FORM 9 - PART II NRI/MINOR DEMAT ACCOUNT OPENING FORM

(For Individuals)

IDFC FIRST Bank Limited, Naman Chambers, C-32, G Block, Bandra-Kurla Complex, Bandra East, Mumbai 400 051.



ı	DP ID	I N 3 0 4	2 0 3							Cli	ient ID		
	☐ I/W	le wish to open a	Regular Dema	t Account							(To be	filled by	Participant)
		le wish to open a								Date	D D	M	YYYY
		equest you to ope		account in n	ny/our name	as per the fo	ollov	ving details:	(Please fill a	II the de	tails in CAP	TAL LET	TERS only)
Α		ills of Account h		4		0				The install	lalda.		
		ount holder(s)	Sole/First Hol	<u>aer</u>		Second H	loide	·r		Third H		-	
	UCIO	C details:											
	Nam	е											
	PAN												
		upation ase tick any	Private Sect	or Agri	culturist	☐ Private S	Secto	or Agri	culturist	☐ Priva	ate Sector	☐ Agric	culturist
	one a	and give brief ils)	Public Sector	r Reti	red	☐ Public S	Secto	r Reti	red	☐ Pub	lic Sector	Retir	ed
			Government Service	□ Ног	ısewife	Governm Servic	ment	Hou	sewife	☐ Gov Serv	ernment vic	Hous	sewife
			Business	Stud	dent	Busines	ss	Stud	dent	Busi	iness	Stud	ent
			Professiona	Oth spe	ers (Please cify;	Professi	ional	Othe	ers (Please cify;	☐ Prof	essional	Othe	rs (Please ify;
	Brief	details:						'					
В		association of Perso											
	a) Na	ame				b) F	PAN						
С	Туре	of account				I							
		Ordinary Resid	ent N	IRI-Repatria Others	ble N (Please speci	IRI-Non Rep fy)	patri	able C	Dualified For	eign Inv	estor	Foreign	National
D	Gros	ss Annual Incom	e Details										
	Inco	me Range per an	num (please tid	ck any one)									
	Sole	/First Holder	Ве	low₹1 lakh	₹ 1-	5 lakh] ₹ 5	5-10 lakh	₹ 10-25	lakh [More th	nan ₹25	lakh
	Seco	nd Holder	Ве	low ₹ 1 lakh	₹1-	5 lakh] ₹ 5	5-10 lakh	₹ 10-25	lakh [More th	nan ₹25	lakh
	Third	l Holder	Ве	low ₹ 1 lakh	₹ 1-	5 lakh] ₹ 5	5-10 lakh	₹ 10-25	lakh [More th	nan ₹25	lakh
	Net v	vorth as on today	Sole/Fi	st Holder			Se	cond Holder	r		Third Hold	er	
E	In ca	ase of NRIs/Fore	ign Nationals							,			
	RBI	Approval Referer	ice Number							,			
	RBI	Approval date							D	D N	M M	Y	YY
F	Ban	k details				В	Bank	details					
	1	Bank account ty	/pe Savin	gs Account [Current	Account	1	Bank acco	unt type	NRO /	Account		
		NRE Accour	others(Ple	ase specify)									
	2	Bank Account No	о.			2	2	Bank Accou	ınt No.				
	3	Bank Name				3	3	Bank Name					
	4	Branch Address					4	Branch Add	lress				
		City/Town/Villag	e		T			City/Town/V	/illage				
		PIN Code						PIN Code					
		State		Country				State			Country		



	5	MICR Code																							
	6	IFSC																	\top						
3	Plea	se tick,	Sole/First Ho	older		Politi	ically	Expo	sed F	Pers	son (F	PEP)		R	elate	d to	a Po	olitica	ally	Ехро	sed	Per	son	PE	P)
•		pplicable:	Second Hold	ler		I	ically							1	elate										
			Third Holder			Polit	ically	Expo	sed F	Pers	son (F	PEP)		R	elate	d to	a Po	olitica	ally	Ехро	sed	Per	son	(PE	P)
1	Star	nding Instructions																							
	1	I/We authorise you	to receive cred	dits auto	mati	cally i	nto m	y/our	acco	unt.	. "Defa	ault S	l is \	⁄es"			T		Y	es es		No)		
	2	Account to be operated	ated through P	ower of	Atto	rney (f	PoA)											Ī		es .	$\overline{\Box}$	No)		
	3	SMS Alert facility: the KYC Application	[Mandatory it	f you ar	e giv	ing Po	wer o	f Atto	rney	(Pc	A). Er	nsure	that	the	mol	oile r	num	ber i	s pr	ovide	ed in				
		Sr. No.	_	older								Yes								No					
		1		So	ole/F	irst Ho	older																		
		2		Se	econ	d Hold	ler																		
		3		Th	nird F	lolder															Г				
	4	Mode of receiving		Pł	nysic	al Fori	m																		
		Statement of Accou	ınt	EI	ectro	nic Fo	orm [Read	Note	3 a	and er	nsure	that	em	ail ID) is p	rovi	ded i	n K`	YC A	pplic	atio	n Fo	rm].	
	5	Delivery Instruction online trading facili Manager and do no Yes, I / we wish to No, however, the	e given n a Bas Booklet	Pow ic Se at th	er of ervices e time	Attorr Dem of ac	ney to at Account	ope coun ope	erate t ning	e the	Depo	sito	ry a	ccou	int to	а	stock	br							
	[For sign	ardian Details (when account of a minor, t ed by guardian)]					be fill	ed i.e	e. one	e fo	r the g	guard	ian a	and	anot	her f	or th	ne m	inor	(to l	ре				
	Gua	rdian Name												-			1			_					
	PAN	<u> </u>																							
	Rela	ationship of guardian	with minor																						
J		nination Option																							
		I/We wish to make a (As per details give									Ve do Is refe						min	ation	۱.						
		nination Details																							
		e wish to make a no nt of my/our death."	mination and o	do herel	by no	ominat	e the	follov	ving	pers	son(s)	who	sha	II re	ceive	e all	ass	ets h	eld	in m	y/our	aco	coun	t in	the
		nation can be made unees in the account.	ıpto three	D	etails	s of 1s	t Nom	inee			Det	ails o	f 2nd	d No	omine	ee			Det	ails (of 3rc	d No	mine	ee	
1	Name	e of the nominee(s) (N	∕lr./Ms.)] [_	Щ
	Shara	e of each Nominee																							
	Snare Egual									г								_							
	•	qually, please specify perc	entage)		441.1	%	late - !	all E			4a. #= -	%		 -	4:a	اد ساد		L		9	6				
3	Relati	onship With the Appl	Any oc	JU 101 8	after divi	ISION SN	an be ti	anste	Trea	to the fi	IST NON	iiiee	men	uoned	ı ın the	iorm	'. 								
((If Any] [-	<u>'</u>		<u> </u>		_	T		_					
	, wale	or 140mmice(a)						+	, L			+		+	+	\dashv	+			+		+		\forall	
								İ												İ					
									[_			L					Ŧ	Щ	1		Щ	
									+				+		+	+	Н	F	<u> </u>	\Box	+		+	+	\mathbb{H}
					+				+	, L			+		+	+	\dashv	F			+		+	+	H
F	PIN C	ode			†					, [E			\pm				
							_	2	!				_					_							



