CUSTOMER INFORMATION FORM | Know Your Customer (KYC) Individual E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available Important Instructions: A) Fields marked with '*' are mandatory fields. F) List of two character ISO 3166 country codes is available at the end. B) Please fill the form in English and in BLOCK letters. G) KYC number of applicant is mandatory for update application. C) Please fill the date in DD-MM-YYYY format. H) For particular section update, please tick (ü) in the box available before the section number and strike off the sections not required to be updated. D) Please read section wise detailed guidelines / instructions at the end. For office use only Application Type* Update □ New (To be filled by financial institution) **KYC Number** (Mandatory for KYC update request) Account Type* Simplified (for low risk customers) ☐ Small Normal Owner Branch Satellite Office 1. PERSONAL DETAILS (Please refer instruction A at the end) Name* (Same as ID proof) Maiden Name (If any*) Father / Spouse Name* Mother Name^{*} Mothers Maiden Name Date of Birth* In case of minor, proof of DOB to be submited **РНОТО** Expiry Date Proof Type Proof No. Gender* ☐ M-Male ☐ F- Female T-Transgender Marital Status* Married ■ Unmarried ☐ Widow / Widower Divorcee Family Details Adults Minors Citizenship* ☐ Others (ISO 3166 Country Code ☐ IN- Indian Residential Status* Resident Individual ☐ Non Resident Indian ☐ Foreign National Person of Indian Origin Residence ☐ Owned Leased Period of stay at the above address Less than 1 year 1-3 years ☐ 3-5years ☐ More than 5 years Physical Status ■ Normal ☐ Physically Handicaped ☐ Blind Weaker Section Code ☐ Agri Labourer ☐ MF ☐ SF ☐ Artisan ☐ Others (Specify)..... Hindu ☐ Christian ☐ Sikh ☐ Budhists ☐ Jain ☐ Others (Specify)...... Religion Muslim SC ST ORC Caste General Others (Specify)..... Occupation Type* ☐ S-Service (☐ Private Sector ☐ Public Sector ☐ Government Sector) ☐ 0-Others (☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student) ☐ B-Business ☐ Others (Specify **Education Qualification** ☐ Unable to Read, Write ☐ Below 10th Std ☐ 10th Std ☐ 12th Std ☐ Graduate ☐ Post Graduate ☐ Professional Self employed for Months Years ☐ Manufacturing Nature of Business ☐ Service Others (Specify)..... ☐ Trader ☐ Real Estate 5-10 lakhs Income per Annum Up to 1 lakh 1-5 lakhs ☐ 10-20 lakhs Above 20 lakhs Regular Customer Code: ☐ Preferred Staff □ VVIP ☐ Ex Service men Politically Exposed Person Yes No Do Not Call Yes ☐ No 2. TICK IF APPLICABLE TRESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA (Please refer instruction B at the end) ADDITIONAL DETAILS REQUIRED* (Mandatory only if section 2 is ticked) ISO 3166 Country Code of Jurisdiction of Residence* Tax Identification Number or equivalent (If issued by jurisdiction)* Place / City of Birth* ISO 3166 Country Code of Birth* 3. PROOF OF IDENTITY (PoI)* (Please refer instruction C at the end) (Certified copy of <u>any one</u> of the following Proof of Identity[Pol] needs to be submitted) Passport Expiry Date D D M M Y Y ☐ A- Passport Number ☐ B- Voter ID Card C- TAX Details PAN Form 60 ☐ D- PAN Card ☐ E- Driving Licence Driving Licence Expiry Date F- UID (Aadhaar) ☐ G- NREGA Job Card Z- Others (any document notified by the central government) Identification Number S- Ration Card ☐ VISA Type VISA Issued by

