

Bank use only Face to Face Non Face to Face

Application Date DD MM YYYY

KYC Number

I/we hereby request you to convert my resident a/c to NRO a/c as I have become NRI. My a/c is in Branch code in city.

A) APPLICANT'S NAME (SAME AS ID PROOF) (Below name combination / holding pattern will be applicable for all the product/s opted for in this application form)

APPL	PREFIX	FIRST NAME	MIDDLE NAME	SURNAME
1st		I N C A P I T A L	L E T T E R S	O N L Y
Maiden Name		I N C A P I T A L	L E T T E R S	O N L Y
2nd		I N C A P I T A L	L E T T E R S	O N L Y
Maiden Name		I N C A P I T A L	L E T T E R S	O N L Y

B) OPERATING INSTRUCTION (Below operating instruction will be applicable for all the product/s opted for in this application form)

NRO Account Single Either / Anyone or survivor Former or survivor Minor under Guardian Jointly (ATM / Debit card not issued)

The mode of operation on the account will be changed to "Former or Survivor" in case the Primary applicant's residential status has changed to NRI and joint applicant is residential status is still Resident.

C) FIRST APPLICANT'S DETAILS

***Residential Status** NRI PIO/OCI Date of Birth DD MM YYYY Applicant Type **Minor** Y N ***Marital Status** Married Unmarried Other

***Spouse's Name**

Existing Cust Id ***Passport No.** ***Passport Expiry Date** DD-MM-YYYY **Do you hold an AADHAR Number?** Yes No

%PAN No. **Visa Type** **Visa Expiry Date** DD-MM-YYYY **Aadhaar No**

%If PAN not available, kindly attach Form 60 **I Confirm that I do not have any existing customer ID/ Customer IDs apart from the one mentioned above. In case found otherwise, Bank reserves the right to consolidate the customer IDs as it may decide without any prior notice to me.**

***Mother's Maiden Name** ***Father's Name**

****Country / ies of Tax Residency (Outside India)** 1- 2- ***City of birth** ***Country of birth**

***Nationality** 1- 2- ***Tax Id No. (TIN) For tax resident of other country than India** 1- 2- ***TIN Type** 1- 2-

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

Choice of Correspondence Indian Address Overseas Address (If not ticked, correspondence will be sent to Overseas address) **Attached Address Proof of** Indian Address Overseas Address

Flat No & Bldg. Name Landmark City State Country PIN Code

***Name of Proof of Address** Passport Driving License UID (Aadhar) Voter ID NREGA Job Card Others

***Address Type** Residence Business Residential and Business Registered Office Please tick if Address for Tax purpose is other than correspondence address

Please mention a prominent landmark to ensure that the deliverables reach you

Flat No & Bldg. Name Landmark City State Country PIN Code

***Address Type** Residence Business Residential and Business Registered Office I confirm that I do not have any Indian Address

Please mention a prominent landmark to ensure that the deliverables reach you

***E-mail ID** I N C A P I T A L L E T T E R S O N L Y **Monthly email statement will be sent to the above e-mail id. All accounts linked to Cust ID of 1st Applicant will be registered for Free Email Statements.** **Kindly DO NOT Mention any special character like '+' before the country code**

Country code Area code Phone Number **(OTP will be sent to this mobile number)**

***Mobile No.** **Please register me for Insta Alert** SMS E-MAIL

Tel (R) Tel (O) N U M B E R - E X T N

Source of funds Salary Business income Agriculture Investment income Others

Occupation Salaried Self-employed Retired Self-employed Professional Housewife Student Unemployed Others

Mariner First Time Visitor Minor Senior Citizen

If salaried employed with Private ltd Partnership Proprietorship Public limited Public sector Government Multinational Others

Self employed professional Doctor CA Lawyer Architect IT consultant Others

Self employed since Years Months **Date of incorporation** DD MM YYYY

Nature of business Manufacturing Service provider Agriculture Stock broker Trader Real estate Others

Type of company/firm Sole proprietorship Partnership Public ltd co. Private ltd co. Others

Residence Type Owned Rented /Lease Ancestral / Family Company provided

TO BE FILLED MANDATORILY BY ALL APPLICANTS

Name of currency **Mention the foreign currency which you are earning** **TO BE FILLED MANDATORILY BY ALL APPLICANTS**