5 Mobile/Telephone No. of nominee(s)																											_
6 Email ID of nominee(s)																											=
7 Nominee Identification details (Please tick any one of following and provide details of same)	F	ΆN		Aa	Sig	ar				P	AΝ	_	Α	adl	naa	r				PA	٨N		Α	adh	aar	ature	_
	F	roof	of I	den	accontity		t no.			P	roof	ng B of at A	lde	ntit	y		no.			Pr	oof	of	dei	acc ntity unt		nt no	
	P	lease ecent	affix y Pass notogr	our port		J				Ple re	ease	affix Pass	you	r						Ple	ease	affix Pass	your				
	Sign									gn .									Sig	n _						_	
8 Date of Birth (in case of minor nominee(s))	DS. 8-14 S			BE M	Y	4	Y	Y				EE(s) l	S A	Y	Y	R:	′	D	D		М	М	\	′ Y	Υ	Υ
9 Name of Guardian (Mr./Ms.) in case of minor nominee(s)																											=
10 Address of Guardian				Ī					Ē																İ		=
				<u> </u>																							=
				Ī																							=
PIN Code				Ī																							_
11 Mobile/Telephone No. of Guardian		T T				I I					I I																=
12 Email ID of Guardian										İ																	=
13 Relationship of Guardian with nominee		İ							Ē	İ							I										=
14 Guardian Identification details (Please tick any one of following			ogra	,	Sig		ure			_	noto	gra	-		Sigr naa		ire			Ph PA		gra	-	& Si	-	ture	
and provide details of same)	PAN Aadhaar Saving Bank account no. Proof of Identity Demat Account ID							Sa Pı	avin oof	gB ofl atA	ank der	c ac	ccoi		no.			Sa Pr	vin oof	of I	ank der		oui	nt no.			
	Please affix your recent Passport size Photograph								Ple ree	ease cent	affix Pass	your	•						Ple	ase a	affix Pass otog	your port					
	Sign						_ 3		Si	gn .					_		-		Sig	n _							



For britaness and a constraint to be constructed for the formation of the														
For Joint accounts, communication to be sent to (Pls refer Point No. 15 below)														
First holder														
All joint account holders														
Mode of Operations for Joint Accounts														
Jointly														
Anyone of the holder or survivor(s) f Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities														
If Mode of Operation for Joint Account is chosen as anyone of the holder or survivor(s), only specified operations such as transfer of securities including Inter-Depository Transfer, pledge / hypothecation / margin pledge / margin re-pledge (creation, closure and invocation and confirmation thereof as applicable) of securities and freeze/unfreeze of account and / or securities and / or specific number of securities will be permitted.														
Signature of witness, along with Name & Address are required, if the account holder affixes thumb impression, instead to signature".														
SIGNATURE OF WITNESS FOR NOMINATION														
SIGNATURE OF WITNESS FOR NOMINATION Name of the Witness														
Address of Witness														
	\top													
	T													
PIN Code	Ť													
Date														
Signature(s) of Witness	_													

Instructions related to nomination, are as below:

- 1. The nomination can be made only by individuals holding beneficiary owner accounts on their own behalf singly or jointly. Non individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot nominate. If the account is held jointly, all joint holders will sign the nomination form
- 2. A minor can be nominated. In that event, the name and address of the Guardian of the minor nominee shall be provided by the beneficial owner.
- 3. Only individual / natural person(s) can be a nominee(s). The Nominee(s) shall not be artificial person created/dressed by the law or by a fiction such as trust, society, body corporate, partnership firm, Hindu Undivided Family., etc. A non-resident Indian can be a Nominee, subject to the exchange controls in force, from time to time.
- 4. Nomination in respect of the beneficiary owner account stands rescinded upon closure of the beneficiary owner account. Similarly, the nomination in respect of the securities shall stand terminated upon transfer of the securities.
- 5. Transfer of securities in favour of a Nominee(s) shall be valid discharge by the depository and the Participant against the legal heir.
- 6. The cancellation of nomination can be made by individuals only holding beneficiary owner accounts on their own behalf singly or jointly by the same persons who made the original nomination. Non- individuals including society, trust, body corporate and partnership firm, karta of Hindu Undivided Family, holder of power of attorney cannot cancel the nomination. If the beneficiary owner account is held jointly, all joint holders will sign the cancellation form.
- 7. On cancellation of the nomination, the nomination shall stand rescinded and the depository shall not be under any obligation to transfer the securities in favour of the Nominee(s).
- 8. Nomination can be made upto three nominees in a demat account. In case of multiple nominees, the Client must specify the percentage of share for each nominee that shall total upto hundred percent. In the event of the beneficiary owner not indicating any percentage of allocation/share for each of the nominees, the default option shall be to settle the claims equally amongst all the nominees.
- 9. On request of Substitution of existing nominees by the beneficial owner, the earlier nomination shall stand rescinded. Hence, details of nominees as mentioned in the FORM 10 at the time of substitution will be considered. Therefore, please mention the complete details of all the nominees.
- 10. Copy of any proof of identity must be accompanied by original for verification or duly attested by any entity authorized for attesting the documents.
- 11. Savings bank account details shall only be considered if the account is maintained with the same participant.
- 12. DP ID and client ID shall be provided where demat details is required to be provided.
- 13. I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our demat account and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the demat account.
- 14. In case of joint account, on death of any of the joint account holders, the surviving account holder(s) has to inform Participant about the death of account holder(s) with required documents within one year of the date of demise.
- 15. In case if 'first holder' is selected, the communication will be sent as per the preference mentioned at Sr. No. 4. In case 'All joint account holders' is opted, communication to first holder will be sent as per the preference mentioned at Sr. No. 4 and communication to other holders will be in electronic mode. The default option will be communication to 'first holder', if no option selected.



