

**Annexure A - Request for dormant account activation and
update of Re-KYC (Resident Individual Customer)**

Date : / / Service Request No:

PART A – Dormant Account Activation:

Account Number/s:

Dear Sir / Madam,

I / We, holder/s of above-mentioned Account/s with your Bank, request you to activate my / our Account, which is in Dormant status. The Reason for no operations in the account: _____

I/We confirm enclosing Self-attested copy of Officially Valid Documents (Identity and Address proof) for account holder/s.

I / We hereby confirm that there is no change in the contact details updated in bank records. Please activate the account basis documents submitted.

OR

I / We hereby request you to update the contact details as mentioned in PART B & activate the account. I understand that only contact details will be updated however rekyc will not be updated.

OR

I / We hereby request you to update the contact details and / or with Re-KYC as mentioned in PART B and activate the account.

Customer Name: _____
(Account Holder 1) (Account Holder 2)

Customer Signature/s: _____
(Account Holder 1) (Account Holder 2)

PART B – Re-KYC (updatation of KYC information):
Details for Account Holder-1
Section A – Personal:

 CRN:

 Customer Name:

 Latest photograph
 (Mandatory)

Section B – Occupation & Income:

Occupation	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Politician <input type="checkbox"/> Others please specify _____
Annual income (Rs.)	Name of organization & designation (if salaried) Nature of business activity (if self- employed)

Section C – Address & contact details:

- There is no change in my contact details / mailing address. Attached herewith are the KYC documents for the purpose of Re-KYC updatation.
- I wish to change my mailing address / contact details in the bank records. Attached herewith are the KYC documents matching with the new details for the purpose of Re-KYC.

Section D – To be filled ONLY IF THERE IS A CHANGE in the mailing address or contact details:

Please update the following information in your records. I have provided identity / address proof for the same.

For updating New Address (provide Address Proof Document)

Address:

City: Pin-code:

State: Country:

For updating New Mobile Number / Email id (provide Identity Proof Document)

Mobile No.: –

Email ID

 Customer's Sign
 (in case of change in contact details)

Section E – FATCA / CRS Declaration:

Part A			
		Yes	No
a.	Are you citizen of any country other than India (dual / multiple [including Green card])	<input type="checkbox"/>	<input type="checkbox"/>
b.	Is your Country of birth is any country other than India	<input type="checkbox"/>	<input type="checkbox"/>
c.	Are you Tax resident of ANY country / ies other than India	<input type="checkbox"/>	<input type="checkbox"/>
d.	Do you have POA or a man date holder who has an address outside India	<input type="checkbox"/>	<input type="checkbox"/>
e.	Is your Address or telephone number outside India	<input type="checkbox"/>	<input type="checkbox"/>
If your answer to any of the above questions is a 'YES', please fill Part B			

Part B		
*Address for Tax Residence _____		
		*City _____
*Country of Birth _____	Place within the Country of Birth _____	
<small>(In case Country of Birth is USA, however Nationality and Country of Tax Residency is other than USA, please provide documentary evidence)</small>		
Source of Wealth _____	Nationality _____	
<small>Please List below the details, confirming ALL countries of tax residency/ permanent residency/ citizenship and ALL Tax Identification Numbers.</small>		
*Country of Tax residency	Tax identification Number ¹	Tax identification Document (TIN or functional equivalent)
<small>¹It is mandatory to supply a TIN or functional equivalent (in case TIN not available) if the country in which you are tax resident issues such identifiers. If no TIN / functional equivalent is yet available or has not yet been issued, please provide an explanation below.</small>		

I, _____ being the beneficial owner of the account opened / to be opened with Kotak Mahindra Bank Limited and the income credited therein, declare that the above information and information in the submitted documents to be true, correct and updated, and the submitted documents are genuine and duly executed.

I acknowledge that towards compliance with tax information sharing laws, such as FATCA / CRS, the Bank may be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from the account holder. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if the Bank does not receive a valid self-certification from me) the Bank may be obliged to share information on my account with relevant tax authorities. Should there be any change in any information provided by me I ensure that I will intimate the Bank promptly, i.e., within 30 days.

Towards compliance with such laws, the Bank 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. As may be required by domestic or overseas regulators/ tax authorities, the Bank may also be constrained to withhold and pay out any sums from my account or close or suspend my account(s).

