## JOINT ACCOUNT OPENING FORM FOR RESIDENT INDIANS



| - Diagon complete this form in block ink and in CADITAL LETTERS or   | Application Date D P M M Y Y Y Y   |
|--|--|
| <ul> <li>Please complete this form in black ink and in CAPITAL LETTERS or  where</li> <li>Initial payment in cash is accepted only at IDFC FIRST Bank branches</li> <li>Account</li> </ul> | applicable   |
| Customer ID (If applicable) CKYC Nun CKYC Nun TELL US ABOUT YO   |  |
| Applicant Name   |  |
| TITLE         FIRST NAME         MIDDLE NAME   |  |
| Date of Birth Gender   | Male Female Third Gender   |
|  | (Applicable  |
| Applicant Maiden Name for other th   | an India)  |
| TITLE FIRST NAME MIDDLE NAME   | LAST NAME  |
| Place of Birth Country of Birth  |  |
| For Tax Residents of countries <u>in addition</u> to India, please complete below:   |  |
| Country of Tax Residence Foreign Tax Identification  | Number TIN Issuing Country   |
| Separate annexure to be executed in case of dual country of tax residence  |  |
| Overseas Jurisdiction Address Type Address is same as Officially   | /alid Document Address is same as communication  |
|  | odate Overseas Jurisdiction Address separately)  |
| Father's Name (Mandatory, if customer does not have PAN)     Sp  | ouse Name  |
| TITLE FIRST NAME MIDDLE NAME<br>Mother's Name (As per OVD, no proof required)  |  |
|  |  |
| TITLE FIRST NAME MIDDLE NAME PLEASE HELP US WITH DETAILS OF ONE (  |  |
| Aadhaar No.  | Form 60  |
|  | ve a PAN it is mandatory to provide details to the bank at the time of opening an<br>you do not have a PAN, please complete a Form 60. |
| Driving License Expiry   | Date DD MM YYYY  |
| Passport Expiry  |  |
| PIO/OCI Card Expiry  |  |
| NREGA National Population Register   |  |
| PLEASE COMPLETE YOUR ADDRESS AS MENTIONED IN   | YOUR OFFICIALLY VALID DOCUMENT (OVD)   |
| Aadhaar Passport Driving License   | Voter ID NREGA NPR   |
| Line 1   |  |
| Line 2 Landmark  |  |
| (If any)   |  |
| City State CURRENT ADDF  | Pin Code   |
| Same as Above or Deemed OVD* (select any 1 document)   | This is my Residence Place of Work   |
| Utility Bill Property or Municipal Tax Receipt Letter of Allotment/Let   | ave and License Agreement# 🔲 Letter issued by Foreign Embassy  |
| Deemed OVD Number  |  |
| Line 1   |  |
| Line 2 Line 2 Landmark   |  |
| City City State  | Pin Code         I   |
| I/We shall submit Officially Valid Document with the updated current address within a period o   | f three months of submitting the documents above.  |
| HOW WOULD YOU LIKE US  |  |
| Mobile No. (91) Landline I   | 40. (9I)   |
|  | (STD Code) (Number)  |
| E-mail ID  |  |