Declaration

The rules and regulations of the Depository and Depository Participants pertaining to an account which are in force now have been read by me/us and I/We have understood the same and I/We agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it. In case non-resident account, I/We also declare that I/We have complied and will continue to comply with FEMA regulations. I/We acknowledge and declare that I/We have received, read, understood, and agree to the contents of: Rights and Obligations of the Beneficial Owner and Depository Participant, Schedule of Charges applicable for Demat Account, FATCA Declaration, Aadhaar.

Name(s	s) of holder(s)	Signature(s) of holder
Sole/First Holder/Guardian (in case sole holder is minor) (Mr./Ms.)		x
Second Holder (Mr./Ms.)		х
Third Holder (Mr./Ms.)		х

Notes:

- 1) All communication shall be sent at the address of the Sole/First holder only.
- 2) Thumb impressions and signatures other than English or Hindi or any of the other language not contained in the 8th Schedule of the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate.
- 3) For receiving Statement of Account in electronic form: I. Client must ensure the confidentiality of the password of the email account. II. Client must promptly inform the Participant if the email address has changed. III. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.
- 4) If Clients wants to appoint a minor as a nominee, then a separate Nomination form may be obtained.
- 5) If client wish to receive Annual Reports, AGM notices in physical form, please inform your DP.
- 6) Email Statement: I/We agree to discontinue the Physical Statements if electronic mode is opted. I/We understand that the email statements are for my/our convenience. IDFC FIRST Bank Limited shall not be liable or responsible for any breach of secrecy because the statements are being sent to the email ID. I/We shall verify the authenticity of the emails I/We receive. I/We shall not hold the IDFC FIRST Bank Limited responsible for any statement received from frauds/imposters. I/We shall not hold the IDFC FIRST Bank Limited liable if any problem arises with my/our computer network because of me/us receiving statements from the IDFC FIRST Bank Limited. I/We are authorised by the other holders to receive the Statements to the email address. I/We shall inform the IDFC FIRST Bank Limited in writing if there is any change in the email address. IDFC FIRST Bank Limited shall not be responsible if I/we do not receive statement due to incorrect email address and technical reasons. I/We confirm to have read and understood the Terms & Conditions (a copy of which I am in possession of) pertaining to my account. I/We understand and agree that the email statements will only be sent to the First holder in the account. I/we am/are aware that I/we will not receive the transaction statements in paper form. I/we will take all the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account. I/we am/are aware that the transaction statement may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.
- 7) Instructions related to mode of receiving Statement of Account in electronic form, are as below:
 - 1) All the necessary steps to ensure confidentiality and secrecy of the login name and password of the internet/email account should be taken by the client. Such statement may be accessed by other entities in case the confidentiality/secrecy of the login name and password is compromised.
 - 2) Participant or Client can terminate such arrangement by giving 10 days prior notice.
 - 3) In case opted for statement through email, the Client shall immediately inform the Participant about change in email address, if any.
- 8) I/We hereby provide consent to receive demat account related documents in electronic mode at Sole/First Holder's Email ID.
 - 1) Transaction-cum-Holding Statement
 - 2) Rights and Obligations of the Beneficial Owner and Depository Participant
 - 3) Schedule of Charges applicable for Demat account.
- 9) NRI Customer under repatriation status to ensure the credits of securities in Demat account is as per the RBI and FEMA guidelines.



