ACCOUNT OPENING FORM (For Non Resident Indians)



FIRST APPLICANT DETAILS Application Date DD MM YYYY												
• Please complete this form in Black Ink and in CAPITAL LETTER is $$ where applicable												
Customer ID (If applicable) CKYC Number (If applicable) CKYC Number (If applicable)												
TELL US ABOUT YOURSELF First Applicant Name (Please complete as per your passport)												
TITLE FIRST NAME MIDDLE NAME LAST NAME												
Passport Number Expiry Date DD MM YYYY												
Citizenship Date of Birth DD MM YYYY												
PAN* Form 60 *If you have a Permanent Account Number (PAN) it is mandatory to provide details to the bank at the time of opening an account. If you do not have a PAN, please complete a Form 60												
Country of Tax Residence Foreign Tax Identification Number**												
Place/ City of Birth Country of Birth												
Are you a Politically Exposed Persons (PEP)# or related to one? Yes No												
Marital Status Married Unmarried Others Gender Male Female Third Gender												
Applicant Maiden Name (Applicable if your name has changed for marriage or any other reason)												
TITLE FIRST NAME MIDDLE NAME LAST NAME												
Father's Name (Mandatory, if customer does not have PAN) Spouse Name												
TITLE FIRST NAME MIDDLE NAME LAST NAME Mother's Name												
TITLE FIRST NAME MIDDLE NAME LAST NAME												
OVERSEAS ADDRESS (AS PER PASSPORT/ OTHER DOCUMENT)												
Passport Other Document (Please Specify)												
Passport Other Document (Please Specify)												
Passport Other Document (Please Specify) Document Number												
Document Number												
Document Number Line 1												
Document Number Line 1 Line 2												
Document Number Line 1 Line 2 City												
Document Number Line 1 Line 2 City Country Pin/Zip Code												
Document Number Line 1 Line 2 City Country Country COMMUNICATION ADDRESS												
Document Number Line 1 Line 2 City Country Document Number City Pin/Zip Code COMMUNICATION ADDRESS Same as Above This is my Residence Place of Work												
Document Number Line 1 Line 2 Country Country State Pin/Zip Code COMMUNICATION ADDRESS Same as Above This is my Residence Place of Work Line 1												
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TELL US WHAT YOU DO FOR A LIVING																										
Occupation	Sala	ried	(Ple	ase S	рес	ify (Corp	ora	ate T	уре)		Publi	c [P	rivat	е		Gov	veri	nme	ent				
Corporate Name																										
Self Employed Professional Doctor/CA/Architect/Lawyer/Consultant Entertainment/Alternate Medical Practitioner/Beautician																										
Self Employed Business Sole Proprietorship Partnership/Company No of Years in Business																										
Homemaker Retired Farmer Politician Student																										
Source of Funds Salary Business Professional Fees Investments Agriculture Family Wealth																										
Gross Annual Incom	Gross Annual Income (INR) Income in India (INR)* Income in India (INR)* Income in India (INR)* Income in India (INR)*																									
SECOND APPLICANT DETAILS																										
Customer ID (If applicable) CKYC Number (If applicable)																										
Residential Status of 2nd holder (In case if applicable and not ticked, it will be assumed it is Non Resident Indian)																										
Non Resident Indian Resident Indian																										
TELL US ABOUT YOURSELF																										
Second Applicant N	ame (Pl	ease (comp	lete a	s pei	yo.	ur pa:	ssp	ort)																	\equiv
TITLE FIRS	TITLE FIRST NAME MIDDLE NAME LAST NAME																									
Passport Number	I	\top								T]	Е	xpiry	Date				M	1	Y	Υ	Y	Y			
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Country of Tax Resi	dence														ntific					PAIN,	piea	se co	пріе	.e a r	ס וווו ס	J
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Place/ City of Birth											C	oun	try of	Birth	1			·	•			·				
Are you a Politically	Expose	ed Pe	rson	s (PE	EP)#	or i	relat	ed	to c	ne?		Ye	es	No												
Marital Status	Married		Unr	marri	ed		Otl	her	'S			G	iende	er	M	ale		Fe	ema	le		Т	hirc	Ge	ndei	r
Applicant Maiden N	ame (A	pplica	ble if	your	nam	e ha	as cha	ang	ed fo	or ma	arria	ige c	r any	other	reaso	1)										
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Mother's Name								_								_								_		
TITLE FIRS	TNAME						MID	DLI	E NA	ME					LAS	TNA	ME							Ш		
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Country									51	ate								PI	n/Z	ıp (Loa	e				