VISA Expiry Date

☐ VISA Place of Issue

4. PROOF OF ADDI	RESS (PoA)*						
4.1 PERMANENT A	DDRESS DETAILS (Please see instruction	n D at the end)					
(Certified copy of <u>any on</u>	e of the following Proof of Address [PoA] ne	eds to be submitted)					
Address Type*	Residential / Business	Residential	Business	Registered Office Unspecifie			
Proof of Address*	Passport	☐ Driving Licence	UID (Aadhaar)				
D 4 N	☐ Voter Identity Card	☐ NREGA Job Card		se specify			
PoA No.			Expiry Date: DDM	MYYYY			
Address Line 1*							
Line 2							
Line 3			City / Town / Village*				
District*	Pin / Po	ost Code*	State / U.T Code*	ISO 3166 Country Code*			
12 OVEDSEAS/COM	MMUNICATION ADDRESS DETAILS* (Plea		et the end)				
	ent to Permanent Address (same as abo						
Line 1*	The to Termine readings (same as abo	Till Sverseus Audire					
Line 2							
Line 3			City / Town / Village*				
District*	Pin / Po	ost Code*	State / U.T Code*	ISO 3166 Country Code*			
				,			
	E JURISDICTION DETAILS WHERE APPLIC rmanent / Overseas Address details			• • • • • • • • • • • • • • • • • • • •			
	rmanent / Overseas Address details		same as Correspondence / Local Addre	ess details			
Line 1*							
Line 2							
Line 3			City / Town / Village*				
District*	Pin / Po	ost Code*	State / U.T Code*	ISO 3166 Country Code*			
5. CONTACT DETAI	LS (All communications will be sent on provide	ed Mobile no. / Email-ID) (P	Please refer instruction F at the end)				
Tel. (Off)		Tel. (Res)		obile			
AX		Email ID					
	ATED PERSON (In case of additional relate		annua D11 \ /alaasa wafar instruction C a				
O. DETAILS OF REL	ATED FERSON (III case of additional relati	ed persons, prease nic Ann	nexure by 7 (please refer histi uction d a	it the end)			
Addition of Related Pe	rson Deletion of Related Person		lumber of Related Person (if available*)				
Related Person Type*	☐ Guardian of Minor	Assignee	☐ Authorized Repres				
Prefi Name*	x First Name		Middle Name	Last Name			
	number and name are provided, below details of	f section 6 are optional)					
	PoI) OF RELATED PERSON* (Please refer in						
A- Passport Num		1	Passport Expir	y Date DDMMYYYY			
B- Voter ID Card		1					
C- TAX Details	PAN Form 60	1					
D- PAN Card		1					
E- Driving Licence		1	Driving Licence Expire	v Date D D M M Y Y Y			
F- UID (Aadhaar)		j	gp	, , , , , , , , , , , , , , , , , , , ,			
G- NREGA Job Cai	rd	ĺ					
Z- Others (any doc	tument notified by the central government)		Identification Nu	umber			
S- Ration Card]					
□ VISA Type]	VISA Issu	ued by			
VISA Place of Issu	le		VISA Expir	y Date D D M M Y Y Y Y			
7. REMARKS (If any	r)						
8. APPLICANT DE	CLADATION						
	Is furnished above are true and correct to the best of my kn	owledge and belief and I undert	take to inform you of any changes				
therein, immediately. In case a for it.	any of the above information is found to be false or untrue or	misleading or misrepresenting, I a	am aware that I may be held liable				
	nformation from Central KYC Registry through SMS/Email on	the above registered number/ema	nail address.				
Date : D D M M	Y Y Y Y Place:			Signature / Thumb Impression of Applicant			
9. ATTESTATION	/ FOR OFFICE USE ONLY						
Documents Received	Certified Copies						
	KYC VERIFICATION CARRIED OUT BY		INSTITUTION DETAILS				
Date	DDMMYYYY		Name				
Emp. Name			Code				
Emp. Code				1			
Emp. Designation			[Employee Signature]	[Institution Stamp]			
Emp Branch			[Employee signature]	Fustrotion statib)			

FATCA- CRS Declaration by Individual Customer											
Name:											
CIFID:											
	- M-2112										
	E-Mail Id										
	PAN										
	Date of Birth DDMMYYYYY										
Country of Birth	City of Birth										
Country of Tax Residency	TIN/FE No										
Issuing Country of Tax Payer Identification Number(TIN) /Functional Equivalent :											
☐ I confirm that I am tax resident of India and not of any other country.											
☐ I confirm that I am a "US PERSON " / "Reportable Person" and all the required details in	n this connection, are given in the Customer Information Form.										
☐ I confirm that I am neither a U.S Person nor a resident for Tax purpose in any country of											
the country outside India. Therefore, I am providing the following document as proof of	my citizenship and residency in India. (applicable when any of the Indicia										
parameters is outside India, and TIN or the functional equivalent is not available since not	a resident for tax purpose outside India, OR country of birth is US and US										
Personis reported as No" above)	DAN Card										
□ Passport □ Voter ID □ Aadhaar □ NREGA Job Card □ Others □ Document #	PAN Card Driving License										
I hereby certify that I have declared my status as per the rules applicable under section											
Taxes(CBDT) vide notification No.S.O.2155(E)dated 7th August 2015 and RBI Circular No.											
August 2015 in this regard.											
☐ I understand that the Bank is relying on this information for the purpose of determining											
I shall seek advice from a professional tax advisor for clarification on my tax residency and	lits implication under FATCA / CRS										
I understand and acknowledge that as per the provisions of Income Tax Act, Rules ma	, , , , , , , , , , , , , , , , , , , ,										
upon the residential status and / or other criteria stipulated therein, the Bank may have to											
to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply w common Reporting Standards (CRS) and or any other similar arrangements.	ith the obligations as per the inter-governmental agreements (IGA) and										
I certify that the information provided by me above as applicable to me and signed by	me as well as in the documentary evidence provided by me is to the hest										
of my knowledge and belief, true, correct and complete and that I have not withheld any m											
account as a U.S Reportable Account or other Reportable Account or otherwise. In case an											
misinterpreting, I am aware that I may be held liable for it.											
$\hfill \square$ I undertake the responsibility to declare and disclose within 30 days from the date of charges \hfill	ange, any changes that may take place in the information provided above,										
as well as in the documentary evidence provided by me or if any certification becom	es incorrect and to provide fresh and valid self-declaration along with										
documentary evidence.											
Place : Date: D D M M Y Y Y Y	Customer Signature										