	Declaration **IN case of joint ac	count, decla	artion si																		
Please tick (#) wherever applicable)																_					
P ID I N 3 0 4 2 0 3	Clie	ent ID										Da	te	D	D	M	M		Y	Y	Υ
ame of the First Account Holder																					
obile Number						E-	mail														
ereby declare that the aforesaid mobile				·																	
Me or My family (spouse, depend	dent children a	and dep	pend	lent p	paren	ts).															
ame of the Second Holder																					
obile Number						E-	mail														
nereby declare that the aforesaid mobile	number or E	-mail II) bel	longs	s to																
Me or My family (spouse, depend	dent children a	and dep	pend	dent p	paren	ts).															
Name of the Third Account Holder																					
obile Number						E-	mail			Ť			$\overline{}$	Ť				Ť	T	T	
oroby doctors that the of	number == C	maili		los-	n to																-
ereby declare that the aforesaid mobile Me or My family (spouse, depend				•		ts)															
The oriny family (spouse, depend		unu ue	JUITU	1011L	PaiGil	10).				_											
Me or My family (spouse, dependent children and dependent parents).																					
Signature																					
Jigilalul a	1 1			Qi/	nnetiii	re									Qi/	nnot	ture				
		Signatu	ire(e)		gnatu		COunt	t hold	er			Si	net	ure/		gnat		יכטי	ınt h	olda	er
Signature(s) of first account holder Debit Authorisation: I/We hereby autho	Debit A	FIRST	atio Ban	on for	r dem	d ac	ccou	ı nt c h	narge s of E	3an		rges	s/coi		s) of	thir	d ad	Ser	vice	Cha	arge
	Debit All prize the IDFC We undertak in part of me/urvice Charges ebiting of Serank Limited sl We specifical the Indian law e a lien and alimited and alimited and all prize the Indian and alimited and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and all prize the Indian and Indian a	uthorist FIRST e that so to make so I/We I rivice Chall not ally agreed so and so right of uthorized	satio Ban suffic aintai herel harge be o e an shall set	on for hk Lindient in sure by fures, a obliged to off of the sure off of the sure of the s	r dem mited balan fficier arther nd/or ed to p onfirm ubject on all C FIF	d according to the terms of the	ebit al shall lance orise over the de over any he jurnies b	Int ch I type be me in the the ch rerdra matter isdict pelong Limi	narge es of E e said DFC earges aft fac er or tion o	Bankaine d Ad FIR s fro cility issu issu to n	d by ST E om a on the are counce/us	rges me/int sh sank ny o ne sa ising irts o	s/corus ir all n Lim ther aid A g he of Mu	mmis of the of in ited acco accou reun umba	ssior said any to ch ount unt b der ai in	thir thir n/fee d Ac way marg ma but fo sha Indi	es (" cou y im le ar intai or to ll be a. I/V	Sernts pair ny in ned war go Ve I	vice the the tere by ds the verr	Charightest ome/ned leby only a	arge ate t of n de us w ebit by a conf
Signature(s) of first account holder Debit Authorisation: I/We hereby authorous ayable by me/us to the said Accounts. I/Webiting of Service Charges. The failure or DFC FIRST Bank Limited to debit the Service in the said Accounts due to the debit of the Service Charges payable by me/us. I/Webiting of Service Charges payable by me/us. I/Webiting of the Service Charges payable by me/us. I/Webiting of the Service of the Service of the Service of the Service of the Service of the Service charges wards satisfaction of the service charges	Debit A prize the IDFC We undertak in part of me/u rvice Charges ebiting of Ser ank Limited sl We specifical the Indian law e a lien and a imited and au s or any other	uthoris c FIRST e that s is to ma s. I/We I vice Ch hall not lly agre vs and s right of uthorize charge	Bantion Bantio	on for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some for some form for some form for some fore	r demmited balan fficier rither nd/or ced to penfirm ubject on all C FIF	d according to define the state of the state	bbit all shall lance orise over the de over the decove	Int children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children was a second children with the life children was a second childre	narge s of E aninta e said DFC arges off face or or cition o	Baniaine d Ad FIR s free cility issu f the	d by ccour ST E som a on the ue are e cour ne/us out re	me/i/t shit shit shit shit shit shit shit shi	s/conus ir all number	mmissing the otining to make the control of the con	ss) of ssion said any to chount but but in my/ne/us	ithir	ees (" cou y im le ar intai or to ll be a. I/\ cre app	Sernts pair ny in ned war go We I dit i	vice to fa the tere by ds the verr nere n an	Chacilitarigh	arge ate t of n de us w ebit by a conf cco
Signature(s) of first account holder Debit Authorisation: I/We hereby author ayable by me/us to the said Accounts. I/Nebiting of Service Charges. The failure or DFC FIRST Bank Limited to debit the Service in the said Accounts due to the de DFC FIRST Bank Limited. IDFC FIRST Bank Service Charges payable by me/us. I/Nebitined exclusively in accordance with the IDFC FIRST Bank Limited shall have that soever with the IDFC FIRST Bank Limited shall have that satisfaction of the service charges DFC FIRST Bank Account Number	Debit A prize the IDFC We undertak in part of me/u rvice Charges ebiting of Ser ank Limited sl We specifical the Indian law e a lien and a imited and au s or any other	uthorise c FIRST e that s is to ma s. I/We I rvice Ch hall not lly agre vs and s right of uthorize charge	Bantion Bantio	on for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some for some form for some form for some fore	r demmited balan fficier rither nd/or ced to penfirm ubject on all C FIF	d according to define the state of the state	bbit all shall lance orise over the de over the decove	Int children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children with the life children was a second children was a second children with the life children was a second childre	narge s of E aninta e said DFC arges off face or or cition o	Baniaine d Ad FIR s free cility issu f the	d by ccour ST E som a on the ue are e cour ne/us out re	me/i/t shit shit shit shit shit shit shit shi	s/conus ir all number	mmiss the ottin ited accoureun bag to no no solution of the otton of t	ssion said any to choose t	thir thir thir thir thir thir thir thir	es (" es ("	Sernts pair ned war go We I dit i brop	vice to fa the by ds the verr nere n an riate	Cha acilitating he stoome/ med laby come and a stoome of the stoome of t	arge ate t of n de us webit by a conf cco s sa
Signature(s) of first account holder Debit Authorisation: I/We hereby authory ayable by me/us to the said Accounts. I/We bitting of Service Charges. The failure or offer FIRST Bank Limited to debit the Servial ance in the said Accounts due to the defect FIRST Bank Limited. IDFC FIRST Bank Limited. IDFC FIRST Bank Limited shall have the IDFC FIRST Bank Limited shall have the said satisfaction of the service charges. DFC FIRST Bank Account Number DFC FIRST Bank Account Number DFC FIRST Bank Limited Signature(s) of first/sole holder DFC FIRST Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited Signature(s) Bank Limited	Debit A prize the IDFC We undertak in part of me/u rvice Charges ebiting of Ser ank Limited sl We specifical the Indian law e a lien and i imited and au s or any other	uthorise C FIRST e that s is to ma s. I/We I vice Ch hall not lly agre vs and s right of uthorize charge Sign ACK	Bantio Bantio	on for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some for some form for some form for some form for some form for some for some form for some for som	r demmited balann fficier rither nd/or ed to penfirm ubject on all C FIF di paya	d according to define the state of the state	bbit all shall lance orise over the decove	Int children in the literature of the children in the literature of the children in the childr	narge s of E aninta e said DFC arges ift face or or cition o with face with face arges ift face arges ift face or or cition o with face or or cition o with face with	Banine d Ad FIR s from issu issu f the	d by ecoul ST E ST E on the ue are e coul ne/us out re	irges me/int sh sank sank ny o ne sa ising irts c s sta	s/conus irru	mmiss the ottin decrease of the second secon	ssion said any to chount but but but ai in my/one/us	thir n/feed Acc warg maa put fe sha Indi /our s to	es (" es (" es (" es (" es (" es () II	Serrota Service Servic	vice to father the fat	Chaiciliting in the control of the c	arge ate t of t of t of t of t of t of t of t
Signature(s) of first account holder Debit Authorisation: I/We hereby autho hyable by me/us to the said Accounts. I/we bitting of Service Charges. The failure or FC FIRST Bank Limited to debit the Serviance in the said Accounts due to the difference of the FC FIRST Bank Limited. IDFC FIRST Bank Enstrued exclusively in accordance with the IDFC FIRST Bank Limited shall have not so a satisfaction of the service charges. DFC FIRST Bank Account Number DFC FIRST Bank Account Number DFC FIRST Bank Limited man Chambers, C-32, G Block, Bandra-Kurla Comeccived the application from Mr./Ms.	Debit A prize the IDFC We undertak in part of me/u rvice Charges ebiting of Ser ank Limited sl We specifical the Indian law e a lien and i imited and au s or any other	uthorise C FIRST es that s es to ma s. I/We I rvice Ch hall not ly agre vs and s right of uthorize charge Sign ACK	Bantion Bantio	on for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some form for some for some form for some form for some for	r dem mited balan fficier orther red to p on all C FIF d paya	d according to define the control of	bbit all shall lance orise over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de over the de	Int children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the children in the life of the life o	narge s of E save said DFC arge: off facer or ction o ging to ted w	Banhaine d Ao	d by scoul ST E and scoul ST E and scoul ST E and scoul scot	irrges me/int sh sank ny o ne sa ising irrs c s sta sfere	s/con us ir Lim ther aid A y he of Mu ndir nce	mmiss the ottinited account of the second of	ss) of ssion said any to choose the choose to choose the choose to choose the choose to choose the c	thirm/feed Account of Account for Manager Mana	rd acces (" ccou y im le ar intai or to cre app	Serrors services serv	vice to fa the term of the ter	Characilitic control of the control	arge ate tof on de us webit by a conficco e sa