Gross annual income (₹) < 50K 50K - 1 L 1 - 3 L 3 - 5 L 5 - 7.5 L 7.5 - 10 L 10 - 15 L 15 - 25 L 25 - 50 L 50 L - 1 CR >1 CR

D) SECOND APPLICANT'S DETAILS

PERSONAL DETAILS

(Addition of Related Person) KYC Number of Related Person (if available)

Date of Birth Applicant Type Minor Guardian *Marital Status Married Unmarried Other

*Residential Status NRI PIO/OCI Resident (F/S) *Spouse's Name

Existing Cust Id I confirm that I do not have any existing customer ID/ Customer IDs apart from the one mentioned above. In case found otherwise, Bank reserves the right to consolidate the customer IDs as it may decide without any prior notice to me.

%PAN No. *If PAN not available, kindly attach Form 60 VISA Type VISA Expiry Date DD-MM-YYYY

Document Type Passport Driving License Aadhaar Card Voter Card NREGA Job Card

Document Number Document Expiry Date DD-MM-YYYY

Do you hold an AADHAR Number? Yes No

Mother's Maiden Name Father's Name

**Country / ies of Tax Residency 1- 2- *City of birth

*Nationality 1- 2- *Country of birth

**Tax Id No. (TIN) For 1- 2- *TIN Type 1- 2-

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

OVERSEAS ADDRESS

Choice of Correspondence Indian Address Overseas Address (If not ticked, correspondence will be sent to Overseas address)

Attached Address Proof of Indian Address Overseas Address

Flat No & Bldg. Name

Landmark

City State

Country PIN Code

*Address Type Residence Business Residential and Business Registered Office Please tick if Address for Tax purpose is other than correspondence address

Name of Proof of Address Passport Driving License UID (Aadhar) Voter ID NREGA Job Card Others

Please mention a prominent landmark to ensure that the deliverables reach you

INDIAN ADDRESS

Flat No & Bldg. Name

Landmark

City PIN Code

State Country I N D I A

*Address Type Residence Business Residential and Business Registered Office I confirm that I do not have any Indian Address

Please mention a prominent landmark to ensure that the deliverables reach you

CONTACT DETAILS

*E-mail ID IN CAPITAL LETTERS ONLY

Monthly email statement will be sent to the above e-mail id. All accounts linked to Cust ID of 1st Applicant will be registered for Free Email Statements.

Country code Area code Phone Number

*Mobile No. (OTP will be sent to this mobile number)

Tel (R) Please register me for Insta Alert SMS E-MAIL

Tel (O) NUMBER - EXT N

Kindly DO NOT Mention any special character like '+' before the country code

OCCUPATIONAL AND INCOME DETAILS

Source of funds Salary Business income Agriculture Investment income Others

Occupation Salaried Self-employed Retired Self-employed Professional Housewife Student Unemployed Others

Mariner First Time Visitor Minor Senior Citizen

If salaried employed with Private ltd Partnership Proprietorship Public limited Public sector Government Multinational Others

Self employed professional Doctor CA Lawyer Architect IT consultant Others

Self employed since Years Months

Date of incorporation DD-MM-YYYY

Nature of business Manufacturing Service provider Agriculture Stock broker Trader Real estate Others

Type of company/firm Sole proprietorship Partnership Public ltd co. Private ltd co. Others

Residence Type Owned Residence Type Ancestral / Family Company provided

BY ALL APPLICANTS TO BE FILLED MANDATORILY

Name of currency Mention the foreign currency which you are earning **TO BE FILLED MANDATORILY BY ALL APPLICANTS**

Gross annual income (₹) < 50K 50K - 1 L 1 - 3 L 3 - 5 L 5 - 7.5 L 7.5 - 10 L 10 - 15 L 15 - 25 L 25 - 50 L 50 L - 1 CR > 1 CR

E) PEP DECLARATION

Politically exposed persons are individuals who are or have been entrusted with prominent public functions in a foreign country. Example of 'PEPs' include, but not limited to: 1-Heads of States or of Governments, 2-Senior Politicians, 3-Senior Government/Judicial/Military Officer, 4-Senior Executives of state owned corporations, 5-Important political party officials, 6-Senior Indian Diplomatic posted outside the country. The term PEP also includes the families & close associates of the PEPs mentioned above. Families: The term families includes close family members such as spouses, children, parents and siblings and may also include other blood relatives and relatives by marriage. Close associates: The term closely associated persons in the context of PEPs includes close business colleagues and personal advisors/consultants to the PEP as well as persons who obviously being significantly from being close to such a person. PEPs also include persons who are not currently falling under the above criteria but were doing so at any given point in time within the last one year.