I also understand that the account will be reported if any one of the aforesaid FATCA / CRS criteria for any of the account holders i.e., primary or joint are met.

I understand that any inaccurate, incomplete or false disclosure of statement of financial transaction or reportable account by me would lead to penal consequence on the Bank under applicable law. The Bank shall be entitled to take any necessary action and recover from me such amount levied due to such inaccuracy, incompleteness or false disclosure. I shall indemnify the Bank in respect of all or any liabilities incurred by Bank, by reason of any of the information or particulars given by me, being incorrect or false or being suppressed or omitted.

Details for Account Holder-2
Section A – Personal:

 CRN:

 Customer Name:

Latest photograph (Mandatory)

Section B – Occupation & Income:

Occupation	<input type="checkbox"/> Salaried <input type="checkbox"/> Self Employed <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Politician <input type="checkbox"/> Others please specify _____				
Annual income (Rs.)	Name of organization & designation (if salaried)	Nature of business activity (if self- employed)			

Section C – Address & contact details:

- There is no change in my contact details/ mailing address. Attached herewith are the KYC documents for the purpose of Re-KYC updation.
- I wish to change my mailing address/contact details in the bank records. Attached herewith are the KYC documents matching with the new details for the purpose of Re-KYC.

Section D – To be filled ONLY IF THERE IS A CHANGE in the mailing address or contact details:

Please update the following information in your records. I have provided identity / address proof for the same.

For updating New Address (provide Address Proof Document)

Address:

City: Pin-code:

State: Country:

For updating New Mobile Number / Email id (provide Identity Proof Document)

Mobile No.: -

Email ID

Customer's Sign
(in case of change in contact details)

Section E – FATCA / CRS Declaration:

Part A			
		Yes	No
a.	Are you citizen of any country other than India (dual / multiple [including Green card])	<input type="checkbox"/>	<input type="checkbox"/>
b.	Is your Country of birth is any country other than India	<input type="checkbox"/>	<input type="checkbox"/>
c.	Are you Tax resident of ANY country / ies other than India	<input type="checkbox"/>	<input type="checkbox"/>
d.	Do you have POA or a man date holder who has an address outside India	<input type="checkbox"/>	<input type="checkbox"/>
e.	Is you Address or telephone number outside India	<input type="checkbox"/>	<input type="checkbox"/>

If your answer to any of the above questions is a 'YES', please fill Part B

Part B		
*Address for Tax Residence _____		
		*City _____
*Country of Birth _____	Place within the Country of Birth _____	
<small>(In case Country of Birth is USA, however Nationality and Country of Tax Residency is other than USA, please provide documentary evidence)</small>		
Source of Wealth _____	Nationality _____	
<small>Please List below the details, confirming ALL countries of tax residency/ permanent residency/ citizenship and ALL Tax Identification Numbers.</small>		
<small>☞</small> *Country of Tax residency	Tax identification Number ²	Tax identification Document (TIN or functional equivalent)
<small>¹It is mandatory to supply a TIN or functional equivalent (in case TIN not available) if the country in which you are tax resident issues such identifiers. If no TIN / functional equivalent is yet available or has not yet been issued, please provide an explanation below.</small>		

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Towards compliance with such laws, the Bank 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. As may be required by domestic or overseas regulators/ tax authorities, the Bank may also be constrained to withhold and pay out any sums from my account or close or suspend my account(s).

I also understand that the account will be reported if any one of the aforesaid FATCA / CRS criteria for any of the account holders i.e., primary or joint are met.

I understand that any inaccurate, incomplete or false disclosure of statement of financial transaction or reportable account by me would lead to penal consequence on the Bank under applicable law. The Bank shall be entitled to take any necessary action and recover from me such amount levied due to such inaccuracy, incompleteness or false disclosure. I shall indemnify the Bank in respect of all or any liabilities incurred by Bank, by reason of any of the information or particulars given by me, being incorrect or false or being suppressed or omitted.

I / We, do hereby solemnly declare, that the information provided above with respect to my / our account is true, correct and complete and the said details may be updated in the Bank records.

Signature of the First Holder

Signature of the Second Holder

Name: _____

Name: _____

***Note:** In case of more than 2 holders, please attach additional form.

Customer Acknowledgement Copy: (Applicable if submitted at the branch)

Service Request No: _____

Acknowledgement date: / /

Signature of the Bank Official: _____