ADDRESS IN COUNTRY OF TAX RESIDENCE							
Same as overseas address mentioned above							
Line 1							
Line 2							
City							
Country State ZIP/Post Code							
HOW WOULD YOU LIKE US TO REACH YOU? (MOBILE & E-MAIL ADDRESS IS MANDATORY)							
Phone (Mobile) (Country Code) (Number) Phone (Residence) (Country Code) (Number)							
E-mail ID							
TELL US WHAT YOU DO FOR A LIVING							
Occupation Salaried (Please Specify Corporate Type) Public Private Government							
Corporate Name							
Self Employed Professional Doctor/CA/Architect/Lawyer/Consultant Entertainment/Alternate Medical Practitioner/Beautician							
Self Employed Business Sole Proprietorship Partnership/Company No of Years in Business							
Homemaker Retired Farmer Politician Student							
Source of Funds Salary Business Professional Fees Investments Agriculture Family Wealth							
Gross Annual Income (INR) Income in India (INR)*							
*Please complete if you have not provided Permanent Account Number (PAN)							
WHICH OF OUR PRODUCTS WOULD YOU LIKE?							
Non Resident External (NRE) Account. Please choose one below							
Savings Account Amount Current Account Amount							
Mode of Operation: Singly Either or Survivor Jointly* Minor Under Guardian Former or Survivor *Debit card or internet banking transactions will not be available for accounts operated 'jointly'							
Non Resident Ordinary (NRO) Account. Please choose one below:							
Savings Account Amount Current Account Amount							
Mode of Operation: Singly Either or Survivor Jointly* Minor Under Guardian Former or Survivor							
*Debit card or internet banking transactions will not be available for accounts operated 'jointly'							
IF YOU SELECT "MINOR UNDER GUARDIAN" PLEASE COMPLETE BELOW							
Customer ID of Guardian:							
Relationship with Minor Father Mother Court Appointed (If yes, please attach a copy)							
Funding Mode Account Number of Guardian to be debited:							
Monthly debit of INR from above account for months from the of this/next month (*Minimum 24 months)							
Initial Funding Amount To be Transfer to:							
Non Resident External (NRE) Amount							
Non Resident Ordinary (NRO) Amount							
Name & Signature of the Guardian DECLARATION BY GUARDIAN							
I shall represent the minor in all future transactions of any description in the							
above account till the same minor attains majority. I shall indemnify the bank against any claims of the above minor of any withdrawals/transactions made by me in his/her account							



(Required only if applicants use thumb impressions)

WOULD YOU LIKE TO CHOOSE A NOMINEE FOR THE ACCOUNT?											
(Nomination under Section 45 ZA of the Banking Regulations Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rule, 1985 in respect to Bank Accounts.) The Nominee or Guardian (if applicable) cannot be a holder on the account.											
Yes, I want to nominate the following person to whom in the event of my/our/minor's death the amount of deposit in account may be returned by IDFC FIRST Bank Ltd	th										
No, I do not wish to nominate anyone on my behalf at this moment. I understand the advantages of nomination and the consequences of nominating anyone to my account	no										
Customer ID (In case an existing account holder, don't fill address)											
Nominee Name											
TITLE FIRST NAME MIDDLE NAME LAST NAME											
Nominee Address Same as primary account holder communication address Update address as below											
	_										
Relationship with Depositor Nominee Date of Birth											
If the nominee is a minor**, please complete this section. As the nominee is a minor on this date, I/We appoint:											
Guardian Name											
TITLE FIRST NAME MIDDLE NAME LAST NAME											
Guardian Address											
to receive the amount of deposits in the account on behalf of the nominee in the event of my/our/minor's death during t minority of the nominee. (** Where deposit is made in the name of a minor the nomination must be signed by a person lawfully entitled to act on behalf of the minority of the nominee name in the statement/advice/passbook											
I/We do hereby declare what is stated above is true to the best of my knowledge and belief.											
Date DD MM YYYYY Place Place	_										
FIRST/PRIMARY APPLICANT SIGNATURE SECOND/JOINT APPLICANT SIGNATURE											
WITNESS 1 WITNESS 2											