Branch Seal & Signature

CKYC & KRA KYC Form



Know Your Client Application Form (For (Please fill the form in English an Fields marked with '*' are mandat	ıly)	т (уре	lica e* C Ty				odat		YC AN is					 P/	III		mnt	Inv	/es	tors	(Re	ofer	inetri	uctio]													
1. Identity Details (Please re	efer i	nstr	uctio	on A	A at	the			.,	P			J	ΔI (I .	7 (1 4 10	man	uuto	· y /				.,,,	p			.0.0	(110	,,,,,,	iiiotre	20110									
PAN							_		20 6	anc	lnee	20	łuly	atte	etar	d co	nv i	of vo	nır	ΡΔ	N C	ard																	
1 AIN	L Dr	efix					_		Na		1030	ac	luly	alle	3101	J 60	Ру				Nar		•									Loo	st NI	ame	0				
Name* (same as ID proof)	Щ	T	ПП	\neg	\top	\neg		T	INA	IIIC						Т	Т	Τ΄	T	T	Ivai	T	Т	\neg				Т	\top			Las	LIN	T	Ť	Т	Т	Т	
Maiden Name (If any*)	H	+	╢	+	+	+	+	+	\dashv	\dashv	-			Н		\vdash	┢	+	╁	+	+	+	+	+		H	╟	+	+	\dashv	_		\vdash	\vdash	+	+	+	+	\dashv
	H	+	╬	+	+	+	+	+	\dashv	\dashv	-			Н	\parallel	╀	┝	+	╁	+	+	+	+	+		H	╟	+	+	\dashv	-	_	⊬	╀	+	+	╀	+	4
Father / Spouse Name* Mother Name*	H	+	╬	+	+	+	+	+			-			Н		\vdash	H	+	\vdash	+	+	+	+	+			╟	+	+	\dashv				\vdash	\vdash	+	+	+	_
Date of Birth*	D	D -	_ [N	ЛIV	л <u>-</u>	Υ	Ϋ́	Y \	' Y]						_												'-					T			Ph	oto			Ī
Gender*			Mal		_								F-	Fem	nale				l T	-Tr	anso	aer	nder																1
Marital Status*		Ma	rried	4									Un	mar	ried			Г			ers																		
Citizenship*			Indi												. – C		trv		,		010				(our	ntrv	C	ahr	Г		7					7		
·					ndiv	: d	ol.										•	—							_	oui	iti y	O	Jue	_		_							
Residential Status*					ndiv atior		aı								esid of			ıarı Ərigi	in															4					
Occupation Type*			-				ivate	e Se	ecto	or					Sec		a11 \			ov	ernn	ner	nt S	ecto	or														1
останали туро								_			nplo						red					ewi	fe	Г	∃ s	tuc	lent	t											
			Busir												Cate	-			•																				
2. Proof of Identity (Pol)* (f	or PA	ιN e	xem	tar	Inve	sto	r or i	if P	AN	car	d cc	vac	not	prov	/ide	d) (F	Plea	ase i	refe	er ir	nstru	ıcti	on (2 &	K	at th	ne e	end)										
(Certified copy of any one of the																- / (,										
☐ A- Passport Number	П	Т	Т	П		Т	П												Pa	ssp	oort l	Exp	piry	Da	te				D D) -	- 1	/1 1/	1	Υ	Υ	Υ	Υ		
☐ B- Voter ID Card	\Box	+	\top	Н	\vdash	$^{+}$	\Box	П	Т	Т	Т	1																											
☐ D- Driving Licence	\Box	†	\top	П	\top	†	П	\exists	\top	†	†	T							Dri	vin	ıg Lic	cer	nce	Exp	oiry	Da	te	Γ	D [5 -	- 1	/I N	7	Y	Υ	Υ	Υ		
☐ E- Aadhaar Card	\Box	†	\top	П	\top	†	П	\exists	\top	†																		_			_		_		_		_		
☐ F- NREGA Job Card	\Box	†	\top	П	\top	Ť	П	\exists	\top	†	T																												
Z- Others (any document	notif	ied I	by th	ne d	centr	al g	gove	rnn	nen	t)		Г	П		Т	Т			Т	٦	lder	ntif	icat	ion	Νu	mb	er	Γ	Т	Т	Т	Т	Т	Т	П	П	Т	Т	
3. Proof of Address (PoA)*			-							•										_																			Ī
3.1 Current / Permanent	/ Ove	erse	as A	\dd:	ress	De	tails	(PI	leas	se s	ee i	nstı	ructi	ion I	D at	the	en	d)																					
Address																																							
Line 1*				П		Т	Т	Τ	Τ	Τ	Τ	Τ	Π			Т	Т	Т	Τ	Т		Τ	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Τ	
Line 2	\top	П	\Box	\exists	\top	†	\top	T	†	Ť	T	T	T	П		\top	T	\top	Ť	\dagger	\top	Ť	\top	Ť	\top	\top	\top	7	T	T	\forall	T	\top	\top	十	\top	†	T	_
Line 3																							City	//7	Гow	n /	Villa	age	*				I	I	I	I			
District*						2	Zip /	Po	st C	Code	e*										State	 e/U	ТС	ode	•	Γ	Т		as	per	Indi	ian N	Moto	r Ve	hicle	e Act	, 198	38	
State/UT*	П	Т	Т		П	Т	Т	Т	T			C	our	ntry*					Т	Τ	Т	Τ	Τ		Π	1 -		— Соі	untr	у С	ode	• [\top		as p	oer IS	SO 3	166	
	eside	ntia	al / B	Rusi	iness					Re	side			•] F	 Busi	nes	s		_		_	Re	aist	ere	d (Offic	e		L] [Insi	peci	fiec	ł	
(Certified copy of any one of							Addr	ess	_ [P					e sı	ıbm	itted		J (10)								giot	0.0		,,,,	•					,,,ot	,,,,,		•	
Proof of Address*																												_	_	_	_		_	_	_		_		
Passport Number	Ш	\perp		Ш		┸	Ш					_							Pa	ssp	oort l	Ex	piry	Da	te			L	D D) -	- 1	/I IV		Υ	Υ	Υ	Υ		
☐ Voter ID Card	Ш	\perp	\perp	Ш	Щ	1	Ш	4	4	4	\perp	L																_		_			_	_					
☐ Driving Licence									4	4									Dri	vin	ıg Lid	cer	nce	Exp	oiry	Da	te		D [) -	- 1	/I N		Υ	Υ	Υ	Υ		
☐ Aadhaar Card									4	4	_	_																											
□ NREGA Job Card											_			_																									
Others (any document notified by the central government)									nt)												Ider	ntif	icat	ion	Νu	mb	er						\perp	\Box		\Box			
☐ 3.2 Correspondence / Local Address Details* (Please se											ructi	ion	E at	the	end	d)																							
Same as Current/ Permaner	nt / O	vers	seas	Ac	dres	ss c	letai	ls (I	n ca	se of	mult	iple	corre	spon	dence	e / loc	al a	ddres	ses,	ple	ase fil	I 'Ar	nexi	ıre A	\1', :	Subn	nit re	leva	nt do	ocur	nenta	ary p	roof)					
Line 1*					\perp	I	T	I	Ţ	T	Γ					\perp		Ţ	T	I		I	T	I	I	I	T	I	I	I	\Box	1	\Box	\Box	\perp	I	T	I	
Line 2	\perp	Ш	Ц	_	_	4	4	\perp	\perp	\perp	\perp	\perp	_	Ш	Ц	4	4	4	1	\downarrow	_	\downarrow				\perp				4	4	4	\dashv	\downarrow	\perp	\perp	\perp	\perp	_
Line 3	+	Н	\sqcup	_								1	_	Н	\square	\perp	4						City	/ / ٦	Гow	n /	Villa	age	*				\perp	\perp	\perp	\perp			
District*	<u> </u>	Щ	Щ	ᆜ			Zip /	Po	st C	Code	e*			Ш	닏		_				State	e/U	ТС	ode)	, [∕loto	r Ve	hicle	e Act	, 198	38	
State/UT*								1				C	our	ntry*	-												(Cou	untr	у С	ode	•			as p	oer IS	SO 3	166	

