JOINT ACCOUNT OPENING FORM





• Please complete this form in Black Ink and in CAPITAL LETTERS or where applicable Application Date D D M M Y Y Y Y Y
• Initial Payment in cash is accepted only at IDFC Bank branches • Account opening cheque should be in favour of the account holder only
Customer ID (If applicable) CKYC Number (If applicable)
TELL US ABOUT YOURSELF
Applicant Name (Please complete as per your Identity Proof)
TITLE FIRST NAME MIDDLE NAME LAST NAME
Date of Birth
Marital Status Married Unmarried Others Citizenship (Applicable for other than India)
Applicant Maiden Name (Not applicable for unmarried female customers)
TITLE FIRST NAME MIDDLE NAME LAST NAME
Place of Birth Country of Birth
For Tax Residents of countries in addition 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 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)
Hother'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
Aadhaar No. PAN* Form 60
*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.
Voter ID
Driving License Expiry Date Expiry Date
Driving License Expiry Date DD MM YYYYY
Driving License Expiry Date Ex
Driving License Expiry Date Figure Expiry Date Expiry Date Expiry Date Figure F
Driving License Expiry Date Expiry Date Passport Expiry Date
Driving License Expiry Date Ex
Driving License Expiry Date Expiry Date Expiry Date Passport Expiry Date Expiry Date National Population Register
Driving License Expiry Date Expiry Date Passport Expiry Date Expiry Date Pholocol Card Expiry Date Pholocol Card Expiry Date Pholocol Card Population Register Pholocol Card Pholocol Pholocol Card Pholocol P
Driving License Expiry Date Ex
Passport Expiry Date Date Expiry Date Expiry Date Date Expiry Date Date Date Date Date Date Date Date
Driving License Expiry Date Ex
Passport Expiry Date Expiry Date Plo/OCI Card Expiry Date Down Mark Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Passport Expiry Date Expiry Date Plo/OCI Card Expiry Date Expiry Date Expiry Date Expiry Date Plo/OCI Card Expiry Date Expiry
Driving License Passport Expiry Date Expi
Passport Expiry Date DD MM MY Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Passport Expiry Date Down Moreover Date Date Down Moreover Date Date Down Moreover Date Date Down Moreover Date Date Date Date Date Date Date Date
Passport Expiry Date Date Date Date Date Date Date Date
Passport Expiry Date Date Date Date Date Date Date Date
Driving License Passport Expiry Date Driving License Pessport Expiry Date Driving License Please Complete Your Address As Mentioned in Your Officially Valid Document Aadhaar Passport Driving License Voter ID Line 1 Line 2 Landmark (If any) Same as Above This is my Residence Place of Work Line 1 Line 2 Landmark (If any) City Same as Above This is my Residence Place of Work Line 1 Landmark Landmark (If any) City Landmark Landmark (If any) Landmark (If any) Landmark Landmark Landmark (If any) Landmark Landmark (If any) Landmark Landmark Landmark Landmark (If any) Landmark Landmark Landmark Landmark Landmark (If any) Landmark Landmark (If any) Landmark Landmark Landmark (If any) Landmark Landmark Landmark Landmark (If any) Landmark Landmark (If any) Landmark Landmark (If any) Landmark (If any) Landmark (If any) Landmark Landmark (If any) Landmark Landmark (If any) Landmark (If any) Landmark Landmark (If any) Landmark (If any) Landmark Landmark (If any) Landmark (If any) Landmark (If any) Landmark Landmark (If any) Landmark Landmark (If any) Landmark Landmark Landmark Landmark (If any) Landmark Landmark (If any) Landmark Landmark Landmark (If any) Landmark Landmark Landmark Landmark (If any) Landmark Landmark
Driving License

