

ANNEXURE FOR TABLET BASED ACCOUNT OPENING



ALL fields marked “*” are mandatory.

Application No.

Customer ID

Account Title

ANNEXURE 1 - FATCA/CRS DECLARATION

A	Incorporation Information		Details
	Place of Incorporation		
	Country of Incorporation		
	Company Identification Number		
B	Declaration of Tax Residency		
	Sr. No.	Country(ies) of Tax Residency	Tax Identification Number
C	Exclusion Category, if applicable, for tax residents outside India (Refer Glossary)		Details
1	US Persons		
2	Other than US Persons		

Note: Please attach a copy of the Tax Residency Certificate/Copy of Incorporation or Equivalent Document for each of the countries mentioned above.

ANNEXURE 2 - FATCA/CRS DECLARATION

A. Listed entity/its related entity	Yes	No
a) Whether the entity is a listed entity? If yes, Listed in <input type="checkbox"/> NSE, <input type="checkbox"/> BSE <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>
b) Whether the entity is a related entity^ of a listed entity? Specify the name of the listed company _____ Listed in <input type="checkbox"/> NSE, <input type="checkbox"/> BSE <input type="checkbox"/> Others _____ (Please specify) <small>^An entity is a related entity of another entity if either entity controls the other entity, or the two entities are under common control (i.e., Ownership of more than 50% of the votes/value in an entity)</small>	<input type="checkbox"/>	<input type="checkbox"/>
B. Non Individuals other than Listed entity/its related entity (Tick applicable category)		
a) Government Entity	<input type="checkbox"/>	<input type="checkbox"/>
b) International Organization	<input type="checkbox"/>	<input type="checkbox"/>
c) Central Bank	<input type="checkbox"/>	<input type="checkbox"/>
d) Entity wholly owned by a, b or c above	<input type="checkbox"/>	<input type="checkbox"/>
e) Tax-exempt Entity engaged in a Charitable Purpose	<input type="checkbox"/>	<input type="checkbox"/>
C. Business		
a) Holding Company (with subsidiaries engaged in non-financial trade or business)	<input type="checkbox"/>	<input type="checkbox"/>
b) Company providing, financing and hedging services to related entities	<input type="checkbox"/>	<input type="checkbox"/>
D. Income/Assets Criteria		
a) 50% or more of the income in preceding financial year is from trading/business activities AND	<input type="checkbox"/>	<input type="checkbox"/>
b) 50% or more of the assets in preceding financial year are held for trading/business purposes		

06-2020



ANNEXURE 3* - BENEFICIAL OWNERSHIP DECLARATION

Note: Beneficial Owners are not required to be identified in the case of Listed Companies or Wholly Owned Subsidiaries of a Listed Company. In cases of trust/nominee or fiduciary accounts determine whether the customer is acting on behalf of another person as trustee/nominee or any other intermediary and obtain satisfactory evidence of the identity of the intermediaries and of the persons on whose behalf they are acting as well as details of the nature of the trust or other arrangements in place.

Please tick the relevant option below:

- ☐ The following natural person(s) ultimately have a controlling ownership interest of shares/capital/profit/property more than 25% for a company and more than 15% for a partnership/LLP/unincorporated association/body of individuals (Association/Society/etc.) or exercise control through other means such as management rights, voting/shareholders agreement, etc.
- ☐ There are no natural person(s) who exercise control or ultimately have a controlling ownership interest as stated above; therefore, details of partner(s) (for partnership firms)/ or senior managing official of a company/unincorporated association/body of individuals (Association/Society/etc.) have been provided in the table below.
- ☐ Where the customer is a trust, the identification of beneficial owner(s) shall include identification of the author of the trust, the trustee, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

Sr. No	Name	Current address	Does the OVD address match the current address (If "No" provide a deemed OVD)	Mobile No.	Date of Birth	Gender	Control Details Type	Controlling Ownership %
1.								
2.								
3.								
4.								
5.								

Sr. No	Nationality	Resident of India	PAN*	OVD & Deemed OVD	Father's Name	Occupation	Country of Birth	Country of Tax Residence	Tax Identification Number (TIN)
1.	<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident								
2.	<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident								
3.	<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident								
4.	<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident								
5.	<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident								

Note: #Please quote PAN/form 60 in the PAN field.

Applicable for Indian nationals/resident individuals. For other countries, functional equivalent of PAN (like Tax identification number•TIN number or unique number like Social Security Number•SSN) can be provided.

