

Bank use only  Face to Face  Non Face to Face

Application Date 

D	D	M	M	Y	Y	Y	Y
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(To be filled by financial Institution) KYC Number 

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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 

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 Br Name \_\_\_\_\_ 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 or Survivor  Former or Survivor  Minor under Guardian  Jointly (ATM / Debit card not issued)

**C) FIRST APPLICANT'S DETAILS**

<b>*PERSONAL DETAILS</b>	*Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender	Date of Birth <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Applicant Type <b>Minor</b> <input type="checkbox"/> Y <input type="checkbox"/> N	*Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Other																																																			
	D	D	M	M	Y	Y	Y	Y																																																							
	*Residential Status <input type="checkbox"/> NRI <input type="checkbox"/> PIO/OCI <input type="checkbox"/> Foreign National	*Spouse's Name <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																													
	Existing Cust Id <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					<input type="checkbox"/> 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.			*Passport Expiry Date <table border="1"><tr><td>DD</td><td>-</td><td>MM</td><td>-</td><td>YYYY</td></tr></table>	DD	-	MM	-	YYYY																																	
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*If PAN not available, kindly attach Form 60 <input type="checkbox"/> Y <input type="checkbox"/> N		Mother's Name <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					*Father's Name (Mandatory if PAN not provided) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																								

<b>*OVERSEAS ADDRESS</b>	Choice of Correspondence <input type="checkbox"/> Indian Address <input type="checkbox"/> Overseas Address	(If not ticked, correspondence will be sent to Overseas address)		
	Flat No & Bldg. Name	Attached Address Proof of <input type="checkbox"/> Indian Address <input type="checkbox"/> Overseas Address	*Name of Proof of Address <input type="checkbox"/> Passport <input type="checkbox"/> Driving License <input type="checkbox"/> UID (Aadhar) <input type="checkbox"/> Voter ID <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others	
	Landmark	City	State	
	Country	PIN Code	Please mention a prominent landmark to ensure that the deliverables reach you	
	*Address Type <input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Residential and Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified	*Address for Tax Purpose <input type="checkbox"/> Indian Address <input type="checkbox"/> Overseas Address		

<b>*INDIAN ADDRESS</b>	Flat No & Bldg. Name	PIN Code	Country <table border="1"><tr><td>I</td><td>N</td><td>D</td><td>I</td><td>A</td></tr></table>	I	N	D	I	A
	I	N	D	I	A			
	Landmark	City	State					
	Country	PIN Code	Please mention a prominent landmark to ensure that the deliverables reach you					
	*Address Type <input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Residential and Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Unspecified							

<b>*CONTACT DETAILS</b>	*E-mail ID <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					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.	
	*Mobile No. <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					(OTP will be sent to this mobile number)	
	Tel (R) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Please register me for Insta Alert <input type="checkbox"/> SMS <input type="checkbox"/> E-MAIL <input type="checkbox"/>	
Tel (O) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					N U M B E R - E X T N		

Source of funds <input type="checkbox"/> Salary <input type="checkbox"/> Business income <input type="checkbox"/> Agriculture <input type="checkbox"/> Investment income <input type="checkbox"/> Others	Occupation <input type="checkbox"/> Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Retired <input type="checkbox"/> Self-employed Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> Others
If salaried employed with <input type="checkbox"/> Private ltd <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Public limited <input type="checkbox"/> Public sector <input type="checkbox"/> Government <input type="checkbox"/> Multinational <input type="checkbox"/> Others	Self employed professional <input type="checkbox"/> Doctor <input type="checkbox"/> CA <input type="checkbox"/> Lawyer <input type="checkbox"/> Architect <input type="checkbox"/> IT consultant <input type="checkbox"/> Others

Self employed since <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Nature of business <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Stock broker <input type="checkbox"/> Trader <input type="checkbox"/> Real estate <input type="checkbox"/> Others	Type of company/firm <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Public ltd co. <input type="checkbox"/> Private ltd co. <input type="checkbox"/> Others	Residence Type <input type="checkbox"/> Owned <input type="checkbox"/> Rented /Lease <input type="checkbox"/> Ancestral / Family <input type="checkbox"/> Company provided

Name of currency <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Mention the foreign currency which you are earning	
Gross annual income (₹) <input type="checkbox"/> < 50K <input type="checkbox"/> 50K - 1 L <input type="checkbox"/> 1 - 3 L <input type="checkbox"/> 3 - 5 L <input type="checkbox"/> 5 - 7.5 L <input type="checkbox"/> 7.5 - 10 L <input type="checkbox"/> 10 - 15 L <input type="checkbox"/> 15 - 25 L <input type="checkbox"/> 25 - 50 L <input type="checkbox"/> 50 L - 1 CR <input type="checkbox"/> >1 CR																						
Exp Remittance in NR Accounts(INR) Annually <input type="checkbox"/> NIL <input type="checkbox"/> < 0.5 L <input type="checkbox"/> 0.5 - 5 L <input type="checkbox"/> 5 - 10 L <input type="checkbox"/> 10 - 25 L <input type="checkbox"/> 25 - 50 L <input type="checkbox"/> 50 - 100 L <input type="checkbox"/> 100 - 250 L <input type="checkbox"/> 250 - 500 L <input type="checkbox"/> >500 L																						

PERSONAL DETAILS

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

Related Person Type  Guardian of Minor  Nominee  Assignee  Authorized Representative  Beneficial Owner  Beneficiary