Please tick Yes / No: 1st applicant Politically Exposed Yes No 2nd applicant Politically Exposed Yes No

I understand that my existing international debit card linked to my existing account will be hotlisted.

Reissuance of card

I hereby request to Issue ATM Card (Card Code - RTAN0) Issue NRO Domestic Debit Card (Card Code - RCA01) Do not issue any card

Only 1 debit card will be issued and will be linked against all the accounts being converted. In case you hold multiple accounts and need separate debit card against each account then kindly submit separate request basis E age application form

The below details are applicable only if the second applicant is a Non Resident Indian

I understand that my existing international debit card linked to my existing account will be hotlisted. Delink this card it is linked to more than 1 accounts. (applicable only for Resi Indian)

Reissuance of card

I hereby request to Issue ATM Card (Card Code - RTAN0) Issue NRO Domestic Debit Card (Card Code - RCA01) Do not issue any card

Second holder will not be issued debit card if residential status of a second holder is Resident Indian. Only 1 debit card will be issued and will be linked against all the accounts being converted. In case you hold multiple accounts and need separate debit card against each account then kindly submit separate request basis E age application form

G) NOMINATION NOMINATION WILL BE APPLICABLE FOR ALL THE ACCOUNTS OPENED WITH THIS APPLICATION

Yes, I/ We wish to nominate (as per details below) I wish to retain the existing nominee which is updated on my account No, I/We declare that I do not wish to make a nomination in my/our account.
 I/We wish to cancel the nomination made by me/us in favor of _____ (Mention Name, Address & Contact no of existing nominee)
 _____ and here by nominate the following person as the new nominee in my/our accounts.

Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in the respect of Bank deposits. I / We nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the account, particulars whereof are given below, may be returned by HDFC BANK Ltd. by the account opening branch.

Nominee Name	I N C A P I T A L L E T T E R S O N L Y		
*Company Name / Flat			
No & Bldg. Name			
*Road No./Name			
*Landmark			
*City	*State		
Country	PIN Code		
*Date of Birth of Nominee	D D M M Y Y Y Y	In case of cancellation of nomination please Provide DA2 form separately.	*Relationship with Depositor

Please mention a prominent landmark to ensure that the deliverables reach you

As nominee is a minor on this date, I / We appoint the below to receive the amount of the deposit in the account on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

Leave out if nominee is not a minor	Name		Age	
	Address			

Witness 1 Name : _____	*Witness 1 Signature _____
Address : _____	Place : _____ Date D D M M Y Y Y Y
Witness 2 Name : _____	*Witness 2 Signature : _____
Address : _____	Place : _____ Date D D M M Y Y Y Y

Nomination Registration No. (Bank Use): _____ Registration Date: D D M M Y Y Y Y

** (Thumb impression shall be attested by 2 witnesses)
 * Where deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on the behalf of minor.
 ** If witnessed by an employee of HDFC Bank, provide employee number and office address along with the official stamp. Nomination can be made in favour of only one individual.

H) ACCOUNTS & TERM DEPOSIT DETAILS

I/We understand that all the Existing Savings/ Current / Term Deposits accounts (as applicable) linked to my customer id will be re-designated as per my current residential status

I) 1st and 2nd APPLICANT'S PHOTOGRAPH AND SIGNATURE

	Name: _____ Date: _____		Name: _____ Date: _____
1 st applicant's signature (Guardian's signature in case of minor)		2 nd applicant's signature	

By signing on this form I/We agree to abide with all the above mentioned declaration & term and conditions ("A" to "V")
 If Applicant is minor then Guardian shall sign in place of Applicant. DIGITAL SIGNATURE IS NOT ACCEPTED

J) AMB DECLARATION

The Average Monthly Balance required to be maintained for the account is Rs. _____ Product: NRO Savings NRO Current

I/We have understood that non-maintenance of the above Average Monthly Balance will attract charges. These charges have been explained to me for the respective product. I/We confirm that in event of no salary credits received in my/our salary account for continuous six months, the salary account will be converted to Regular Savings Account. I/We understand the detailed charging structure for non-maintenance of the same is available on HDFC Bank's web site on the link : <https://www.hdfcbank.com/nri-banking/save/nri-accounts/savings-account/fees-and-charges>

I / We hereby declare that I/We am/are a Person of Indian Origin (PIO) because I satisfy one of the below mentioned conditions.