- 1) Photograph of BO is mandatory
- 2) Either Mother, Father name or Spouse's name is mandatory. In case PAN is not available Father's name is mandatory.
- 3) Senior Managing Official would include key managers, and c-suite individuals (like CEO, CFO, COO etc)
- 4) In case Original Seen & Verified (OSV) certification is not possible for BOs who are Foreign Nationals/NRIs/PIOs, the document needs to be certified by any one of the following authorities:
a. Authorized officials of overseas branches of Scheduled Commercial Banks registered in India b. Branches of overseas banks with whom Indian banks have relationships c. Notary Public abroad
d. Court Magistrate e. Judge f. Indian Embassy/Consulate General in the country where the non-resident customer resides

I/We agree that I/We will notify IDFC FIRST Bank without delay of any changes to the Beneficial Owner/Controlling natural person, as declared in the table above.

1. Signature of Authorised Signatories:

Name

Designation

Date

D

D

M

M

Y

Y

Y

Y

2. Signature of Authorised Signatories:

Name

Designation

Date

D

D

M

M

Y

Y

Y

Y

ANNEXURE 3* - PHOTOGRAPHS OF BENEFICIAL OWNERS

RECENT
Colour
Photograph

Name _____

RECENT
Colour
Photograph

Name _____

RECENT
Colour
Photograph

Name _____

RECENT
Colour
Photograph

Name _____

RECENT
Colour
Photograph

Name _____

RECENT
Colour
Photograph

Name _____

ANNEXURE 4: DECLARATION FOR PARTNERSHIP FIRM

We, the undersigned hereby declare that we are the partners or members of the Firm carrying on business in the name and style of _____ (registered under the Indian Partnership Act (IPA)1932)* (the Firm). We hereby, unconditionally & irrevocably, undertake that the Firm, its Partners and/or its successors shall be jointly / severally liable and responsible from time to time and at all times hereinafter to the Bank in connection with our existing and future transactions and dealings with the Bank, in any manner whatsoever.

Our undertaking and liability as aforesaid shall continue notwithstanding: a) any change in the constitution or membership of the Firm and/or its successors and assignees by any cause whatsoever or dissolutions thereof; or b) that we or any of us cease to be partners or members or to have any interest in the Firm, in any of which events the liability and responsibility (in addition to that provided by law) of us or such of us respectively, as the case may be, to have any interest in the Firm and/or its successors as assignees as aforesaid shall extend to or continue in respect of all transactions and dealings existing prior to or at the date of receipt by you of written notice from us of such events respectively.

Signature
stamp

Name of Signatory 2 _____

Signature
stamp

ANNEXURE 5: DECLARATION FOR SOLE PROPRIETORSHIP FIRMS

I, _____, hereby declare that I am the sole proprietor of the firm under the name of _____ and am solely responsible for the liabilities thereof. I shall advise you in writing of any change that takes place in the constitution of the firm and I will be liable to you for any obligation which may be standing in the firm's name in your books on the date of receipt of such notice and until all such obligations shall have been liquidated.

Name _____

*Father's Name

Maiden Name (if applicable)

Mother's Name

Marital Status ☐ Married ☐ Unmarried ☐ Other

Residential Status ☐ Resident Individual ☐ Non Resident Indian ☐ Foreign National ☐ Person of Indian Origin

Date of Birth *Country of Birth

*Country of Tax Residency

Separate annexure to be executed in case of dual country of tax residence

TIN Issuing Country

If Country of Birth or Tax Residency is other than India, please provide Tax Identification Number