1

A4 Size

CB/06/12-2019



| TELL US WHAT YOU DO FOR A LIVING  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| 1) Occupation (Select Anyone)   |  |  |  |  |  |  |
| 1a) Salaried (Select Anyone)     Public     Private     Government  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| 1b) Self Employed       Doctor       CA       Architect       Lawyer       Consultant       Entertainment         Professional       Alternate Medical Practitioner       Beautician       Others   |  |  |  |  |  |  |
| 1c) Self Employed Business       Sole Proprietorship       Partnership/Company       No. of years in business       < = 5 yrs       > 5 yrs   |  |  |  |  |  |  |
| 1d) Any other Occupation Homemaker Retired Farmer Politician Student Minor  |  |  |  |  |  |  |
| 2) Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth   |  |  |  |  |  |  |
| 3) Gross Annual Income (INR)  |  |  |  |  |  |  |
| Please submit the GST annexure if you are registered or exempt under GST  |  |  |  |  |  |  |
| SECOND/JOINT APPLICANT DETAILS  |  |  |  |  |  |  |
| If you are already a customer of IDFC FIRST Bank, simply fill in your Customer ID here and move on to the next page   |  |  |  |  |  |  |
| CKYC Number (If applicable)   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| TELL US ABOUT YOURSELF  |  |  |  |  |  |  |
| Applicant Name  |  |  |  |  |  |  |
| TITLE FIRST NAME MIDDLE NAME LAST NAME  |  |  |  |  |  |  |
| Date of Birth     D     M     Y     Y     Y       D     D     M     M     Y     Y     Y         Gender     Male     Female     Third Gender   |  |  |  |  |  |  |
| Marital Status       Married       Unmarried       Others       Citizenship (Applicable         for other than India)   |  |  |  |  |  |  |
| Relationship with Primary Holder  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| TITLE FIRST NAME MIDDLE NAME LAST NAME  |  |  |  |  |  |  |
| Place of Birth Country of Birth   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| For Tax Residents of countries <u>in addition</u> to India, please complete below:<br>Country of Tax Residence Foreign Tax Identification Number TIN Issuing Country  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| Separate annexure to be executed in case of dual country of tax residence   |  |  |  |  |  |  |
| Overseas Jurisdiction Address Type Address is same as Officially Valid Document Address is same as communication  |  |  |  |  |  |  |
| Address is different (Please update Overseas Jurisdiction Address separately)   |  |  |  |  |  |  |
| Father's Name (Mandatory, if customer does not have PAN)       Spouse Name  |  |  |  |  |  |  |
| TITLE     FIRST NAME     MIDDLE NAME     LAST NAME  |  |  |  |  |  |  |
| Mother's Name (As per OVD, no proof required)   |  |  |  |  |  |  |
| TITLE FIRST NAME MIDDLE NAME LAST NAME  |  |  |  |  |  |  |
| PLEASE HELP US WITH DETAILS OF ONE OR MORE DOCUMENTS BELOW  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| *If you have a 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.   |  |  |  |  |  |  |
| Driving License   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| Passport Expiry Date D M M Y Y Y  |  |  |  |  |  |  |
| PIO/OCI Card     P |  |  |  |  |  |  |
| NREGA     National Population Register  |  |  |  |  |  |  |



