made by the Company and after careful consideration of Public Deposit Schemes and I/We accept the same	on, I/We am/are making the deposit with the Company at my/our ne
I/We understand brokerage will be payable to	authorized broker, if any, and if the deposit is wi	thdrawn prematurely, proportionate brokerage will be	recovered from the deposit proceeds
APPLICANT'S SIGNAT	URE		
Cimpature of First A. P. 177	/Authorized Circutary	of County Annual Transaction (April 1997)	Giratus of Third Application (A. 1)
Signature of First Applicant/Trusto		e of Second Applicant/Trustee/Authorised Si	D. C.
FOR OFFICE USE ONLY Cus		RD No:	Rate of Interest:
RD Amount ₹:	Maturity	Amount ₹:	Maturity Date: DDMMYYYY
Maker:		Checker:	RD Statement to be sent to customer through
Signature:		Signature:	Hand Delivery Courier (Default Opt