4. Contact Details (All	communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)													
Email ID														
Mobile	Tel. (Off) Tel. (Res) —													
5. FATCA/CRS Inform	ation (Tick if Applicable) Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)													
Additional Details Re	quired* (Mandatory only if above option (5) is ticked)													
Country of Jurisdiction	n of Residence* Country Code of Jurisdiction of Residence as per ISO 3166													
Tax Identification Nu	nber or equivalent (If issued by jurisdiction)*													
Place / City of Birth*	Country of Birth* Country Code as per ISO 3166													
Address Line 1*														
Line 2														
Line 3	City / Town / Village*													
District*	Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988													
State/UT*	Country* Country Code as per ISO 3166													
6. Details of Related F	erson (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')													
Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1') Related Person Deletion of Related Person KYC Number of Related Person (if available*) Guardian of Minor Assignee Authorized Representative														
Prefix FirstName MiddleName LastName ame*														
Name*	(If KYC number and name are provided, below details of section 6 are optional)													
(If KYC number and name are provided, below details of section 6 are optional) Proof of Identity [Pol] of Related Person* (Please see instruction (H) at the end)														
Proof of Identity [Pol] of Related Person* (Please see instruction (H) at the end) Certified copy of any one of the following Proof of Identity [Pol] needs to be submitted)														
Certified copy of any one of the following Proof of Identity [Pol] needs to be submitted) A- Passport Number Passport Expiry Date														
B- Voter ID Card														
☐ C- PAN Card														
D- Driving Licence	Driving Licence Expiry Date DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD													
E- Aadhaar Card														
☐ F- NREGA Job Car														
7. Remarks (If any)	ment notified by the central government)													
7. Remarks (II ally)														
														
8. Applicant Declarati	on													
 I hereby declare that the det 	ills furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held													
liable for it. I hereby declar	that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of directions issued by any governmental or statutory authority from time to time. [Signature / Thumb Impressaion]													
,	nformation from Central KYC Registry through SMS/Email on the above registered number/email address.													
Date: DD — M	Place: Signature / Thumb Impression of Applicant													
9. Attestation / For Of	·													
Documents KYC Ve	☐ Certified Copies rification Carried Out by (Refer Instruction I) Institution Details													
Date	Name Name													
Emp. Name	Code													
Emp. Code	Emp. Branch													
Emp. Designation														
Emp. Designation														
	ification (IPV) Carried Out by (Refer Instruction J) Institution Details													
Date	D D — M M — Y Y Y Y													
Emp. Name	Code													
Emp. Code	Emp. Branch													
Emp. Designation														

Instructions/Guidelines for filling Individual KYC Application Form

General Instructions:

- 1. Self-Certification of documents is mandatory.
- 2. KYC number of applicant is mandatory for update/change of KYC details.
- 3. For particular section update, please tick (🗸) in the box available before the section number and strike off the sections not required to be updated.
- 4. Copies of all documents that are submitted need to be compulsorily self-attested by the applicant and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [I].
- 5. If any proof of identity or address is in a foreign language, then translation into English is required.
- 6. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 7. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
- 8. Sole proprietor must make the application in his individual name & capacity.
- 9. For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.

 10.In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 11. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.

A. Clarification / Guidelines on filling 'Identity Details' section

- 1. Name: Please state the name with Prefix (Mr/Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2. Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.

B. Clarification/Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India

1. Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number, and resident registration number)

C. Clarification / Guidelines on filling 'Proof of Identity [Pol]' section, if PAN Card copy is not enclosed/For PAN exempt Investors

- 1. If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.
- 2. Mention identification / reference number if 'Z Others (any document notified by the central government)' is ticked.
- Others Identity card with applicant's photograph issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector
 Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council,
 etc., to their Members: and Credit cards/Debit cards issued by Banks.
- 4. Letter issued by a gazetted officer, with a duly attested photograph of the person.

D. Clarification / Guidelines on filling 'Proof of Address [PoA] section

- 1. PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
- 2. State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

E. Clarification / Guidelines on filling 'Proof of Address [PoA] - Correspondence / Local Address details' section

- 1. To be filled only in case the PoA is not the local address or address where the customer is currently residing. No separate PoA is required to be submitted.
- 2. In case of multiple correspondence / local addresses, Please fill 'Annexure A1'
- 3. Others includes Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill); Bank account or Post Office savings bank account statement; Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India; Identity card with applicant's photograph and address issued by any of the following: Central/ State Government Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council, etc., to their Members; and Credit cards/Debit cards issued by Banks.

F. Clarification / Guidelines on filling 'Contact details' section

- 1. Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
- 2. Do not add '0' in the beginning of Mobile number.