FIRST APPLICANT	SECOND APPLICANT
<input type="checkbox"/> I held an Indian Passport earlier <input type="checkbox"/> I am a spouse of _____ who is PIO <input type="checkbox"/> I am a spouse of _____ who is an Indian Citizen <input type="checkbox"/> My father/mother/grandfather/grandmother _____ is/was an Indian citizen by virtue of the Constitution of India or the Citizenship Act,1955 <input type="checkbox"/> The father/mother/grandfather/grandmother _____ of my spouse is/was an Indian citizen by virtue of the Constitution of India or the Citizenship Act,1955 Further, I hereby (Please select from the below) <input type="checkbox"/> Submit the below mentioned documents in support of my declaration <input type="checkbox"/> Document Name _____ <input type="checkbox"/> Document Name _____	<input type="checkbox"/> I held an Indian Passport earlier <input type="checkbox"/> I am a spouse of _____ who is PIO <input type="checkbox"/> I am a spouse of _____ who is an Indian Citizen <input type="checkbox"/> My father/mother/grandfather/grandmother _____ is/was an Indian citizen by virtue of the Constitution of India or the Citizenship Act,1955 <input type="checkbox"/> The father/mother/grandfather/grandmother _____ of my spouse is/was an Indian citizen by virtue of the Constitution of India or the Citizenship Act,1955 Further, I hereby (Please select from the below) <input type="checkbox"/> Submit the below mentioned documents in support of my declaration <input type="checkbox"/> Document Name _____ <input type="checkbox"/> Document Name _____
<input type="checkbox"/> Declare that I do not possess any document in support of my declaration	<input type="checkbox"/> Declare that I do not possess any document in support of my declaration

I / We confirm the above information is true and correct and that I may be required to prove my status as a PIO if I am questioned by any authority.

L) SIGNATURE MISMATCH DECLARATION

I / We declare that the signature on the Passport is different than my/ our signature on this account opening form. Please consider the signature on this account opening application as my/ our updated Signature for Bank Records.

Old Signature as per passport/ Existing Customer ID

FIRST APPLICANT

New Signature Desired for account opening

1st applicant's signature

1st applicant's signature

Old Signature as per passport/ Existing Customer ID

SECOND APPLICANT

New Signature Desired for account opening

2nd applicant's signature

2nd applicant's signature

M) DECLARATION FROM NRI CUSTOMER FOR HOLDING RESIDENT ACCOUNT AS JOINT HOLDER

I am the joint account holder of SB/FD/RD/Current Account No _____ which stands in my name and in the name of Shri/Smt _____ who is the primary resident Indian and a close relative. I hereby undertake that I shall not use the proceeds lying in the above account for any transaction in contravention of the provisions of the Foreign Exchange Management Act (FEMA) 1999, Rules/Regulations made thereunder and the related circulars/instructions issued by the Reserve Bank from time to time. I further undertake that if any such transaction is put through the said account in contravention of the FEMA, 1999 or Rules/Regulations made thereunder, I shall be held responsible for the same. I shall not deposit cheques, instruments, remittances, cash or any other proceeds belonging to me in this resident account. I shall intimate my bank in the event of any change in my Non-resident / Resident status. In the event of death of the resident account holder, I shall intimate the bank and get the resident account converted to NRO account.

N) DECLARATION FROM CUSTOMER TO PROVIDE OVD WITH CURRENT MAILING ADDRESS WITHIN 90 DAYS FROM THE DATE OF ACCOUNT OPENING

I/We _____ giving a request to open Bank account, hereby confirm that I do not have a valid OVD (Officially Valid Document) with my/our current mailing address and will provide a valid proof of address within 90 days from the date of request. I/We agree that if the OVD of mailing address is not submitted to the satisfaction of the Bank, within 90 days from the date of request for account opening, the Bank shall have the right to restrict transactions in my/our account without any further notice to me. I/We agree to submit OVD with Current mailing address within the stipulated time in order to allow uninterrupted transactions in the account. I/We also agree that it will be my/our responsibility to inform other holders, in case such holders are being added in the account(s) in due course of time. I/We agree and undertake to keep HDFC Bank fully indemnified against claims and damages, which may arise due to HDFC Bank relying and acting on this declaration.

