

## Annexure-C - Request for dormant account activation and updation of Re-KYC (Non- Resident Customer)

Date :		Service Request No.:
	PART A – Dormant Account activation:	
Accou	unt Number/s:	
	Sir / Madam, e, holder/s of above-mentioned Account/s with yo	our Bank, request you to activate my / our Account, which is in
	nant status. The Reason for no operations in the	
I/We	confirm enclosing Self-attested copy of Officially	Valid Documents (Identity and Address proof) for account holder/s.
	/ We hereby confirm that there is no change activate the account basis documents submitted.	in the contact / personal details updated in bank records. Please  OR
	/ We hereby request you to update the profile understand that only contact details will be update	/ personal details as mentioned in PART B & activate the account. I ted however rekyc will not be updated.
		OR
	activate the account.	/personal details and / or with Re-KYC as mentioned in PART B and
Custo	omer Name:(Account Holder 1)	(Account Holder 2)
Custo	omer Signature/s: (Account Holder 1)	(Account Holder 2)
	( /	,



Name (in CAPITAL LETTERS)

Name of Organization (if employed)
Permanent Account Number (PAN)

Annual Income (INR)

Address

## PART B - Re-KYC (updation of KYC information): **Details of Account Holder-1** CRN: **Customer Name: Profile / Personal Details:** There is no change in my profile. Attached herewith are the KYC documents for the purpose of Re-KYC updation. I wish to update my profile details as mentioned below. Attached herewith are the KYC documents matching with the new details for the purpose of Re-KYC. **Change in Profile / Personal Details:** Please update the following information in your records. Also enclosed is the self-attested copy of my Passport and VISA / Permit / OCI / PIO Note: For mariners, in case the VISA / Permit is not available, CDC Booklet and Indian/Merchant Navy declaration to be provided. Name (in CAPITAL LETTERS) **Passport Details Passport Number** Date of Issue Date of Expiry **VISA Details** VISA Type Date of Issue Date of Expiry Occupation If self-employed / businessman, please specify nature of business

**Note:** For updating mobile number / email address, separate request has to be submitted.



## FATCA / CRS Declaration:

ГА	TCA / CR3 Declaration:				
	Part A			Part B	
	A control of the cont	Yes	No	*Address for Tax Residence	
a.	Are you citizen of any country other than India (dual / multiple [including Green card]			Address for tax residence	*City
b.	Is your Country of birth is any country other than India			*Country Place within the of Birth————————————————————————————————————	
C.	Are you Tax resident of ANY country / ies			(In case Country of Birth is USA, however Nationality and Country of Tax Residency is other th	
	other than India			Source of Wealth Natior  Please List below the details, confirming ALL countries of tax residency/ permanent residency/	
d.	Do you have POA or a man date holder who has an address outside India			*Country of Tax identification Number*	Tax identification Document (TIN or functional equivalent)
e.	Is you Address or telephone number outside India			'It is mandatory to supply a TIN or functional equivalent (in case TIN not available) if the such identifiers. if no TIN / functional equivalent is yet available or has not yet been ssu	country in which you are tax resident issues ued, please provide an explanation below:
	If your answer to any of the above questions is a 'YES',plea	ase fill Part I	В		
Towa any p my a I also I und shall by Ba	ccount(s). understand that the account will be reported if any one of the afores.	aid FATCA/( nent of finan nount levied	CRS criteria for icial transactio due to such in	n or reportable account by me would lead to penal consequence on the B accuracy, incompleteness or false disclosure. I shall indemnify the Bank in re	
	stomer Name: FIRSTNAME  ofile/Personal Details:	MI	D D L	ENAMESURNAMÉ	Latest photograph (Mandatory)
	•	ached h	arawith	are the KYC documents for the purpose of	Re-KYC undation
		s menti		low. Attached herewith are the KYC docur	•
	ange in Profile/Personal Details: ase update the following information in your	records.	Also encl	osed is the self-attested copy of my Passport and	VISA / Permit / OCI / PIO
No	te: For mariners, in case the VISA / Permit i	s not av	ailable, C	DC Booklet and Indian / Merchant Navy declar	ration to be provided.
Ν	lame (in CAPITAL LETTERS)				
P	assport Details				
Р	assport Number				
D	ate of Issue				
D	ate of Expiry				
٧	ISA Details				
٧	ISA Type				
D	ate of Issue				
D	ate of Expiry				
C	Occupation			oloyed/businessman, ecify nature of business	