(Required only if applicants use thumb impressions)



DECLARATION (Please read carefully and sign at the end of this section after you have filled in all the details in the form)

- I/We wish to avail the banking facilities/products from IDFC FIRST Bank Limited ("IDFC FIRST Bank"), and other products/services including Mutual Funds and/or insurance products that are offered by IDFC FIRST Bank in its capacity as an Intermediary and I/We have read, understood and agree to the Terms and Conditions displayed on the website of IDFC FIRST Bank i.e. www.idfcfirstbank.com, w.r.t. the said banking acilities and other products/services which may be amended by IDFC FIRST Bank from time to time and hosted and notified on
- bank i.e. www.intcrinstruank.com, w.i.t. the said darking actitities and other products/services which may be amended by IDFC FIRST Bank.

 I/We have read, understood and agree to the charges/costs, mentioned in the extant Schedule of Charges pertains to the banking facilities and products as well as the facilities and/or the other products which I/We wished to avail. This Schedule of Charges is also displayed on www.idfcfirstbank.com

 I/We hereby declare that I/We am a Non-Resident Indian (NRI) or Person of Indian Origin as defined under the Foreign Exchange Management Act, 1999. I/ We agree to notify IDFC
- 3.
- FIRST Bank about my return to India for permanent residence I/We agree to abide by and be bound by all applicable rules/regulations/instruction/guidelines issued by the Reserve Bank of India, and under, the Foreign Exchange Management Act, 1999 and Foreign Account Tax Compliance Act, 2010 (to the extent applicable to India) and the Common Reporting Standards (CRS), in force from time to time. I / we have declared our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 (the Act) as notified by Central Board of Direct Taxes (CBDT) in this regard. I/We will not make our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 (the Act) as notified by Central Board of Direct Taxes (CBDT) in this regard. I/We will not make available foreign exchange to a person resident in India against reimbursement in rupees in my/our NRO account or in any other manner. I/We declare that in case of debits to my/our NRO account for investments in India and credits to my/our NRO account representing sale proceeds of investments, I/We will ensure that such investments/ disinvestments will be in accordance with the regulations made by the RBI in this regard. Further, INR credits to my/ our NRO account will be restricted legitimate dues in India (like earnings / income such as dividends, interest etc.), proceed from sale of asset and transfers from other NRE/NRO accounts, or as permitted by RBI from time to time. I/We authorize IDFC FIRST Bank to conduct my credit history verification with CBIL or any other credit rating agency and acknowledge that IDFC FIRST Bank shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to IDFC FIRST Bank. I/We also hereby authorize IDFC FIRST Bank to retrieve my credit information report with help of accredited credit rating agencies and share the same with me directly as per bank's internal policy. I/We agree to furnish and intimate to IDFC FIRST Bank any other particulars that I am called upon to provide on account of any change in law/statutory requirements either in India or abroad. I/We uthorize IDFC FIRST Bank to exchange, share or part with all the customer information/KYC documents provided herein with financial institutions/agencies/statutory bodies/other such persons including but not limited to financial products/services providers e.g. Insurance companies, Asset Management Companies etc. for the services/products/services providers e.g. Insurance companies, Asset Management Companies etc. for the services/products/services p

- bodies/other such persons including but not limited to financial products/services providers e.g. Insurance companies, Asset Management Companies etc. for the services/products which I/We wished to avail and with whom IDFC FIRST Bank has agency/distribution/marketing/referral arrangement, as may be required by IDFC FIRST Bank. I/We shall not hold IDFC FIRST Bank or its agents/representatives liable for using/sharing such information. I/We agree to immediately inform IDFC FIRST Bank of any changes to the information provided during account opening.