G. Clarification / Guidelines on filling 'Related Person details' section

1. Provide KYC number of related person if available.

H. Clarification / Guidelines on filling 'Related Person details – Proof of Identity [Pol] of Related Person' section

1. Mention identification / reference number if 'Z- Others (any document notified by the central government)' is ticked.

I. List of people authorized to attest the documents after verification with the originals:

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- 5. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.
- 6. Government authorised officials who are empowered to issue Apostille Certificates.

J. List of people authorized to perform In Person Verification (IPV):

- 1. Authorised officials of Asset Management Companies (AMC).
- 2. Authorised officials of Registrar & Transfer Agent (R&T) acting on behalf of the AMC.
- 3. KYD compliant mutual fund distributors.
- 4. Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (for investors investing directly).
- 5. In case of NRI applicants, a person permitted to attest documents, may also conduct the In Person Verification and confirm this in the KYC Form.

K. PAN Exempt Investor Category

- 1. Investments (including SIPs), in Mutual Fund schemes up to INR 50,000/- per investor per year per Mutual Fund.
- 2. Transactions undertaken on behalf of Central/State Government, by officials appointed by Courts, e.g., Official liquidator, Court receiver, etc.
- 3. Investors residing in the state of Sikkim.
- 4. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.

List of Two-Digit state / U.T Codes as per Indian Motor Vehicle Act, 1988

State / U.T	Code
Andaman & Nicobar	AN
Andhra Pradesh	AP
Arunachal Pradesh	AR
Assam	AS
Bihar	BR
Chandigarh	CH
Chattisgarh	CG
Dadra and Nagar Haveli	DN
Daman & Diu	DD
Delhi	DL
Goa	GA
Gujarat	GJ
Haryana	HR

State / U.T	Code
Himachal Pradesh	HP
Jammu & Kashmir	JK
Jharkhand	JH
Karnataka	KA
Kerala	KL
Lakshadweep	LD
Madhya Pradesh	MP
Maharashtra	MH
Manipur	MN
Meghalaya	ML
Mizoram	MZ
Nagaland	NL
Orissa	OR

State / U.T	Code
Pondicherry	PY
Punjab	PB
Rajasthan	RJ
Sikkim	SK
Tamil Nadu	TN
Telangana	TS
Tripura	TR
Uttar Pradesh	UP
Uttarakhand	UA
West Bengal	WB
Other	XX

List of ISO 3166 Two-Digit Country Code

	Country		Country		Country		Country
Country	Country Code	Country	Country Code	Country	Country Code	Country	Code
Afghanistan	AF	Dominican Republic	DO	Libya	LY	Saint Pierre and Miquelon	PM
Aland Islands	AX	Ecuador	EC	Liechtenstein	LI	Saint Vincent and the Grenadines	VC
Albania	AL	Egypt	EG	Lithuania	LT	Samoa	WS
Algeria	DZ	El Salvador	SV	Luxembourg	LU	San Marino	SM
American Samoa	AS	Equatorial Guinea	GQ	Macao	MO	Sao Tome and Principe	ST
Andorra	AD	Eritrea	ER	Macedonia, the former Yugoslav Republic of	MK	Saudi Arabia	SA
Angola	AO	Estonia	EE	Madagascar	MG	Senegal	SN
Anguilla	Al	Ethiopia	ET	Malawi	MW	Serbia	RS
Antarctica	AQ	Falkland Islands (Malvinas)	FK	Malaysia	MY	Seychelles	SC
Antigua and Barbuda	AG	Faroe Islands	FO	Maldives	MV	Sierra Leone	SL
Argentina	AR	Fiji	FJ	Mali	ML	Singapore	SG
Armenia	AM	Finland	FI	Malta	MT	Sint Maarten (Dutch part)	SX
Aruba	AW	France	FR	Marshall Islands	MH	Slovakia	SK
Australia	AU	French Guiana	GF	Martinique	MQ	Slovenia	SI
Austria	AT	French Polynesia	PF	Mauritania	MR	Solomon Islands	SB
Azerbaijan	AZ	French Southern Territories	TF	Mauritius	MU	Somalia	SO
Bahamas	BS	Gabon	GA	Mayotte	YT	South Africa	ZA
Bahrain	BH	Gambia	GM	Mexico	MX	South Georgia and the South Sandwich Islands	GS
Bangladesh	BD	Georgia	GE	Micronesia, Federated States of	FM	South Sudan	SS
Barbados	BB	Germany	DE	Moldova, Republic of	MD	Spain	ES
Belarus	BY	Ghana	GH	Monaco	MC	Sri Lanka	LK
Belgium	BE	Gibraltar	GI	Mongolia	MN	Sudan	SD
Belize	BZ	Greece	GR	Montenegro	ME	Suriname	SR
Benin	BJ	Greenland	GL	Montserrat	MS	Svalbard and Jan Mayen	SJ
Bermuda	BM	Grenada	GD	Morocco	MA	Swaziland	SZ
Bhutan	BT	Guadeloupe	GP	Mozambique	MZ	Sweden	SE
Bolivia, Plurinational State of	ВО	Guam	GU	Myanmar	MM	Switzerland	CH
Bonaire, Sint Eustatius and Saba	BQ	Guatemala	GT	Namibia	NA	Syrian Arab Republic	SY
Bosnia and Herzegovina	BA	Guernsey	GG	Nauru	NR	Taiwan, Province of China	TW
Botswana	BW	Guinea	GN	Nepal	NP	Tajikistan	TJ
Bouvet Island	BV	Guinea-Bissau	GW	Netherlands	NL	Tanzania, United Republic of	TZ
Brazil	BR	Guyana	GY	New Caledonia	NC	Thailand	TH
British Indian Ocean Territory	Ю	Haiti	HT	New Zealand	NZ	Timor-Leste	TL
Brunei Darussalam	BN	Heard Island and McDonald Islands	HM	Nicaragua	NI	Togo	TG
Bulgaria	BG	Holy See (Vatican City State)	VA	Niger	NE	Tokelau	TK
Burkina Faso	BF	Honduras	HN	Nigeria	NG	Tonga	TO
Burundi	BI	Hong Kong	HK	Niue	NU	Trinidad and Tobago	TT
Cabo Verde	CV	Hungary	HU	Norfolk Island	NF	Tunisia	TN
Cambodia	KH	Iceland	IS	Northern Mariana Islands	MP	Turkey	TR
Cameroon	CM	India	IN	Norway	NO	Turkmenistan	TM
Canada	CA	Indonesia	ID	Oman	OM	Turks and Caicos Islands	TC
Cayman Islands	KY	Iran, Islamic Republic of	IR	Pakistan	PK	Tuvalu	TV
Central African Republic	CF	Iraq	IQ	Palau	PW	Uganda	UG
Chad	TD	Ireland	IE	Palestine, State of	PS	Ukraine	UA
Chile	CL	Isle of Man	IM 	Panama	PA	United Arab Emirates	AE
China	CN	Israel	IL.	Papua New Guinea	PG	United Kingdom	GB
Christmas Island	CX	Italy	IT	Paraguay	PY	United States	US
Cocos (Keeling) Islands	CC	Jamaica	JM	Peru	PE	United States Minor Outlying Islands	UM
Colombia	CO	Japan	JP	Philippines	PH	Uruguay	UY
Comoros	KM	Jersey	JE	Pitcairn	PN	Uzbekistan	UZ
Congo	CG	Jordan	JO	Poland	PL	Vanuatu	VU
Congo, the Democratic Republic of the	CD	Kazakhstan	KZ	Portugal	PT	Venezuela, Bolivarian Republic of	VE
Cook Islands	CK	Kenya	KE	Puerto Rico	PR	Viet Nam	VN
Costa Rica	CR	Kiribati	KI	Qatar	QA	Virgin Islands, British	VG
Cote d'Ivoire !Côte d'Ivoire	CI	Korea, Democratic People's Republic of	KP	Reunion !Réunion	RE	Virgin Islands, U.S.	VI
Croatia	HR	Korea, Republic of	KR	Romania	RO	Wallis and Futuna	WF
Cuba	CU	Kuwait	KW	Russian Federation	RU	Western Sahara	EH
Curacao !Curaçao	CW	Kyrgyzstan	KG	Rwanda	RW	Yemen	YE
Cyprus	CY	Lao People's Democratic Republic	LA	Saint Barthelemy !Saint Barthélemy	BL	Zambia	ZM
Czech Republic	CZ	Latvia	LV	Saint Helena, Ascension and Tristan da Cunha	SH	Zimbabwe	ZW
Denmark	DK	Lebanon	LB	Saint Kitts and Nevis	KN		
Djibouti	DJ	Lesotho	LS	Saint Lucia	LC		
Dominica	DM	Liberia	LR	Saint Martin (French part)	MF		

