

CUSTOMER INFORMATION UPDATE FORM

RESIDENT INDIVIDUAL

Please fill the form in BLOCK LETTERS only. *Fields are mandatory

Customer ID:

Account No.*:

PERSONAL DETAILS

For Joint Account Holder, please use a separate form for each account holder.

Name*:

Mothers Maiden Name*:

Date of Birth*: DD MM YY YY YY YY Gender*: Male Female Others

Nationality*:

PAN No./Form 60*: Aadhaar No: / /

COMMUNICATION ADDRESS

Residence Permanent Office

Address*:

Flat No. & Bldg. Name:

Road Name & Area Landmark:

City: State:

Tel .No. Resi.: S T D PIN:

Off.: S T D Mobile No:

E-Mail ID:

OCCUPATION DETAILS

Occupation*:	<input type="checkbox"/> Salaried <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Politician <input type="checkbox"/> Student <input type="checkbox"/> Others _____
Business/ Industry *:	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Stock Broker <input type="checkbox"/> Real Estate <input type="checkbox"/> Trader <input type="checkbox"/> Others _____
Source of Funds*:	<input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Agriculture <input type="checkbox"/> Investment Income <input type="checkbox"/> Others (Pls. specify) _____
Gross Annual Income* (₹):	<input type="checkbox"/> <50,000 <input type="checkbox"/> 50,000 – 1 Lac <input type="checkbox"/> 1 – 3 Lac <input type="checkbox"/> 3 – 5 Lac <input type="checkbox"/> 5 – 7 Lac <input type="checkbox"/> 7 – 10 Lac <input type="checkbox"/> 10 – 15 Lac <input type="checkbox"/> >15 Lac
Residence type*:	<input type="checkbox"/> Owned <input type="checkbox"/> Rented/ Leased <input type="checkbox"/> Family <input type="checkbox"/> Company Provided
Nature of Organization :	<input type="checkbox"/> Private Ltd <input type="checkbox"/> Partnership <input type="checkbox"/> Public Sector <input type="checkbox"/> Public Ltd <input type="checkbox"/> Multinational <input type="checkbox"/> Proprietorship <input type="checkbox"/> Government <input type="checkbox"/> Others (Pls. specify) _____
If Self-employed - since:	<input type="checkbox"/> <input type="text"/> Years <input type="checkbox"/> <input type="text"/> Months
Self-employed Professional:	<input type="checkbox"/> Doctor <input type="checkbox"/> IT Consultant <input type="checkbox"/> Lawyer <input type="checkbox"/> Architect <input type="checkbox"/> CA/CS <input type="checkbox"/> Others (Pls. specify) _____

FATCA DECLARATION

Are you a tax resident of any country other than India? Yes No

Country	TIN/SSN/ Functional Equivalent	Identification Number (TIN or other please specify)

Details under FATCA-CRS/Foreign Tax Laws: 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. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. **Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.** Towards compliance with such laws, 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. 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).

If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

DECLARATION

I do hereby declare that the information provided with respect to my account is up to date and correct. Details declared on this form will be updated in bank records and treated as the latest data. I hereby attach the following self attested proofs:

<input type="checkbox"/> Address Proof: _____
<input type="checkbox"/> Identity Proof: _____

Signature of Account Holder

FOR BRANCH USE ONLY

All Documents Self-Attested and Verified <input type="checkbox"/>
Signature on the form/ documents matched bank records <input type="checkbox"/>

Any other comments: _____

Branch Code: _____

Branch Name: _____

Name & ECN: _____

Signature: _____

CUSTOMER ACKNOWLEDGEMENT RECEIPT

Thank You

We have received your request for RE-KYC updation along with self-attested documents for your Customer ID _____ on _____ (dd/mm/yyyy). Your request ID for all future reference and communication is _____.

Once your Re-KYC is updated, an SMS will be sent to you on your registered mobile number updated in our system. If you do not receive any information in 3 working days from the date of request, please call 1860 267 7777 for more details.

Branch Official Stamp & Sign with ECN No. _____