Note-The term United States person means:a.an individual, being a citizen / resident / Green Card Holder of the United States of America; b.partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;c.a trust if: i. a court within the United States of America would have authority under applicable law to render orders or judgements concerning substantially all issues regarding administration of the trust; and ii. one or more U.S. persons have the authority to control all substantial decisions of the trust; d.an estate of a decedent who was a citizen or resident of the United States of America.

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

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

General Instructions:

- 1 Fields marked with* are mandatory fields.
- 2 Tick'S' wherever applicable.
- 3 Self-Certification of documents is mandatory.
- 4 Please fill the form in English and in BLOCK Letters.
- 5 Please fill all dates in DD-MM-YYYY format.
- Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively list of which is available at the end.
- 7 KYC number of applicant is mandatory for updation of KYC details.
- $8 \quad \text{For particular section update, please tick (S) in the box available before the section number and strike off the sections not required to be updated.}$
- $9 \qquad \text{In case of 'Small Account type' only personal details at section number 1 and 2, photograph, signature and self-certification required.}$
- A Clarification / Guidelines on filling 'Personal Details' section
 - 1 Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
 - $2\qquad \text{Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.}$
- B Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India
 - 1 Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)
- C Clarification / Guidelines on filling 'Proof of Identity [PoI]' section
 - $1 \quad \text{If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.} \\$
 - $2\qquad \text{Mention identification/reference number if 'Z-Others (any document notified by the central government)' is ticked.}$
 - In case of Simplified Measures Accounts for verifying the identity of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 3 (S).

Document Code Description

- Identity card with applicant's photograph issued by Central/ State Government Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions.
- Letter issued by a gazetted officer, with a duly attested photograph of the person.
- Clarification / Guidelineson filling 'Proof of Address [PoA] Current / Permanent / Overseas Address details' section D
 - PoA to be submitted only if the submitted Pol does not have an address or address as per Pol is invalid or not in force.
 - $State/U.T\,Code\,and\,Pin/\,Post\,Code\,will\,not\,be\,mandatory\,for\,Overseas\,addresses.$
 - In case of Simplified Measures Accounts for verifying the address of the applicant, any one of the following documents can also be submitted and undernoted relevant code may be mentioned in point 4.1.

Document Code Description 1 Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill). 2 Property or Municipal Tax receipt. 3 Bank account or Post Office savings bank account statement. 4 $Pension\ or\ family\ pension\ payment\ or\ ders\ (PPOs)\ is sued\ to\ retired\ employees\ by\ Government\ Departments\ or\ Public\ Sector\ Undertakings,\ if\ they\ contain\ the\ address.$ 5 Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official and the such employers allotting of the such employers all the such empl

- Documents is sued by Government departments of foreign jurisdictions and letter is sued by Foreign Embassy or Mission in India.
- To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- Clarification / Guidelines on filling 'Contact details' section

6

- Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- Do not add '0' in the beginning of Mobile number.
- Clarification / Guidelines on filling 'Related Person details' section

accommodation.

- Provide KYC number of related person if available.
- Clarification / Guidelines on filling 'Related Person details Proof of Identity [Pol] of Related Person' section

Dadra and Nagar Havel Daman & Diu

Delhi Goa

Mention identification / reference number if 'Z-Others (any document notified by the central government)' is ticked.

Clarification / Guidelines on filling 'Proof of Address [PoA] - OVERSEAS/COMMUNICATION ADDRESS DETAILS' section

List of two - digit state / U.T codes as per Indian Motor Vehicle Act, 19 88 State / U.T State / U.T Andhra Pradesh Arunachal Pradesh Jammu & Kashmii Jharkhand PB RJ Rajasthan Assam Bihar Karnataka Kerala KA KL Sikkim Tamil Nadu TN Chandigarh Chattisgarh Telangana TR Tripura Uttar Pradesi Uttarakhand Madhya Pradesh

West Bengal Other

UA

WB XX

Maharashtra Manipur

Meghalaya Mizoram

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