

SUSPICIOUS TRANSACTION REPORT (STR) FOR A BANKING COMPANY

Kindly fill in CAPITAL. Read the Instructions before filling the form.

PART 4 LIST OF INDIVIDUALS LINKED TO TRANSACTIONS

	Name of individual	Customer ID/number (if allotted)	Annexure
4.1			A 1
4.2			A 2
4.3			A 3
4.4			A 4
4.5			A 5
4.6			A 6
4.7			A 7
4.8			A 8
4.9			A 9
4.10			A 10
4.11			A 11
4.12			A 12
4.13			A 13
4.14			A 14
4.15			A 15

(Details of all individuals should be furnished in prescribed annexure) Tick to confirm

Number of additional sheets for PART 4 attached (Leave blank if space provided above is sufficient and no extra sheet is attached)

PART 5 LIST OF LEGAL PERSONS/ENTITIES LINKED TO TRANSACTIONS

	Name of legal person/entity	Customer ID/number (if allotted)	Annexure
5.1			B 1
5.2			B 2
5.3			B 3
5.4			B 4
5.5			B 5
5.6			B 6
5.7			B 7
5.8			B 8
5.9			B 9
5.10			B 10

(Details of all legal persons/entities should be furnished in prescribed annexure) Tick to confirm

Number of additional sheets for PART 5 attached (Leave blank if space provided above is sufficient and no extra sheet is attached)

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PART 6 LIST OF ACCOUNTS LINKED TO TRANSACTIONS

	Account Number	Name of First Account Holder	Annexure
6.1	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 1 <input type="checkbox"/>
6.2	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 2 <input type="checkbox"/>
6.3	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 3 <input type="checkbox"/>
6.4	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 4 <input type="checkbox"/>
6.5	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 5 <input type="checkbox"/>
6.6	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 6 <input type="checkbox"/>
6.7	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 7 <input type="checkbox"/>
6.8	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 8 <input type="checkbox"/>
6.9	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 9 <input type="checkbox"/>
6.10	_____	_____	<input type="checkbox"/> C <input type="checkbox"/> 10 <input type="checkbox"/>

(Details of all accounts should be furnished in prescribed annexure) Tick to confirm

Number of additional sheets for PART 6 attached (Leave blank if space provided above is sufficient and no extra sheet is attached)

PART 7 DETAILS OF SUSPICIOUS TRANSACTION

7.1 Reasons for suspicion (Tick as applicable. Multiple selection is possible. Refer to instructions)

- | | | |
|--|---|--|
| <input type="checkbox"/> A Identity of client | <input type="checkbox"/> B Background of client | <input type="checkbox"/> C Multiple accounts |
| <input type="checkbox"/> D Activity in account | <input type="checkbox"/> E Nature of transaction | <input type="checkbox"/> F Value of transaction |
| <input type="checkbox"/> Z Other reason (specify) | _____ | |

7.2 Grounds of Suspicion (Mention summary of suspicion and sequence of events)

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

(continued on next page)

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7.3 Grounds of Suspicion (continued from previous page)

11 _____

12 _____

13 _____

14 _____

15 _____

16 _____

17 _____

18 _____

19 _____

20 _____

21 _____

22 _____

23 _____

24 _____

25 _____

26 _____

27 _____

28 _____

29 _____

30 _____

Number of additional sheets for PART 7 attached (Leave blank if space provided above is sufficient and no extra sheet is attached)

PART 8 **DETAILS OF ACTION TAKEN**

8.1 Whether the matter is/was under any investigation? (Mention the name of agency, person and contact details)

1 _____

2 _____

3 _____

4 _____

5 _____

Number of additional sheets for PART 8 attached (Leave blank if space provided above is sufficient and no extra sheet is attached)

DO NOT FILL. FOR FIU-IND USE ONLY	
ACK. NO.	_____
DATE	2 0 0 _____ D D M M Y Y Y Y

Signature

Name

(Should be same as the person mentioned in PART 2)

SUSPICIOUS TRANSACTION REPORT (STR) FOR A BANKING COMPANY INSTRUCTIONS

GENERAL INSTRUCTIONS

The Prevention of Money Laundering Act 2002

Under the Prevention of Money Laundering Act 2002, every banking company shall furnish details of suspicious transactions whether or not made in cash.