O) DECLARATION FOR A NON- ENGLISH LANGUAGE DOCUMENT SUBMITTED IN THE BANK

Since my/our document is in _____ language, I / We hereby submit the following Non English document (translated below) for account opening and also confirm the validity of the Non English document.

	FIRST APPLICANT	SECOND APPLICANT
1 Document Name		
2 Document Number		
3 Issued By (Authority)		
4 Issued At (Place)		
5 Issued On		
6 Valid Till		
7 Address mentioned on document, if any	_____	_____

For the document in a foreign language other than english, I/We permit HDFC bank and its officers to verify the details of the document by using translation of external sources which are available in public domain and also the use of external agencies wherever applicable. In consideration of same, I/We hereby keep HDFC bank and its successors and its officers saved against all losses and damages arising out of the information shared with these external agencies .

P) DECLARATION OF SAUDI ARABIA RESIDENTS ON VISIT TO INDIA

I/ we hereby confirm that I/we have returned from Saudi Arabia. I have a valid residential visa (IQAMA) with me. I/we request you to kindly open an NRE/NRO account in my/our name on the basis of the valid passport and the immigration stamp on the passport confirming my/our landing in India. I/we also confirm that I/we will inform the bank in case I/we am/are unable to proceed to Saudi Arabia for work or choose not to go, and will have the non- resident accounts opened in my/our name re-designated to resident/RFC accounts (as eligible).

Q) DECLARATION FOR MINOR ACCOUNT

Type of Guardian: Father Mother Court Appointed

Declaration: I hereby declare that the date of birth of the minor who is my _____ is **D D M M Y Y Y Y** and I am his/her natural and lawful guardian/guardian appointed by court order dated **D D M M Y Y Y Y** (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I declare that the amounts withdrawn from this account by me will be used for the benefit of the minor. I indemnify the bank against the claim of the above minor for any withdrawal/ transactions made by me in his/ her account. **(Not applicable if nominee is not a minor)**

R) MARINERS DECLARATION (Only for First Applicant)

I hereby confirm that I am proceeding on a contract with I have just returned after completion of my contract and am on break for _____ days / months with (Company Name)

_____ registered in (Company Address) _____

_____ . I request you to kindly open an NRE / NRO

account Attaching self-attested copies of 1) Passport copies 2) a) **For Mariner on fresh contract** - Latest / valid contract copy or Valid Employment Certificate and CDC (Continuous Discharge Certificate) Booklet copy with the customer name, other details and latest discharge stamping or Valid Visa b) **For Mariner On break** - Previous Contract Copy and Copy of Valid CDC (Continuous Discharge Certificate) Booklet copy with the customer name, other details and latest discharge stamping.

S) EXTENDED KYC

Certification: I/We have understood the information requirements of this Form as per the CBDT notified Rules 114F to 114H 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 Terms and Conditions below and hereby accept the same. I/We understand that my personal details as provided /available in the bank records will be used for CBDT reporting / Central KYC Registry. I hereby consent to receiving information from Central KYC Registry through SMS / Email.

CBDT Terms and Conditions: The Central Board of Direct Taxes (CBDT) 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 HDFC 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.

CBDT Instructions: 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.

^ 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. In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (Ticked)	Documentation required for Cure of FATCA/ CRS indicia
	If customer does not agree to be Specified U.S. person/ reportable person status
1 U.S. place of birth	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2 Residence/ mailing address in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
3 Telephone number in a country other than India (and no telephone number in India provided)	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
4 Standing instructions to transfer funds to an account maintained in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body*
- Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* Government or agency thereof or a municipality