100 /11 201



TELL US WHAT YOU DO FOR A LIVING
Occupation Salaried Select Anyone 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 < 5 yrs > 5 yrs
Homemaker Retired Farmer Politician Student Minor
Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth
Gross Annual Income (INR)
GOODS AND SERVICE TAX (GST) STATUS
Are you registered under GST Yes (Please fill GST Annexure) No
Are you exempt from GST Yes (Please submit proof) No
If exempt Customer level exemption Account level exemption
Are you a related person to IDFC Bank under GST (Please refer to last page for definition of related person) Yes (If yes, please note that GST, as may be applicable, needs to be paid by the related person.)
SECOND/JOINT APPLICANT DETAILS
If you are already a customer of IDFC 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 (Please complete as per your Identity Proof)
TITLE FIRST NAME MIDDLE NAME LAST NAME
Date of Birth
Marital Status Married Unmarried Others Citizenship (Applicable
Relationship with Primary Holder
Applicant Maiden Name (Not applicable for unmarried female customers)
TITLE FIRST NAME MIDDLE NAME LAST NAME
Place of Birth Country of Birth
For Tax Residents of countries in addition 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 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
Aadhaar No. PAN* PAN* Form 60 *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.
Voter ID Family Data (Total Control Co
Driving License Expiry Date DD MM YYYYY
Passport Expiry Date DD MM YYYY
PIO/OCI Card Expiry Date DD MM YYYYY
NREGA National Population Register



PLEASE COMPLETE YOUR ADDRESS AS MENTIONED IN YOUR
Aadhaar Passport Driving License Voter ID
Line 1
Line 2
Landmark (If any)
City State Pin Code
ADDRESS FOR COMMUNICATION (No proof required)
Same as Above This is my Residence Place of Work
Line 1
Line 2
Landmark (If any)
City State Pin Code
HOW WOULD YOU LIKE US TO REACH YOU?
Mobile No. (91) Landline No. (91) (STD Code) (Number)
E-mail ID
Fill in CAPITAL LETTERS. All communication for this account will be sent to the Mobile / Email of the first holder.
TELL US WHAT YOU DO FOR A LIVING
Occupation Salaried Select Anyone 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 < 5 yrs > 5 yrs
Homemaker Retired Farmer Politician Student Minor
Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth
Gross Annual Income (INR)
WHICH OF OUR PRODUCTS WOULD YOU LIKE?
Savings Minor Senior BSBDA Salary Current
MODE OF OPERATION
Mode: Singly Either or Survivor Minor Under Guardian
Former or Survivor Jointly Debit Card or Internet Banking transactions will not be available for accounts operated 'Jointly' or as 'Former or Survivor'



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) Name & Signature of the 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
DEBIT CARD
For Existing Customers Your existing Debit Card will be linked to the new account being opened. Existing Debit Card number(s) (If any) First/Primary Applicant (Your existing account will continue to be the Primary Second/Joint Applicant) Second/Joint Applicant
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.
SWEEP OUT FACILITY
// I/We wish to opt for Sweep Out facility from the Senior/Minor Account being opened
 Sweep Out is a facility which provides liquidity of a Savings Account coupled with higher interest earnings of a Fixed Deposit (FD) Through Sweep Out facility, savings balance from the account is transferred automatically into a Fixed Deposit, at a specific threshold limit basis product offering Fixed deposits are formed for default tenure of 1 year 1 day only, at applicable interest rates 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 NOM	INEE FOR THE ACCOUNT?
(Nomination under Section 45 ZA of the Banking Regulations Act, 1949 and Rule 2(1) of the Bank 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 even account may be returned by IDFC Bank Ltd	ent of my/our/minor's death the amount of deposit in the
No, I do not wish to nominate anyone on my behalf at this moment. I under nominating anyone to my account	rstand the advantages of nomination and the consequences of not
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	on address OR Update address as below
If the nominee is a minor**, please complete this section. As the nomin	ee is a minor on this date, I/We appoint:
Relationship with Depositor	Date of Birth
Guardian Name	D D M M Y Y Y Y
TITLE FIRST NAME MIDDLE NAME	LAST NAME
Guardian Address	
to receive the amount of deposits in the account on behalf of the n	3
minority of the nominee. (** Where deposit is made in the name of a minor the nominat	
Please mention the nominee name in the statement/advice/passk	OOK
I/We do hereby declare what is stated above is true to the best of my	knowledge and belief.
Date Place	
D D M M Y Y Y Y	
FIRST/PRIMARY APPLICANT SIGNATURE	SECOND/JOINT APPLICANT SIGNATURE
WITNESS 1	WITNESS 2
WITH ESS.	77771255 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 Bank Limited ("IDFC Bank"), and other products/services including Mutual Funds and/or insurance products that are offered by IDFC 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 Bank i.e. www.idfcbank.com w.r.t. the said banking facilities and other products/services, which may be amended by IDFC Bank from time to time and hosted and notified on the website of IDFC 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

- 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.idfcbank.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 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 Bank to conduct my credit history verification with CIBIL or any other credit rating agency and acknowledge that IDFC 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 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 Bank. I also hereby authorize IDFC 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.
- internal policy.