 I/We hereby declare that the information provided herein as well as in the documentary evidence provided by me/us to IDFC FIRST Bank (the "Customer Information") is true, correct and complete in all aspects to the best of my knowledge and that I/we have not withheld any Customer Information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I/We further agree that any false/misleading Customer Information given by me or suppression of any material fact will render my account liable for closure and the bank shall have the right to initiate any action, under law or otherwise.

 If any of the information provided here is incorrect, I/We hereby agree to indemnify and keep indemnified IDFC FIRST Bank, affiliates and their successors or assignees.

 I/We agree and understand that IDFC FIRST Bank reserves the right to reject my account opening application form/request and/or the request for availing the services/products without assigning any reason thereof and without being liable to me in any manner whatsoever.

- I/We authorise IDFC FIRST Bank to submit applications/other relevant documents, debit my bank account and transfer funds in any form and manner for transactions in Mutual I/We authorse IDFC FIRST Bank to submit applications/other relevant documents, debit my bank account and transfer funds in any form and manner for transactions in Mutual Funds/Other investment products or do any such incidental things in pursuance of the specific instructions given by me/us or my Attorney from time to time for the services and/or the products I wished to avail. I/We state that all the acts, deeds and things done by IDFC FIRST Bank based on such instructions shall be binding on me/us. I/We hereby agree and consent to avail other products/services including Mutual Funds and/or insurance products and further agree to absolutely abide by all the Terms and Conditions in respect thereof. I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the registered number/email address shared with IDFC FIRST Bank to, from time to time (at its discretion), rely upon and act or omit to act in accordance with any directions, instructions and/or other
- ommunication which may from time to time be or purport to be given in connection with or in relation to the said Account(s) by email by me/us or the person(s) authorised by me/us
- 1/we hereby agree and undertake to send Instructions to IDFC FIRST Bank by email from the email address registered with the bank. 1/we understand that the Internet is not encrypted and is not a secure means of transmission. I/we further acknowledge and accept that such an unsecured transmission method involves risks of possible unauthorized alteration of data and is not a secure means of transmission. I/we further acknowledge and accept that such an unsecured transmission method involves risks of possible unauthorized alteration of data and/or unauthorized usage thereof for whatever purposes. I/we hereby further agree and undertake to exempt IDFC FIRST Bank from any and all responsibility of such misuse and receipt of information, and hold IDFC FIRST Bank harmless for any costs or losses that I/we may incur due to any errors, delays or problems in transmission or otherwise caused by using the internet as a means of transmission. I/We understand that the bank may attempt to authenticate all requests received on e-mail, prior to executing the transaction In addition, I/we shall indemnify IDFC FIRST Bank at all times and keep IDFC FIRST Bank are possible and expenses incurred, suffered or paid by IDFC FIRST Bank or required to be incurred, suffered or paid by the Bank and also against all demands, actions, suits proceedings made, filed, instituted against IDFC FIRST Bank, in connection with or arising out of or relating to:

 1) any Instruction received by/given to IDFC FIRST Bank which I/we believe in good faith to be such an Instruction by Email Submission; and/or

 ii) any unauthorised or fraudulent Instruction to IDFC FIRST Bank;

 Notwithstanding anything contained herein or elsewhere, IDFC FIRST Bank shall not be bound to act in accordance with the whole or any part of the Instructions or directions contained in any Instruction set by Email and may in its sole discretion and exclusive determination, decline or omit to act pursuant to any Instruction, or defer acting in accordance with any
- Notwithstanding anything contained herein or eisewhere, IDFC FIRST Bank shall not be bound to act in accordance with the whole of any part of the instructions or directions contained in any Instruction sent by Email and may in its sole discretion and exclusive determination, decline or omit to act pursuant to any Instruction, or defer acting in accordance with any Instruction, and the same shall be at my/our risk and IDFC FIRST Bank shall not be liable for the consequences of any such refusal or omission to act or deferment of action.

