DORMANT ACCOUNT ACTIVATION FORM



(Only for Resident Individual customers)

Please fill the form in Black Ink and in CAPITAL LETTERS.	Date Date							
Account Number D D M M Y Y Y Y								
Reason for not transacting / dormancy:								
I/We hereby request you to activate my/our account, basis the following documents								
PRIMARY HOLDER DETAILS								
Customer ID CKYC ID (If applicable)								
Customer Name								
Aadhaar No.								
Voter ID Driving License Passport National Population Register (NPR) Expiry Date Expiry Date Expiry Date								
PERMANENT ADDRESS								
I wish to change my permanent address	o change in my permanent address							
Aadhaar Passport Driving License Voter ID	NREGA NPR							
Line 1 Line 2 Landmark (If any) City State	Pin Code							
COMMUNICATION / MAILING ADDRESS								
	is no change in my mailing address							
	of work							
Line 1 Line 2 Line 2 Landmark (If any) City State	Pin Code							
TELL US WHAT YOU DO FOR A LIVING								
1) Occupation (Select Anyone) 1a) Salaried (Select Anyone) Corporate Name Doctor CA Architect Lawyer Consultant Professional Alternate Medical Practitioner Beautician Others 1c) Self Employed Business Sole Proprietorship Partnership/Company No. of years in busines 1d) Any other Occupation Homemaker Retired Farmer Politician 2) Source of Income Salary Business Professional Fees Investments	Entertainment ess							
FATCA DETAILS								
Place of Birth Country of Birth Country of Ta For Tax Residents of countries in addition to India, please complete below: Country of Tax Residence Foreign Tax Identification Number TIN Issuing Country of Tax Residence								



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Customer Name																										
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Driving License															Ε	xpir	y Da	ate	D	D	1	М		Υ	Y	Y
Passport															Е	xpir	y Da	ate	D	D	1	М]	Υ	Y	Y
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1) Occupation (Selec	ct Anyone)																									
1a) Salaried (Select	Anyone)	P	ublic		Priva	te		G	over	nm	ent															
Corporate Name																										
1b) Self Employed		Doct	or [CA	\ <u> </u>		Archite	ct] L:	awy	er			Co	nsu	ltant		E	ntert	ainme	ent			
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1d) Any other Occup	oation	Hom	nemaker			F	Retire	d		Fa	rme	er		F	Polit	icia	n		Stu	ıden	t		Min	or		
2) Source of Income		Sala	ry 🔲	Busine	ess	F	Profes	ssior	nal F	ees	S		li	nves	stm	ents			Agric	ultu	re		Far	nily \	Nea	alth
3) Gross Annual Inco	ome (INR)																									
Please submit the	GST annexu	ire if yo	ou are r	egiste	ered c	or e	xem	ot u	nde	r G	ST															
4) Are you a PEP	or related t	o one?	, 🗌 J	'es		No																				
*Definition: Politically Exposed Persons (PEPs): Politically exposed persons are individuals who are or have been entrusted with prominent public functions by a country. Examples of PEPs include, but not limited to: (i) Heads of States or of Governments (ii) Senior politicians (iii) Senior government / judicial / military officers (iv) Senior executives of state-owned corporations (v) Important political party officials (vi) Senior Indian Diplomatic personnel posted outside the country. The term PEP also includes the families and close associates of the PEPs mentioned above.																										
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For Tax Residents o		addition	n to India												_											
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DECLARATION & SIGNATURE(S)

- I/We, the undersigned, have read, understood and agree to absolutely and unconditionally abide by and be bound by the Terms and Conditions displayed on website www.idfcfirstbank.com as revised from time to time by IDFC FIRST Bank Limited. In relation to all of my/ our accounts, for present and future, maintained/opened/to be maintained/ to be opened with IDFC FIRST Bank Limited.
- I certify that I have declared my status as per applicable FATCA / CRS rules in India as notified by Government of India / Central board of Direct Taxes (CBDT) / Reserve Bank of India (RBI) in this regard.
- 3. I certify that the information stated in this form and supporting documentary evidence provide by me is to the best of my knowledge and belief true, correct and complete and that I have not withheld any material information / document that may affect the assessment/ categorization of the account at a US Reportable account/ Other Reportable account or otherwise.
- 4. I understand, acknowledge and authorize that as per the provision 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.
- 5. I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in this form and signed by me as well as in the documentary evidence provided by me or if any certification become incorrect.
- 6. 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.
- 7. 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.
- 8. 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 forthwide and provide the bank with all information/ documents that may be necessary for any proceeding before GOI/RBI/ Income Tax Authorities.
- 9. I/We state, declare, confirm and agree that the Bank has duly explained to me/us that submission of a copy of my / our Proof of Possession of Aadhaar Number (OVD) containing Aadhaar number, as an Officially Valid Document (OVD) is not mandatory and I/We have the option to submit any one of the documents as per the list of Officially Valid Documents (updated by the RBI from time to time).
- 10. I/We further state, declare and confirm that I am/ We are providing my/ our Proof of Possession of Aadhaar number (OVD) as an officially valid document voluntarily in accordance with extant rules and regulations; I/ We authorize IDFC FIRST Bank to redact/blacken out the Aadhaar number through appropriate means on my / our behalf ".
- 11. I hereby authorise IDFC FIRST Bank and its vendors to access my Aadhaar number and fetch my details. I understand that IDFC FIRST Bank and its vendors will not be storing or sharing the same in any manner.
- 12. I/We hereby consent Bank to report my KYC at CERSAI as and when it's required.

Customer has signed in my presence.

13. I/We hereby consent to receive CKYC related information from Central KYC Registry and Bank through SMS and/or Email.

I/We hereby give my/ our consent to download my/ our KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my/ our identify and address from the database of CKYCR Registry. I/We understand that my / our KYC Record includes my / our KYC Record includes my/ our KYC Records / Personal information such as my name, address, date of birth, PAN number etc.

PRIMARY HOLDER SIGNATURE	JOINT HOLDER SIGNATURE
Name	Name
WITNESS 1	WITNESS 2
(Required only if applicants use thumb impressions)	(Required only if applicants use thumb impressions)
F	OR BANK USE ONLY
Service Request No. Employee ID	
Name of the Branch Official	Signature of the Branch Official
I have seen and verified the original OVD docume	ents submitted by the customer.