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Annual Income (INR)  Name of Organization (if employed)						
Permanent Account Number (PAN)						
Address						
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ote: For updating mobile number / emai	il address	s, separa	te request has to be so	ubmitted.		
ATCA / CRS Declaration:				Dovid D		
Part A	Yes	No		Part B		
Are you citizen of any country other than India (dual/multiple [including Green card]			*Address for Tax Residence	2	*Citv	
o. Is your Country of birth is any country other than India				untry Place within the rth————————————————————————————————————		
Are you Tax resident of ANY country / ies other than India			Source of Wealth	country of Birth is USA, however Nationality and Country of Tax Residency is other than USA, please provide documentary evidence)  Ce of Wealth  Nationality  List below the details, confirming ALL countries of tax residency/ permanent residency/ citizenship and ALL Tax Identification Numbers.		
d. Do you have POA or a man date holder who has an address outside India			*Country of Tax residency	Tax identification Number <sup>5</sup>	Tax identification Document (TIN or functional equivalent)	
e. Is you Address or telephone number outside India  If your answer to any of the above questions is a 'YES',ple				tional equivalent (in case TIN not available) if the equivalent is yet available or has not yet been iss		
wards compliance with such laws, the Bank may also be required to py proceeds in relation thereto. As may be required by domestic or over account(s). so understand that the account will be reported if any one of the afore nderstand that any inaccurate, incomplete or false disclosure of state all be entitled to take any necessary action and recover from me such a Bank, by reason of any of the information or particulars given by me, but have, the contract of the processor of the information or particulars given by me, but have, the contract of the processor of the processor of the information or particulars given by me, but have the processor of	esaid FATCA/C ement of financ amount levied c being incorrect	RS criteria for a cial transaction due to such ina or false or bein	any of the account holders i.e., primar n or reportable account by me would accuracy, incompleteness or false discl g suppressed or omitted.	y or joint are met. lead to penal consequence on the f osure. I shall indemnify the Bank in r	Bank under applicable law. The Ba respect of all or any liabilities incurr	
Il intimate the Bank promptly, i.e., within 30 days.  wards compliance with such laws, the Bank may also be required to p y proceeds in relation thereto. As may be required by domestic or ove y account(s).  so understand that the account will be reported if any one of the afore nderstand that any inaccurate, incomplete or false disclosure of state all be entitled to take any necessary action and recover from me such a Bank, by reason of any of the information or particulars given by me, b  / We, do hereby solemnly declare, that and complete and the said details may be	esaid FATCA/C rment of financ mount levied o being incorrect the infor	RS criteria for a cial transaction due to such ina or false or bein	any of the account holders i.e., primar or reportable account by me would ccuracy, incompleteness or false discling suppressed or omitted.  Drovided above with rank records.	y or joint are met. lead to penal consequence on the f osure. I shall indemnify the Bank in r	Bank under applicable law. The Barespect of all or any liabilities incurrence of the second sec	
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wards compliance with such laws, the Bank may also be required to p y proceeds in relation thereto. As may be required by domestic or ow y account(s). Iso understand that the account will be reported if any one of the afore nderstand that any inaccurate, incomplete or false disclosure of state all be entitled to take any necessary action and recover from me such a Bank, by reason of any of the information or particulars given by me, to the such a Bank, by reason of any of the solemnly declare, that and complete and the said details may be sugnature of the First Holds.  Signature of the First Holds  Name:  *Note: In case of more than 2 holders, pl	esaid FATCA/C rment of financ mount levied o eing incorrect the infor updated ease atta	RS criteria for a cial transaction flue to such ina or false or bein remation produced in the E	any of the account holders i.e., primar or reportable account by me would ccuracy, incompleteness or false discling suppressed or omitted.  Drovided above with resank records.	yor joint are met. lead to penal consequence on the fosure. I shall indemnify the Bank in r espect to my / our a	Bank under applicable law. The Barespect of all or any liabilities incurrence count is true, corre	