Annexure 1

FATCA-CRS Self Certification Form Individual New Accounts



(To be collected from each holder)

1	Name of the account holder
2	Aadhaar number (optional)
3	Nationality
4	City of birth
5	Country of birth
ô	Occupation Type (Services, Business, Others - Please specify)
7	Residence address for tax purposes (include City, State, Country & Pin code)
	Same as Overseas Address (Please tick anyone)
3	Address Type Residential Business Registered Office (Please tick anyone)
Э	Tax residence declaration – please tick any one, as applicable to you.
	I am a tax resident of India and not resident of any other country
	I am a tax resident of the country/ies mentioned in the table below
	Please indicate ALL the countries in which you are a resident for tax purposes and the associated Tax ID Number below:
	Country [#] Tax Identification Number [%] Identification Type (TIN or Other [%] , please specify)
	# To also include USA, where the individual is a citizen/green card holder of USA
	% In case Tax Identification Number is not available, kindly provide functional equivalent \$
	\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers.
	If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.
	Declaration
	I, holder of passport number residing at hereby declare that: I am neither a
	citizen of USA nor a resident of USA for tax purposes despite being my place of birth is in USA (by persons having U S birthplace, but not a U S
	citizen/tax resident)
	OR
	I am neither a citizen of USA nor a tax resident of any country other than India even though
	a) My residence/mailing address/telephone number is of a country other than India
	 b) I have a standing instruction to an account maintained outside India (By persons having foreign country indicia, but are tax residents of India)
	Certification
	I/We have understood the information requirements of this Form (read a long with the FATCA/CRS Instructions) and hereby confirm that the
	information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the FATCA CRS
	Terms and conditions below and hereby accept the same.
	Name
	Signature
	Signature

FATCA-CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with IDFC FIRST Bank or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.



INSTRUCTIONS/CHECK LIST FOR FILLING KYC FORM

A IMPORTANT POINTS:

- 1 Self attested copy of PAN card is mandatory for all clients, including Promoters/Partners/Karla/Trustees and whole time directors and persons authorised to deal in securities on behalf of company/firm/ others
- 2 Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorised for attesting the documents, as per the below mentioned list.
- 3 If any proof of identity or address is in a foreign language, then translation into English is required.
- 4 Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- If correspondence & permanent address are different, then proofs for both have to be submitted.
- 6 Sole proprietor must make the application in his individual name & capacity.
- 7 For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIO Card/OCI Card and overseas address proof is mandatory.
- 8 For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- 9 In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 10 For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/ Mark sheet issued by Higher Secondary Board/Passport of Minor/ Birth Certificate must be provided.
- 11 Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government judicial/military officers, senior executives of state owned corporations, important political party officials, etc.
- B Proof of Identity (POI): List of documents admissible as Proof of Identity:
- Unique Identification Number (UID) (Aadhaar)/Passport/Voter ID card/Driving license.
- 2 PAN card with photograph.
- 3 Identity card/document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI,ICSI, Bar Council etc., to their Members; and Credit cards/ Debit cards issued by Banks.
- C Proof of Address (POA): List of documents admissible as Proof of Address:
- 1 (*Documents having an expiry date should be valid on the date of submission.)

Passport/Voters Identity Card/Ration Card/Unique Identification Number (UID)/Aadhar Letter/Registered lease or Sale Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

- 2 Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill-Not more than 3 months old.
- 3 Bank Account Statement Passbook-Not more than 3 months old.
- 4 Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- 5 Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/ Multinational Foreign Banks/Gazetted Officer/Notary public/Elected representatives to the Legislative Assembly/ Parliament Documents issued byany Govt. or Statutory Authority.
- 6 Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.,to their Members
- 7 For Fii/sub account, Power of Attorney given by Fii/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
- 8 The proof of address in the name of the spouse may be accepted.

D Exemptions/clarifications to PAN

(*Sufficient documentary evidence in support of such claims to be collected.)

- 1 In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
- 2 Investors residing in the state of Sikkim.
- 3 UN entities/multilateral agencies exempt from paying taxes/filling tax returns in India.
- 4 SIP of Mutual Funds upto Rs 50,000/-p.a.
- 5 In case of institutional clients, namely, Flis, MFs, VCFs, FVCls, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E List of people authorised to attest the documents:

- 1 Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- 2 In case of NRIs, authorised officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.