| PLEA  | SE C <u>OMPLET</u>  | E YOU <u>R ADDRES</u>      | S AS MENTIONED IN Y  | OUR OFFICIALLY VA            | LID DOCUMENT (OVD)                             |
|---|---------------------|----------------------------|--|------------------------------|--|
|   | Aadhaar             | Passport                   | Driving License  | Voter ID                     | NREGA NPR                                      |
| ine 1   |                     |                            |  |                              |  |
| ine 2   |                     |                            |  |                              |  |
|   |                     |                            | Landmark (If any)  |                              |  |
| ity   |                     |                            | State  |                              | Pin Code                                       |
|   |                     |                            |  |                              |  |
|   |                     |                            |  | ESS                          |  |
| Same as Above   | e or De             | emed OVD* (select ar       | y 1 document)  | This is m                    | y Residence Place of We                        |
| Utility Bill  | Property or Mur     | icipal Tax Receipt         | Letter of Allotment/Lea  | ve and License Agreeme       | nt <sup>#</sup> Letter issued by Foreign Embas |
| eemed OVD Numb  | er                  |                            |  |                              |  |
| ine 1   |                     |                            |  |                              |  |
| ine 2   |                     |                            |  |                              |  |
|   |                     |                            | Landmark<br>(If any)   |                              |  |
| City  |                     |                            | State  |                              | Pin Code                                       |
| We shall submit Offici<br>Details of Deemed OV          | -                   |                            | rent address within a period of                                  | three months of submitting t | he documents above.                            |
|   |                     |                            | lies, public sector undertakings,                                | scheduled commercial banks   | s, financial institutions and listed companies |
|   |                     | HOW                        | VOULD YOU LIKE US T  | O REAC <u>H YOU?</u>         |  |
| 1obile No. (91)   |                     |                            | Landline N   | o. (91)                      |  |
|   |                     |                            |  | (STD Code)                   | (Number)                                       |
| -mail ID  |                     |                            |  |                              |  |
| I in CAPITAL LETTER                                     | S. All communicati  | on for this account will I | pe sent to the Mobile / Email of                                 | the first holder.            |  |
|   |                     | TEL                        | L US WHAT YOU DO F   | OR A LIVING                  |  |
| Occupation (Se  | elect Anyone)       |                            |  |                              |  |
| a) Salaried (Selec                                      | ct Anyone)          | Public                     | Private Govern   | nent                         |  |
| Corporate Nam   | ne                  |                            |  |                              |  |
| <ul> <li>Self Employed</li> <li>Professional</li> </ul> |                     | Doctor C.                  |  |                              | sultant Entertainment                          |
|   |                     | Alternate Medical          |  |                              |  |
| c) Self Employed  |                     | Sole Proprietorshi         |  | . , <b>,</b>                 |  |
| d) Any other Occ  |                     | Homemaker                  |  | armer Politician             |  |
| ) Source of Inco  |                     | Salary Busir               | ness 🔄 Professional Fe   | es Investments               | Agriculture Family Wealt                       |
| ) Gross Annual In<br>lease submit the                   | •••                 | if you are regist          | ered or exempt under 0   | ст                           |  |
| lease submit the  | COT dimexure        |                            | -  |                              |  |
|   |                     |                            | OF OUR PRODUCTS W  |                              |  |
| Savings   | Minor               | Senior                     | BSBDA  | Salary Curre                 | ent  |
| I/We hereby dec   | lare that we are no | ot holding any BSBD ac     | count in any other bank.   |                              |  |
|   |                     | _                          | MODE OF OPERA  | HON                          |  |
| 1ode: Singl   | У                   | Either or S                | Survivor Minor Ui  | nder Guardian                |  |
| Form  | ner or Survivor     | Jointly                    | Debit Card or Internet Banking<br>accounts operated 'Jointly' or |                              | able for                                       |
|   |                     |                            | accounts operated Jointly of                                     | as Former or Survivor        |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            |  |                              |  |
|   |                     |                            | 3  |                              |  |



| 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:  |
| One time funding of INR from above account   |
| Monthly debit of INR from above account for months* from the of this/next month  |
| (*Minimum 24 months)<br>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<br>me in his/her account   |
| DEBIT CARD   |
| For Existing Customers   |
| Your existing Debit Card will be linked to the new account being opened.<br>Existing Debit Card number(s) (If any)   |
|  |
| Second/Joint Applicant (Your existing account will continue to be the Primary account on your Debit Card.)   |
| For New Customers Only First Applicant Second Applicant  |
| Do you need an Debit Card Yes No Yes No  |
| You may fill in how you would like your name to appear on your debit card (if different from the name on your account)   |
| First/Primary Applicant  |
| Second/Joint Applicant   |
| To enable international usage on your debit card, please use Limit Management under Debit Card section on Internet/Mobile Banking.   |
|  |
|  |
| I/We wish to opt for Sweep Out facility from the Senior/Minor Account being opened   |
| <ul> <li>Sweep Out is a facility which provides liquidity of a Savings Account coupled with higher interest earnings of a Fixed Deposit (FD)</li> <li>Through Sweep Out facility, savings balance from the account is transferred automatically into a Fixed Deposit, at a specific threshold limit basis product offering</li> <li>Fixed deposits are formed for default tenure of 1 year 1 day only, at applicable interest rates</li> <li>Sweep In facility is applied by default for all EDs back through Sweep Out</li> </ul> |