 I/We am fully aware that the bank sends SMS alerts on all account/card related transactions promptly on the mobile number/e-mail ID shared at the time of account opening/updated subsequently and any failure to update contact information with the bank may result in any financial loss in case of misuse of cards.

 All fees/charges to be paid shall be exclusive of goods and services tax (GST) as my be applicable. IDFC First Bank will provide me/us Services Accounting Code(SAC) and this will be
- quoted in all our invoices/credit/debit notes where applicable.
- In the event that I/We convert my/our status from a Resident Indian to a Non Resident Indian and request for conversion of an IDFC FIRST Resident Account, I/We authorize IDFC FIRST Bank to re-designate my/our existing Resident Account to a Non-Resident Ordinary Account and fully understand the impact of this re-designation on all monies and investments that I/We currently hold in my existing Resident Account

 For Citizens of Bangladesh or Pakistan Only: I/We have obtained specific approval from the Reserve Bank of India to open accounts for Non Resident Indians and a copy of the same
- has been submitted along with my/our application form. This permission will not be required for citizens of Bangladesh holding valid visa and resident permit issued by Foreigner
- Registration Office (FRO)/Foreigner Regional Registration Office (FRRO) opening an NRO account.

 For accounts with Method of Operation "Either or Survivor": I/We hereby confirm that premature withdrawals of all Term Deposits placed and/or proposed to be placed shall be paid by IDFC FIRST Bank under the operation rule of "Either or Survivor".

Would you like IDFC FIRST Bank or its representatives to contact you and tell you about various products Yes (including insurance), services and offers? FIRST APPLICANT SIGNATURE SECOND APPLICANT SIGNATURE NAME NAME Date Date Place Place Please paste a Please paste a RECENT Colour RECENT Colour

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sign across the

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	BANK USE SECTION:	
Payment Details NRE Account Amount Payment Details		
NRO Account Amount Payment Details		
Other Details		
Account Branch Code	Account Branch Name	Product Code
Sourcing Branch Code	Lead Generator	Lead Warmer
Lead Converter	Profit Center	_ Corporate Code
Banker Certification (Choose any one)		
Face to Face Case Have met customer in person in his/h		
Residence Work	Other	
	documents. Copy/Photo taken for record	Signature of Employee
Customer has signed in my presence	Certification Date	Signature of Employee
NameEmployee ID/RM Code		
Non Face to Face Case Mode of sending AOF and Self attests		
E-Mail Courier	Other	Signature of Employee
Name	Certification Date	
Employee ID/RM Code		
RBICrCatg / RBIcrCode /	Owner-street BSR org	DDIDCo.do

RBICrCatg / COA Category	RBIcrCode / COA Code	Organization	BSR org Code	RBIDrCatg	RBIDrCode		
180 - Household, MFI, TASC	191 - Non Resident Individuals	Individual- Non Resident	10	350 - Non Infrastructure	383 - Other Retail		

^{*} Politically Exposed Persons ("PEP/s"): Politically exposed person are individuals who are or have been entrusted with prominent public functions in a foreign country. Examples of PEPs include, but is not limited to:

- (i) Heads of States or of Governments
- (ii) Senior politicians
- (iii) Senior government/Judicial/Military officers (iv) Important political party officials

The term PEP also include the families and close associates of the PEPs mentioned above.

Families: The term families includes close family members such as spouse, children, parents and sibiling and may also include other blood relatives and relatives by marriage.

Close Associates: The term closely associated persons in the context of PEPs includes close business, Colleagues and personal advisors/consultants to the PEP as well as persons who benefit significantly from being close to such a person.

April 2020

[&]quot;If you are a Tax Resident of any country in addition to the above, please fill the "Annexure - Overseas Jurisdiction Address"