T) DECLARATION

I/We hereby declare that I/We am/are Non-Residents Indian(s). I/We hereby declare that only legitimate dues in India which would include current income like rent, dividend, pension, and interest etc., sale proceeds of assets including immovable property acquired out of rupee/foreign currency funds or by way of legacy/inheritance will be deposited in my/our NRO Account • I/We understand that the existing CASA account(s) will be re-designated as NRO Account(s) on the basis of the declaration made by me/us. I/We understand that the Existing Fixed Deposits will be re-designated as per my current residential status. • I/We understand that all the Recurring Deposits which are active and linked to my resident savings account will continue and funds will be credited to my re-designated NRO Savings Account on maturity. • I/We understand that LAS account will be re-designated as per my current residential status. • I/We understand that my Reimbursement current account will be closed and funds will be credited to my re-designated NRO Savings Account • Basis my/our confirmation if the bank has re-designated my Current Reimbursement into NRO current account then I/We agree to maintain the Average Monthly Balance which is required to be maintained in the said account. • I acknowledge that I will not be able to avail of DTAA in the current financial year. The same can be availed by me in the next financial year by submitting the necessary DTAA documents as per Bank's requirement. Form 15 G/H is not applicable for me. • The account will be put into use for bonafide transactions not involving any violations of the provisions of any Government/Exchange Control Regulation / FEMA regulations. • I/We hereby undertake to intimate you about my/our return to India for permanent residence immediately on arrival. • I/We would confirm that all debits to my/our accounts for the purpose of investment in India and credits representing sale proceeds of investments in India are covered either by general or special permission of the Reserve Bank of India. • I am aware that in case, I am a joint holder in any resident savings account then my status will remain NRI, and am aware that I shall not be able to deposit cheques, instruments, remittances, cash or any other proceeds belonging to me in this resident account. • I am aware that in case if there are two or more than two joint account holders who have turned NRI and the remaining holder/s are resident then resident holders name will be deleted from the account. In case there are 2 resident joint holders in the account then third holder's name will be deleted. In case there the second holder is Resident Indian then the I also confirm that Mode of Operation of NRO account/Deposit will be on 'Former or Survivor' basis only and that the existing Mode of Operation may be amended. • I am aware that I will have to give separate instructions to add the joint holder(s) as mandate in the account. • I/We undertake to inform NSDL / CDSL for change of status to Non Resident. I/We will close or re-designate my Resident Demat Account / Investment Services. Account and open NRO Demat Account/ Investment Services Account and transfer my holdings • I authorize HDFC BANK to hotlist my existing International Debit card and I will have to apply for a new Domestic Debit / ATM card for my re-designated NRO Account. • I hereby authorize the bank to block my existing resident credit card and I will clear all outstanding dues, if any. I will apply for a new credit card as per my current residential status. • I understand that the Inward Standing Instructions on the Account will be discontinued. • I understand that the Debit Standing instructions on the Account will continue. • I hereby authorize provision of Internet Banking (NetBanking) and PhoneBanking Services to continue on this account. • I hereby declare that I will destroy my existing cheque book, ATM/Debit Card and apply for new one as per my current residential status and will also inform the resident joint holder on the above changes. • I am aware that all the features of Non - resident accounts and deposits will be applicable including AMB Charges, TDS implication and penalty on premature withdrawal of the deposit will be as applicable as per NRO account & deposit and the TDS will be deducted as per NRO tax slab. I hereby undertake that I shall not use the proceeds lying in the Resident account in which I/We are joint holder for any transaction in contravention of the provisions of the Foreign Exchange Management Act (FEMA) 1999, Rules/Regulations made thereunder and the related circulars/instructions is used by the Reserve Bank from time to time.I further undertake that if any such transaction is put through the said account in contravention of the FEMA, 1999 or Rules/Regulations made thereunder, I shall be held responsible for the same. I shall not deposit cheques, instruments, remittances, cash or any other proceeds belonging to me in this resident account. I shall intimate my bank in the event of any change in my Non-resident / Resident status. In the event of death of the resident account holder, I shall intimate the bank. I hereby authorize you to activate my Dormant Account(s), if any

ACKNOWLEDGEMENT

Date

Please quote following ref. no. for any future communication

This application is subject to verification. If any discrepancy is observed, application may be kept on hold until discrepancy is resolved.