Sweep In facility is enabled by default for all FDs book through Sweep Out
The frequency of sweep out for deposit booking will be weekly subject to availability of balance and will start next day from when the sweep out is set



| WOULD YOU LIKE TO CHOOSE A NOMI  | IEE FOR THE ACCOUNT?  |
|--|---|
| (Nomination under Section 45 ZA of the Banking Regulations Act, 1949 and Rule 2(1) of the Banking The Nominee or Guardian (if applicable) cannot be a holder on the account. | Companies (Nomination) Rule, 1985 in respect to Bank Accounts.) |
| Yes, I want to nominate the following person to whom in the ever   | t of my/our/minor's death the amount of deposit in the          |
| <ul> <li>account may be returned by IDFC FIRST Bank Ltd</li> <li>No, I do not wish to nominate anyone on my behalf at this moment. I understa</li> </ul>                     | and the advantages of nomination and the consequences of not    |
| nominating anyone to my account  | des dest fille data est   |
| Customer ID (In case an existing account ho  | aer, don't fill adaress)  |
| Nominee Name   |   |
| TITLE FIRST NAME MIDDLE NAME   |   |
| Nominee Address Same as primary account holder communication   | address OR Update address as below                              |
|  |   |
|  |   |
| Relationship with Depositor  | Date of Birth   |
| If the nominee is a minor**, please complete this section. As the nominee  | D D M M Y Y Y Y   |
| 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<br>of the nominee. (** Where deposit is made in the name of a minor the nomination must be sign    |   |
| Please mention the nominee name in the statement/advice/passboo  | yk (  |
| I/We do hereby declare what is stated above is true to the best of my kno  | owledge and belief.   |
| Date   |   |
| FIRST/PRIMARY APPLICANT SIGNATURE  | SECOND/JOINT APPLICANT SIGNATURE                                |
|  |   |
|  |   |
|  |   |
|  |   |
| WITNESS 1  | WITNESS 2   |
|  |   |
|  |   |
| (Required only if applicants use thumb impressions)  | (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 /We have read, understood and agree to the Terms and Conditions displayed on the website of IDFC FIRST Bank in its capacity as an Intermediary and /We have read, understood and agree to the Terms and Conditions FIRST Bank from time to time and hosted and notified on the website of IDFC FIRST Bank.
- 2
- for the nave ready understood and agree to the gescosts, interfactore in the extant schedule of Charges pertains to the bolicity facilities and you the the foreign and under the feasible to avail. This Schedule of Charges is also displayed on www.idfcfirstbank.com . 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 3
- Governing Electrocount (a) the foreign exchange Management Act, 1999 and coreign Account (a) 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 authorize IDFC FIRST Bank to conduct my 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 to IDFC FIRST Bank. I declare that I 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. I 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 banks nternal policy
- Internal policy. J/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 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 which 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. 5
- 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 6
- 8
- 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. 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/our 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/us in any manner whatsoever. I/We authorise IDFC FIRST Bank to submit applications / other relevant documents, debit my/our bank account, 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/our Attorney from time to products and further agree to absolutely abide by all the Terms and Conditions in respect thereof. 9
- I, being the Sole Proprietor of the Sole Proprietorship Concern (as mentioned above) hereby agree and consent to avail the "Truly One Account" of IDEC FIRST Bank and further agree to absolutely abide by all the Terms and Conditions in respect thereof, as may be notified by IDEC FIRST Bank from time to time. 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 IDEC FIRST Bank under the operation rule of "Either or Survivor". 10 11.

- shall be paid by IDFC FIRST Bank under the operation rule of "Either or Survivor". I hereby consent to receiving information from Central KYC Registry through SMS/Email on the registered number/email address shared with IDFC FIRST Bank. 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. All fees/charges to be paid shall be exclusive of goods and services tax (GST), as may be applicable. IDFC FIRST Bank will provide me/us Services Accounting Code (SAC) and this will queted in all our invoices/redit/debit notes. IDFC FIRST Bank will determine if I/We are related party based on documents available or submitted for this purpose. IDFC FIRST Bank will determine the location of services. 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. IDFC FIRST Bank will issue invoices on a monthly basis. The contents of all the invoices, debit notes, etc. will be as per rules and guidelines in the GST law. IDFC FIRST Bank will fan supported 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. 14 15.
- details in respect of the same. 16
- details in respect of the same. 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 Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and / or any other similar arrangements. 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 certification become incorrect. 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 rectricitions in the operations of my account erative appropriate action perpendicular the Indian regulations for the aurons or take any changes that any application and IDFC FIRST Bank would be within its right to put 17
- 18.
- appropriate if the deficiency is not updated/rectified by me within the stipulated period. 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 19
- herein. 20.
- 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/documents that may be necessary for any proceeding before GOI/RBI/Income Tax Authorities.

