

HOLDER ADDITION FORM

Application Date
• Please complete this form in Black Ink and in CAPITAL LETTERS or 🗸 where applicable
• Initial Payment in cash is accepted only at IDFC FIRST Bank branches • Account opening cheque should be in favour of the account holder only
EXISTING CUSTOMER DETAILS Account Number
Customer Name
Please Add 1 holder to my account 2 holders to my account
MODE OF OPERATION
Mode: Either or Survivor Anyone or Survivor
Former or Survivor Jointly Debit Card or Internet Banking transactions will not be available for accounts operated 'Jointly' or as 'Former or Survivor'
JOINT ACCOUNT HOLDER ONE
Are you an Existing customer? Yes I am, My Customer ID is and my
CKYC Number (If applicable)
Debit Card Number is
The above Debit Card will be linked to this account to which you are being added as a holder. Your existing account will continue to be the Primary Account on your Debit Card
No, I am not yet a customer. I will complete the sections below
TELL US ABOUT YOURSELF
Applicant Name (Please complete as per your Identity Proof)
TITLE FIRST NAME MIDDLE NAME LAST NAME
Date of Birth Gender Male Female Third Gender
D D M M Y Y Y Y Marriad Chatra Marriad Uppravised Others Citizanship (Applicable
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 <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 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
Tather's Name (Mandatory, in customer does not have PAN)
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* 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
Passport Expiry Date Expiry Date
PIO/OCI Card Expiry Date Fig. 1
Expiry Date
NREGA National Population Register National Population Register
PLEASE COMPLETE YOUR ADDRESS AS MENTIONED IN YOUR OFFICIALLY VALID DOCUMENT
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	$\neg \neg$
Line 2	一
Landmark	\mp
City State Pin Code	\pm
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 Govern	ment
Corporate Name Doctor/CA/Architect/Lawyer/Consultant Entertainment/Alternate Medical Practitioner/Beautician	
	5 yrs
Homemaker Retired Farmer Politician Student Minor	O 313
Source of Income Salary Business Professional Fees Investments Agriculture Family W	ealth
Gross Annual Income (INR)	cartii
DEBIT CARD	
Joint Holder 1	
Do you need an Debit Card : 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)	
To enable international usage on your debit card, please use Limit Management under Debit Card section on Internet/Mobile Ban	king.
JOINT ACCOUNT HOLDER TWO	
Are you an Existing customer? Yes I am, My Customer ID is and my	
CKYC Number (If applicable)	
Debit Card Number is	
The above Debit Card will be linked to this account to which you are being added as a holder. Your existing accour continue to be the Primary Account on your Debit Card	it will
No, I am not yet a customer. I will complete the sections below	
TELL US ABOUT YOURSELF	
Applicant Name (Please complete as per your Identity Proof)	
TITLE FIRST NAME MIDDLE NAME LAST NAME	
Date of Birth Gender Male Female Third Gender	
D D M M Y Y Y Y Marital Status Married Lipmarried Others Citizenship (Applicable	
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	
Consider a manufacture to be expected in code of dual country of tay recidence	
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 communic	ation
Address is different (Please update Overseas Jurisdiction Address separately)	
Father's Name (Mandatory, if customer does not have PAN) Spouse Name	
TITLE FIRST NAME (As per OVD, no proof required) MIDDLE NAME LAST NAME	
TITLE FIRST NAME MIDDLE NAME LAST NAME	



DI EASE HEI DIIS WITH DETAILS OF	ONE OR MORE DOCUMENTS BELOW
	PAN* Form 60
Adulidar No.	*If you have a PAN it is mandatory to provide details to the bank at the time of opening
v	an account. If you do not have a PAN, please complete a Form 60.
Voter ID	i P
Driving License	Expiry Date DD MM YYYY
Passport E	Expiry Date DD MM YYYY
PIO/OCI Card E	Expiry Date DD MM YYYY
NREGA National Population R	
PLEASE COMPLETE YOUR ADI	DRESS AS MENTIONED IN YOUR
Aadhaar Passport	Driving License Voter ID
Line 1	
Line 2	
Landm	ark any)
City State	Pin Code
ADDRESS FOR COMMUNIC	CATION (No proof required)
Same as Above	This is my Residence Place of Work
Line 1	
Line 2	
Landm	
City State	any) Pin Code
HOW WOULD YOU LI	KE US TO REACH YOU?
Mobile No. (91)	ndline No. (91)
- "-	(STD Code) (Number)
E-mail ID Fill in CAPITAL LETTERS. All communication for this account will be sent to the Mobile	a / Email of the first holder
	DU DO FOR A LIVING
Occupation Salaried	Select Anyone Public Private Government
Corporate Name	
Self Employed Professional Doctor/CA/Architect/Lawyer/Cons	sultant Entertainment/Alternate Medical Practitioner/Beautician
	ship/Company No of Years in Business < 5 yrs > 5 yrs
Homemaker Retired Farmer	
Source of Income Salary Business Profession	
Gross Annual Income (INR)	ian eee
DEBI	T CARD
	Joint Holder 2
Do you need an Debit Card :	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)	

To enable international usage on your debit card, please use Limit Management under Debit Card section on Internet/Mobile Banking.