Suspicious transaction means a transaction whether or not made in cash which, to a person acting in good faith –

- (a) gives rise to a reasonable ground of suspicion that it may involve the proceeds of crime; or
- (b) appears to be made in circumstances of unusual or unjustified complexity; or
- (c) appears to have no economic rationale or bonafide purpose.

How to submit

Every bank branch must submit this form to the Director, FIU-IND only through the principal officer of the banking company designated under PMLA, 2002. In urgent cases, the form should also be sent by fax.

Address Director, FIU-IND
 Financial Intelligence Unit-India
 6th Floor, Hotel Samrat
 Chanakyapuri, New Delhi -110021
 India

Fax +91-11-26874459

EXPLANATION OF SPECIFIC TERMS

PART 1: DETAILS OF REPORT

- 1.1. Date of sending report is the date on which the principal officer sends the report to Director (FIU-IND).
- 1.2. Replacement report is a report submitted in replacement of an earlier STR. When a replacement report is submitted, date of submitting original STR may be mentioned and the complete STR has to be submitted again.

PART 2: DETAILS OF PRINCIPAL OFFICER

- 2.3. ID allotted by FIU-IND may be left blank till the same is communicated by FIU-IND.
- 2.4. Category of the bank
 "A"-Public Sector Bank "E"-Regional Rural Bank
 "B"-Private Sector Bank "F"-Local Area Bank
 "C"-Foreign Bank "Z"-Other
 "D"-Co-operative Bank

2.5. Principal officer is the officer designated by the banking company under PMLA, 2002

PART 3: DETAILS OF REPORTING BRANCH / LOCATION

Particulars of the branch/location in which the reported accounts are maintained should be submitted in this part.

PART 4: LIST OF INDIVIDUALS LINKED TO TRANSACTIONS

Customer ID/number may be given if allotted by bank. Enclose a separate Annexure A for each individual.

PART 5: LIST OF LEGAL PERSONS/ENTITIES LINKED TO TRANSACTIONS

Customer ID/number may be given if allotted by bank. Enclose a separate Annexure B for each legal person/entity. Include the details about individuals (Director/Partner/Member etc.) related to the

PART 6: LIST OF ACCOUNTS LINKED TO TRANSACTIONS

Enclose a separate Annexure C for each account.

PART 7: DETAILS OF SUSPICIOUS TRANSACTION

Reasons for suspicion

Reason	Examples of suspicious transaction
Identity of client	<i>False identification documents</i>
	<i>Identification documents which could not be verified within reasonable time</i>
	<i>Accounts opened with names very close to other established business entities</i>
Background of client	<i>Suspicious background or links with known criminals</i>
Multiple accounts	<i>Large number of accounts having a common account holder, introducer or authorized signatory with no rationale</i>
	<i>Unexplained transfers between multiple accounts with no rationale</i>
Activity in accounts	<i>Unusual activity compared with past transactions</i>
	<i>Sudden activity in dormant accounts</i>
	<i>Activity inconsistent with what would be expected from declared business</i>
Nature of transactions	<i>Unusual or unjustified complexity</i>
	<i>No economic rationale or bonafide purpose</i>
	<i>Frequent purchases of drafts or other negotiable instruments with cash</i>
Value of transactions	<i>Nature of transactions inconsistent with what would be expected from declared business</i>
	<i>Value just under the reporting threshold amount in an apparent attempt to avoid reporting</i>
	<i>Value inconsistent with the client's apparent financial standing</i>

ALL ANNEXURES MUST BE ENCLOSED.