| Would you like IDFC FIRST Bank or its representatives to contact you and tell you about various | Yes   | No |
|---|-------|----|
| products (including insurance), services and offers?  | <br>I |    |

| FIRST/PRIMARY APPLICA   | NT SIGNATURE  | SECOND/JOINT APPLICANT SIGNATURE   |
|---|---|--|
|   |   |  |
| NAME  |   | NAME   |
| Date D D M M Y Y Y Y  |   | Date D M M Y Y Y Y   |
| Place   |   | Place  |
| WITNESS 1<br>(Required only if applicants<br>use thumb impressions) | Please paste a<br>RECENT Colour<br>Photograph. Please sign<br>across the photograph | WITNESS 2<br>(Required only if applicants<br>use thumb impressions)<br>Please paste a<br>RECENT Colour<br>Photograph. Please sign<br>across the photograph |

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| _  |  | DANIZUG   |              | 1.   | _  |   |  |
|--|--|---|--------------|--|--|---|--|
|  | · · ·  | BANK USE  | E SECTIO     | N:   |  |   |  |
|  | Indatory   |   |              |  |  |   |  |
|  | ount   | Cash (Only at the Branch)   | Cashier's    | Signature  | Employe  | ee ID   |  |
| Mo   | de of IP Cheque  | NEFT RTGS   | Cheque [     |  |  |   |  |
| Che  | eque / NEFT / RTGS Details _   |   |              |  |  |   |  |
| Bar  | nk Name  | E   | Branch Na    | me   |  |   |  |
| 02.  | Other Details  |   |              |  |  |   |  |
|  |  | Account Branch N  | ame          | *P   | roduct Code  |   |  |
|  |  | *Sourcing Branch (  |              |  |  |   |  |
|  | Lead Generator *Lead Converter *Lead Converter   |   |              |  |  |   |  |
|  | Profit Center Compaign Code Corporate Code   |   |              |  |  |   |  |
| Customer Employee ID (applicable for salary accounts)  |  |   |              |  |  |   |  |
| Staff Family     Staff Customer ID     Spouse     Parent     Child   |  |   |              |  |  |   |  |
|  |  |   |              |  |  |   |  |
| 03. Applicable for Insta Accounts  |  |   |              |  |  |   |  |
| Cus  | tomer ID   | Account Nu  | imber        |  |  |   |  |
| 04.  | Applicable for RM Program  |   |              | · · · · · · · · · · · · · · · · · · ·  |  |   |  |
| Gro  | up ID  | Program Code  |              | RM Cod   | e  |   |  |
| 05.  | *Banker Certification  |   |              |  |  |   |  |
|  | I have met the Customer at:  | Residence or F  | Place of W   | /ork Other   |  |   |  |
| l ha   | ve seen and verified the origi   | inal KYC documents. Copy/photo  | taken foi    | r record. The custome  | r has signed i   | in my presence                                    |  |
|  |  |   |              |  |  |   |  |
|  |  |   | Certificatio | n Dato   | Signatur   | e of Employee                                     |  |
| Nar  | ne   |   |              |  |  |   |  |
| Em   | ployee ID  |   |              | M Y Y Y Y  |  |   |  |
|  | RbiCrCatg  | RbicrCode   |              | RbiDrCatg  | R  | biDrCode  |  |
| 18   |  |   | 350          | Non Infrastructure   | 383  | Other Retail                                      |  |
| Dofi   | nition of related person under G   |   | 11           |  |  |   |  |
|  | persons shall be deemed to be  |   |              |  |  |   |  |
|  | .,   | or directors of one another's business  | ses;         |  |  |   |  |
| <ul> <li>(ii) such persons are legally recognised partners in business;</li> <li>(iii) such persons are employer and employee;</li> </ul>  |  |   |              |  |  |   |  |
| (iv) any person directly or indirectly owns, controls or holds twenty-five per cent or more of the outstanding voting stock or shares of both  |  |   |              |  |  |   |  |
|  | <ul><li>of them;</li><li>(v) one of them directly or in</li></ul>  | directly controls the other;  |              |  |  |   |  |
|  |  | or indirectly controlled by a third per   | son;         |  |  |   |  |
| (h)  | (vii) together they directly or indirectly control a third person; or they are members of the same family;   |   |              |  |  |   |  |
| <ul><li>(b) the term "person" also includes legal persons;</li><li>(c) persons who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever</li></ul> |  |   |              |  |  |   |  |