Signature

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

1. I/We wish to avail the banking facilities/products from IDFC FIRST Bank Limited ("IDFC FIRST Bank"), and have read, understood and agree to the Terms and Conditions displayed on the website of IDFC FIRST Bank i.e. www.idfcfirstbank.com, which may be amended by IDFC FIRST Bank from time to time and hosted and notified on the website of IDFC FIRST Bank. 2. I/We have read, understood and agree to the charges/costs, mentioned in the extant Schedule of Charges. This Schedule of Charges is also displayed on www.idfcfirstbank.com. 3. 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 FEMA regulations, 2000 governing EEFC Accounts, 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. 4. I/We authorize IDFC FIRST Bank to conduct my/our credit history verification with CIBIL 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/us to IDFC FIRST Bank. I/We declare that I/we have not availed any credit facility from any bank or have obtained NOC from such bank(s) for opening of a current account with IDFC FIRST Bank. 5. I/We agree to furnish and intimate to IDFC FIRST Bank any other particulars that we are called upon to provide on account of any change in law/statutory requirements either in India or abroad. I/We authorize IDFC FIRST Bank to exchange, share or part with all the information provided herein with financial institutions/agencies/statutory bodies/other such persons, 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. 6. 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/our 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/us or suppression of any material fact will render my/our account liable for closure and the bank shall have the right to initiate any action, under law or otherwise. 7. 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. 8. I/We agree and understand that IDFC FIRST Bank reserves the right to reject my/our account opening application form/request without assigning any reason hereof and without being liable to me/us in any manner whatsoever. 9. I/We confirm that all the details captured in the application form using the tablet are provided by me and correct and the same have been captured in my/our presence as communicated by me/us. 10. I/We confirm that we have provided / filled the information required for account opening, in the tablet, under the guidance/assistance of Bank staff me/us via email on _____ <name & employee code of sourcing staff> 11. I/We understand that these details will be sent to _____ <email ID> and I/we will check for correctness and revert to the Bank within 48 hrs for any modification required. No revert from my/our end will be deemed as acceptance of the details captured. 12. I/We understand that filling in the application form on tablet is for convenience and agree to hold the Bank harmless in case of any system related issues/failures arising due to the usage of the tablet for account opening. 13. All fees/charges to be paid shall be exclusive of goods and services tax (GST), as may be applicable. 14. IDFC FIRST Bank will provide you Services Accounting Code (SAC) and this will quoted in all our invoices/credit/debit notes. 15. IDFC FIRST Bank will determine if you are related party based on documents available or submitted for this purpose. 16. IDFC FIRST Bank will determine the location of service provider which shall be binding on the customer. 17. For smooth realisation of input tax credit, I/We shall validate the invoices uploaded in the GSTN portal by the Bank between the 10th - 15th day of the month succeeding the relevant period. In case of any discrepancies, I/We shall bring it to the notice immediately. 18. IDFC FIRST Bank will issue invoices on a monthly basis. The contents of all the invoices, debit notes, credit notes, etc. will be as per rules and guidelines in the GST law. 19. I am fully aware that the bank sends SMS alerts on all account/card related transactions promptly on the mobile number 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. 20. I understand, acknowledge and authorize that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government/RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements (IGA) in respect of Foreign Accounts T. Compliance Act (FATCA) and Common Reporting Standards (CRS) and / or any other similar arrangements. 21. I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in the account opening form and signed by me as well as in the documentary evidence provided by me or if any certifies tion become incorrect. 22. I also agree that our failure to disclose any material fact known to me now or in future, may invalidate my application and IDFC FIRST Bank would be within its right to put restrictions in the operations of my account or take appropriate action permissible under the Indian regulations for the purpose or take any other action as may deemed appropriate if the deficiency is not updated/rectified by me within the stipulated period. 23. I agree to furnish any particulars/information that is called upon me by IDFC FIRST Bank on account of any change in law either in India or abroad in the subject matter herein. 24. In the event there is any tax demand (including interest(if any)) raised due to nondisclosure/inaccurate disclosure of information/documents on my/our part, I undertake to pay the demand forthwith and provide the bank with all information/documentws that may be necessary for any proceeding before GOI/RBI/Income Tax Authorities. 25. The Customer agrees that no amount in cash shall be paid to any sales representative of the Bank at the time of opening an Account. The Customer agrees to deposit cash only at the Bank's teller counters at the branch premises or by any other mode allowed by the Bank. In case the account opening cheque is dishonoured, the Bank reserves the right to deny opening/ activation of the account or reserves the right of closure of the Account. 26. By opening an account; I/We are willing to enrol and avail Doorstep banking non-cash services (i.e. pick-up and/or delivery of cheque and/or documents) - details of which are available on www.idfcfirstbank.com 27. IDFC FIRST Bank protects the interest of its customers against any unauthorised electronic banking transaction. You may visit Bank's website www.idfcfirstbank.com for more details in respect of the same.

Would you like IDFC FIRST Bank to contact you and tell you about new products, features and offers? ☐ Yes ☐ No

I/We confirm that I/We have provided below mentioned documents for the purpose of account opening:

(Please mention all documents that you are submitting to the Bank)

- ☐ Entity Proof: _____
- ☐ Address Proof: _____
- ☐ Constitutional document: _____
- ☐ ID proof of signatories: _____
- ☐ Address proof of signatories: _____

RECENT Colour Photograph	Name of Signatory 1 _____	RECENT Colour Photograph	Name of Signatory 2 _____
	Signature stamp		Signature stamp

BANK USE SECTION

Program Code

Group ID

RM Code