GOODS AND SERVICE TAX (GST) STATUS - APLICABLE FOR PRIMARY HOLDER	
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 FIRST Bank under GST Yes (If yes, please note that GST, as may be applicable, needs to be paid by the related person.)	
WOULD YOU LIKE TO CHOOSE A NOMINEE FOR THE ACCOUNT?	
Form DA2 (Nomination under Section 45ZA of the Banking Regulations Act, 1949 and Rule 2(5) of the Banking Companies (Nomination) Rule, 1985 in respect to bank ac	counts.)
I/We (name of existing account holders) hereby can	
nomination made by me/us in favour of Nominee Name	
Form DA1	
(Nomination under Section 45 ZA of the Banking Regulations Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rule, 1985 in respect to bank ac	counts.)
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 event of my/our/minor's death the amount of deposit	in the
account may be returned by IDFC FIRST Bank Ltd	
Please mention the nominee name in the statement/advice/passbook	
Customer ID (Incase an existing Account Holder)	
Nominee Name:	
TITLE FIRST NAME MIDDLE NAME LAST NAME	$\perp \perp \perp$
Nominee Address: Same as primary account holder address OR Update address as below	
	$\overline{\Box}$
	$\overline{\Box}$
Relationship with depositor Date of Birth DD MM YY	YY
If the nominee is a minor**, please complete this section. As the nominee is a minor on this date, I/We appoint:	
Guardian Name:	
TITLE FIRST NAME MIDDLE NAME LAST NAME	
Guardian Address:	Щ
	Щ
to receive the amount of deposits in the account on behalf of the nominee in the event of my/our/minor's death during the control of the cont	-
minority of the nominee. (** Where deposit is made in the name of a minor the nomination must be signed by a person lawfully entitled to act on behalf of the No , I do not want to nominate anyone on my behalf at this moment. I understand the advantages of nomination are	
consequences of not nominating anyone to my account.	ia tile
I/We do hereby declare what is stated above is true to the best of my knowledge and belief.	
Date: DD MM YYYY Place:	
Signature for Existing Account Holder (for DA2 & DA1) Signature for Joint Account Holder 1 Signature for Joint Account Holder 2	
Name Name Name	



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 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 I have read, understood and agree to the Terms and Conditions displayed on the website of IDFC FIRST Bank i.e. www.idfcfirstbank.com , w.r.t. the said banking facilities and other products/services 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/ 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 wished to avail. This Schedule of Charges is also displayed on www.idfcfirstbank.com.
- 3. I 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 have declared my 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 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 bank's internal policy.
- 5. I agree to furnish and intimate to IDFC FIRST Bank any other particulars that I am called upon to provide on account of any change in law/statutory requirements either in India or abroad. I 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. for the services/products which I wished to avail and which whom IDFC FIRST Bank has agency/distribution/marketing/referral arrangement, as may be required by IDFC FIRST Bank. I shall not hold IDFC FIRST Bank or its agents/representatives liable for using/sharing such information.
- 6. I hereby declare that the information provided herein as well as in the documentary evidence provided by me to IDFC FIRST Bank (the "Customer Information") is true, correct and complete in all aspects to the best of my knowledge and that I have not withheld any Customer Information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I further agree that any false/misleading Customer Information given by me or suppression of any material fact will render my 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 hereby agree to indemnify and keep indemnified IDFC FIRST Bank, affiliates and their successors or assignees.
- 8. I agree and understand that IDFC FIRST Bank reserves the right to reject my 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 in any manner whatsoever.
- 9. I authorise IDFC FIRST Bank to submit applications/other relevant documents, debit my bank account and 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 or my Attorney from time to time for the services and/or the products I wished to avail. I state that all the acts, deeds and things done by IDFC FIRST Bank based on such instructions shall be binding on me. 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.
- 10. 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 FIRST Bank and further agree to absolutely abide by all the Terms and Conditions in respect thereof, as may be notified by IDFC FIRST Bank from time to time.
- 11. I hereby consent to receiving information from Central KYC Registry through SMS/Email on the registered number/email address shared with IDFC FIRST Bank.
- 12. 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.
- 13. 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 quoted in all our invoices/credit/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 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 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.
- 14. 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.
- 15. 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.
- 16. 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.
- 17. 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.
- 18. 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.
- 19. 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 repres (including insurance), services and offers?	sentatives to contact you and	tell you about various	products	Yes N	lo	
Please issue a new cheque book fo	r this account.					
Signature for Existing Account Holder	Signature for Joint	Account Holder 1	Signature for Joint Account Holder 2			
Name	Name		Name			
Date DD MM YYYY	RECEI Photogr	e paste a NT Colour aph. Please cross the		RECEN Photogra	e paste a IT Colour aph. Please cross the	
Place		tograph		"	ograph	
	BANK USE	SECTION:	_	_	_	
Profit Centre (Joint Account Holder 1)		Profit Centre (Joint	Account Hold	er 2)		
Joint Holder 1		·		-		
Staff Family Staff Custom	er ID		Spouse	Pare	nt Child	
Joint Holder 2					_	
Staff Family Staff Custom	er ID		Spouse	Pare	nt Child	
Banker Certification I have met the customer at the commu I have met the Customer at: I have seen and verified the Origina The customer has Signed in my pressure.	Residence or Fall KYC documents. Copy/	lace of Work	Other	Yes Signature of E	mployee	
Name	Certificat	ion Date				
Employee ID/RM Code		M M Y Y Y				
RbiCrCatg	RbicrCode	RbiDrCatg	g RbiDrCode			
180 Household, MFI, TASC 189	Resident Individuals	350 Non Infra	structure	383	Other Retail	
Definition of related person under GST (a) persons shall be deemed to be "re (i) such persons are officers or of (ii) such persons are legally reco (iii) such persons are employer ar (iv) any person directly or indirect or shares of both of them; (v) one of them directly or indirectly or	lated persons" if- lirectors of one another's gnised partners in busines and employee; tly owns, controls or hold ctly controls the other; andirectly controlled by a t	s twenty-five per ce hird person;			ding voting stock	
(b) the term "person" also includes leg	al persons;					
(c) persons who are associated in the concessionaire, howsoever describ			-	e distributor	or sole	
Explanation I The term "person" also Explanation II Persons who are assoc		ne another in that or	ie is the sole a	agent or sole	e distributor or	