Signature of Bank official _____

and get the resident account converted to NRO account. The features and benefits associated with existing resident account may differ from NRO account. Kindly refer <https://www.hdfcbank.com/nri-banking> for more details on NRO account. We have carefully read and understood the terms and conditions mentioned on the NRI page of HDFC Bank website <https://www.hdfcbank.com/nri-banking> & <https://www.hdfcbank.com/personal/resources/rates> and I/We agree and accept to the said terms and conditions. Death claim: In the event of the death of depositor, premature liquidation of term deposit will be allowed. Such premature liquidation will not attract any penal charge. In the event of one of the joint account holders, the right to deposit proceeds does not automatically devolve on the surviving joint deposit account holder, unless there is a survivorship clause. I/We agree that in case of joint fixed deposit with survivor clause, the bank shall be discharge by paying the fixed deposit proceeds prematurely to survivor/s, on request, in the event of the death of one or more joint depositor. In case of premature withdrawal of NRE deposit due to death of depositor, interest (if any) may be paid as per Board Approved Policy. DO NOT CALL REGISTRY: I/We understand that in case I/We do not wish to receive promotional information through telephonic calls / email / sms on products and services not currently availed by me/us, I/We can register for 'Do Not Call' service through the Bank's website www.hdfcbank.com or other channels that the Bank may offer. I/We agree that this service will not apply to receipt of advice and information regarding products and services currently availed by me/us, to help me/us in fully realising the benefits of the range of financial solutions designed to make my/our relationship value added and more convenient.

I confirm and declare that: a) All the particulars and information given are complete and true. b) I/We have not withheld any information. c) I/We do not hold any other Resident Account(s) & Deposits other than those mentioned in this letter, with HDFC BANK.

DIGITAL SIGNATURE IS NOT ACCEPTED.

1st applicant's signature(Guardian's signature in case of minor)

2nd applicant's signature(Guardian's signature in case of minor)

Name: _____ Date: _____

Name: _____ Date: _____

By signing on this form I / We agree to abide with all the above mentioned declarations ("A" to "V")

I / We confirm that I / We have read and understood the above Declaration and that the details provided on the form are correct. I / We also confirm that my request has been taken by Bank officer

Mr./Mrs. _____ and I / We have signed in his / her presence.

U) BRANCH USE SECTION

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Bar code number

1st applicant ATM / Debit card number	<input type="text"/>	Hotlisted on	<input type="text" value="D D M M Y Y"/>	Time	<input type="text" value="H H M M"/>
2nd applicant ATM / Debit card number	<input type="text"/>	Hotlisted on	<input type="text" value="D D M M Y Y"/>	Time	<input type="text" value="H H M M"/>
Resident joint applicant Debit card hotlisted	<input type="checkbox"/> Yes <input type="checkbox"/> No (To be hotlisted only if card has this account mapped to it)		<input type="checkbox"/> FACTA / AML is completely filled by customer		
Debit Card Hot-Listed by	<input type="text"/>	Current ethnic code	<input type="text"/>		
Customer Signature verified by	<input type="text"/>	New ethnic code	<input type="text"/>		

(In case the customer is classic, preferred or Imperia, retain current Ethnic code)

Self attested Document submitted

1st ID Proof Add Proof Photo

2nd ID Proof Add Proof Photo

PLEASE TICK IF DEEMED OVD IS SUBMITTED AS ADDRESS PROOF

1st Applicant 2nd Applicant / Joint Holder

Section N is filled in case deemed OVD is submitted as address proof

EMP Name _____	EMP Designation _____	<input type="checkbox"/> Customer signed in my presence _____	BDA Name _____
EMP Code _____	EMP Branch Name _____	<input type="checkbox"/> Signature verified _____	EMP Code _____

<input type="text" value="EMP Signature"/>	<input type="text" value="BDA Signature"/>	<input type="checkbox"/> PAN Verification done <input type="checkbox"/> UCIC check done	<input type="text" value="Branch Stamp with date"/>
<input type="text" value="EMP Signature"/>			<input type="text" value="EMP Signature"/>

V) CPU USE SECTION

Ethnic code updation	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na	Old <input type="text"/>	New <input type="text"/>
Category patch updation	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na	Low level memo raised	<input type="checkbox"/> Redesignated NRO account / Do not issue International Debit card
ATM / NRO Domestic Debit card issued	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Account level TDS flag changed	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Debit card of Resident Joint applicant delinked from the account	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Verified 1st applicant is a not a joint holder in another resident account	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Sweep - In	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Inward Standing Instructions	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		
Sweep - Out	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Na		