 I/We agree to furnish and intimate to IDFC 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 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 Bank has agency/distribution/marketing/referral arrangement, as may be required by IDFC Bank. I/We shall not loll IDFC Bank or its agents/representatives liable for using/sharing such information.

 I/We hereby declare that the information provided herein as well as in the documentary evidence provided by me/us to IDFC 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.
- 8
- otherwise.

 If any of the information provided here is incorrect, I/We hereby agree to indemnify and keep indemnified IDFC Bank, affiliates and their successors or assignees. I/We agree and understand that IDFC 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 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 time for the services and/or the products I/we wished to avail. I 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, being the Sole Proprietor of the Sole Proprietorship Concern (as mentioned above) hereby agree and consent to avail the "Truly One Account" of IDFC Bank and further agree to absolutely abide by all the Terms and Conditions in respect thereof, as may be notified by IDFC 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 IDFC 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 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.
- 11.

- 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 Bank will provide me/us Services Accounting Code (SAC) and this will quoted in all our invoices/credit/debit notes. IDFC Bank will determine if I/We are related party based on documents available or submitted for this purpose. IDFC Bank will determine the location of service provided which shall be binding on me/us. I/We shall provide the Bank with the details of exemption or lower rate of tax, if any supported by relevant documents prior to availment 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 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.

	norised electronic banking transaction. You may visit Bank's website www.idfcbank.com for more		
Would you like IDFC Bank or its representatives to con- products (including insurance), services and offers?	tact you and tell you about various Yes No		
FIRST/PRIMARY APPLICANT SIGNATURE	SECOND/JOINT APPLICANT SIGNATURE		
NAME	NAME		
WHILE	. INAPIE		
Date D M M Y Y Y Y	Date D M M Y Y Y Y		
Place	Place		
Please paste a RECENT Colour Photograph. Please sign across the photograph	Please paste a RECENT Colour Photograph. Please sign across the photograph		

WITNESS 1 (Required only if applicants use thumb impressions)

WITNESS 2 (Required only if applicants use thumb impressions)



BANK USE SECTION:							
*Mandatory							
Payment Details							
Amount C	ash (Only at the Branch)	Cashier's Signature	Employee ID				
Mode of IP Cheque NEFT RTGS Cheque Date Do M M Y Y Y Y							
Cheque / NEFT / RTGS Details							
Bank Name	B	ranch Name					
Other Details							
*Account Branch Code	Account Branch Na	ame *	Product Code				
Reimbursement Product Code							
*Lead Generator							
*Profit Center							
Customer Employee ID (applicable for salary			corporate code				
Staff Family Staff Customer ID		Sp.	ouse Parent	Child			
Applicable for Insta Accounts Customer ID							
I have seen and verified the Original KYC documents. Copy/Photo taken for record							
The customer has Signed in my presence							
The customer has signed in my present		ertification Date	Signature of Employe	ee			
Name		The control of the co					
Employee ID							
RbiCrCatg Rb	oicrCode	RbiDrCatg	RbiDrCode				
180 Household, MFI, TASC 189 R	esident Individuals	350 Non Infrastructure	e 383 Other	Retail			
Definition of related person under GST is as under: (a) persons shall be deemed to be "related persons" if— (i) such persons are officers or directors of one another's businesses;							

- (ii) such persons are legally recognised partners in business;
- (iii) such persons are employer and employee;
- (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 of them;
- (v) one of them directly or indirectly controls the other;
- (vi) both of them are directly or indirectly controlled by a third person;
- (vii) together they directly or indirectly control a third person; or they are members of the same family;
- (b) the term "person" also includes legal persons;
- (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 described, of the other, shall be deemed to be related.

Explanation I. - The term "person" also includes legal persons.

Explanation II. - Persons who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever described, of the other, shall be deemed to be related.