|  | the term "person" also includes persons who are associated in t  | legal persons;<br>:he business of one another in that on  | -            | -  |  | essionaire, howsoever                             |  |
| (c)  | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be  | legal persons;<br>the business of one another in that on<br>deemed to be related.   | -            | -  |  | essionaire, howsoever                             |  |
| (c)<br>Exp<br>Exp  | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be<br>lanation I The term "person" als  | legal persons;<br>the business of one another in that on<br>deemed to be related.<br>so includes legal persons.<br>ociated in the business of one anothe  | e is the sol | e agent or sole distribute   | or or sole conce                                       |   |  |
| (c)<br>Exp<br>Exp<br>how   | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be<br>lanation I The term "person" als<br>lanation II Persons who are ass   | legal persons;<br>the business of one another in that on<br>deemed to be related.<br>so includes legal persons.<br>ociated in the business of one anothe<br>hall be deemed to be related.   | e is the sol | e agent or sole distribute   | or or sole conce                                       |   |  |
| (c)<br>Exp<br>how<br>Defi<br>(a)   | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be<br>lanation I The term "person" als<br>lanation II Persons who are ass<br>soever described, of the other, s<br><b>nition of Deemed OVD is as und</b><br>Utility bill which is not more tha                                     | legal persons;<br>the business of one another in that on<br>deemed to be related.<br>so includes legal persons.<br>ociated in the business of one anothe<br>hall be deemed to be related.<br><b>Ier:</b><br>In two months old of any service prov   | e is the sol | e agent or sole distributo<br>e is the sole agent or sol                             | or or sole conce<br>e distributor or                   | sole concessionaire,                              |  |
| (c)<br>Exp<br>Exp<br>how<br><b>Defi</b><br>(a)<br>(b)  | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be<br>lanation I The term "person" als<br>lanation II Persons who are ass<br>soever described, of the other, s<br><b>nition of Deemed OVD is as und</b><br>Utility bill which is not more tha<br>Property or Municipal tax receip | legal persons;<br>the business of one another in that on<br>deemed to be related.<br>so includes legal persons.<br>ociated in the business of one anothe<br>hall be deemed to be related.<br><b>Her:</b><br>In two months old of any service provot | e is the sol | e agent or sole distributo<br>e is the sole agent or so<br>icity, telephone, post-pa | or or sole conce<br>e distributor or<br>d mobile phone | sole concessionaire,<br>e, piped gas, water bill) |  |
| (c)<br>Exp<br>Exp<br>how<br><b>Defi</b><br>(a)<br>(b)  | the term "person" also includes<br>persons who are associated in t<br>described, of the other, shall be<br>lanation I The term "person" als<br>lanation II Persons who are ass<br>soever described, of the other, s<br><b>nition of Deemed OVD is as und</b><br>Utility bill which is not more tha<br>Property or Municipal tax receip | legal persons;<br>the business of one another in that on<br>deemed to be related.<br>so includes legal persons.<br>ociated in the business of one anothe<br>hall be deemed to be related.<br><b>Ier:</b><br>In two months old of any service prov   | e is the sol | e agent or sole distributo<br>e is the sole agent or so<br>icity, telephone, post-pa | or or sole conce<br>e distributor or<br>d mobile phone | sole concessionaire,<br>e, piped gas, water bill) |  |

(e) OVD presented by a foreign national does not contain the details of address, in such case the documents issued by the Government departments of foreign jurisdictions and letter issued by the Foreign Embassy or Mission in India shall be accepted as proof of address