\*Gender  Male  Female  Transgender Date of Birth 

D	D	M	M	Y	Y	Y	Y
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 Applicant Type  Minor  Guardian \*Marital Status  Married  Unmarried  Other

\*Residential Status  NRI  PIO/OCI  Foreign National  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. \*Passport Expiry Date 

DD	-	MM	-	YYYY
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%PAN No. \_\_\_\_\_ Aadhar No. \_\_\_\_\_ \*Passport No. \_\_\_\_\_

%If PAN not available, kindly attach Form 60  Y  N

Election / Voter's ID \_\_\_\_\_ Driving License \_\_\_\_\_ Driving License Expiry Date 

DD	-	MM	-	YYYY
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 NREGA Card \_\_\_\_\_

Govt ID Card \_\_\_\_\_ Others(pls specify) \_\_\_\_\_ Mother's Name 

I	N	C	A	P	I	T	A	L	L	E	T	T	E	R	S
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\*Mother's Maiden Name \_\_\_\_\_ \*Father's Name \_\_\_\_\_

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

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

(For existing customers, address given below will be updated for the primary applicant in all accounts held with the bank) Attached Address Proof of  Indian Address  Overseas Address

Flat No & Bldg. Name \_\_\_\_\_ \*Name of Proof of Address  Passport  Driving License  UID (Aadhar)  Voter ID  NREGA Job Card  Others \_\_\_\_\_

Landmark \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Country \_\_\_\_\_ PIN Code \_\_\_\_\_

\*Address Type  Residence  Business  Residential and Business  Registered Office  Unspecified \*Address for Tax Purpose same as above  Tick if Yes

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

INDIAN ADDRESS

Flat No & Bldg. Name \_\_\_\_\_

Landmark \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Country 

I	N	D	I	A
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 PIN Code \_\_\_\_\_

\*Address Type  Residence  Business  Residential and Business  Registered Office  Unspecified

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

CONTACT DETAILS

\*E-mail ID 

I	N	C	A	P	I	T	A	L	L	E	T	T	E	R	S	O	N	L	Y
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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 \_\_\_\_\_

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

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

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

OCCUPATIONAL AND INCOME DETAILS

Source of funds  Salary  Business income  Agriculture  Investment income  Others \_\_\_\_\_

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

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 <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Nature of business <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service provider <input type="checkbox"/> Agriculture <input type="checkbox"/> Stock broker <input type="checkbox"/> Trader <input type="checkbox"/> Real estate <input type="checkbox"/> Others _____	Type of company/firm <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Public ltd co. <input type="checkbox"/> Private ltd co. <input type="checkbox"/> Others _____	Residence Type <input type="checkbox"/> Owned <input type="checkbox"/> Rented /Lease <input type="checkbox"/> Ancestral / Family <input type="checkbox"/> Company provided
D	D	M	M	Y	Y	Y	Y				

Name of currency \_\_\_\_\_ Mention the foreign currency which you are earning

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

Exp Remittance in NR Accounts(INR) Annually  NIL  < 0.5 L  0.5 - 5 L  5 - 10 L  10 - 25 L  25 - 50 L  50 - 100 L  100 - 250 L  250 - 500 L  >500 L

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: 1<sup>st</sup> applicant Politically Exposed  Yes  No 2<sup>nd</sup> applicant Politically Exposed  Yes  No

FIRST APPLICANT

I hereby declare that I  do not hold /  hold an International Debit card having no. \_\_\_\_\_ for this account.

<b>Hotlisting</b> I hereby request to <input type="checkbox"/> Hotlist this card as this is linked to sole account.	<b>Reissuance of card</b> I hereby request to <input type="checkbox"/> Issue ATM Card (Card Code - RTAN0) <input type="checkbox"/> Issue NRO Domestic Debit Card (Card Code - RCA01) <input type="checkbox"/> Do not issue any card
--	---

SECOND APPLICANT

**The below details are applicable only if the second applicant is a Non Resident Indian**  
 I hereby declare that I  do not hold /  hold an International Debit card having no. \_\_\_\_\_ for this account.

<b>Hotlisting / Delinking of existing card</b> I hereby request to <input type="checkbox"/> Hotlist this card as this is linked to sole account. <input type="checkbox"/> Delink this card as it is linked to more than 1 accounts. (applicable only for Resi Indian)	<b>Reissuance of card</b> I hereby request to <input type="checkbox"/> Issue ATM Card (Card Code - RTAN0) <input type="checkbox"/> Issue NRO Domestic Debit Card (Card Code - RCA01) <input type="checkbox"/> Do not issue any card
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**G) NOMINATION (DA1): NOMINATION WILL BE APPLICABLE FOR ALL THE ACCOUNTS OPENED WITH THIS APPLICATION**

Yes, I/ We wish to nominate (as per details below)  No, I/We declare that I do not wish to make a nomination in my/our account.

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.

<b>Nominee Name</b>	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
*Tel (R)	Relationship with Depositor
Date of Birth of Nominee	D D M M Y Y Y Y

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

**Leave out if nominee is not a minor** 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.

<b>Name</b>		<b>Age</b>	
<b>Address</b>			

Witness 1 Name : _____ Address : _____	*Witness 1 Signature : _____ Place : _____ Date <span style="border: 1px solid black; padding: 2px;">D D M M Y Y Y Y</span>
Witness 2 Name : _____ Address : _____	*Witness 2 Signature : _____ Place : _____ Date <span style="border: 1px solid black; padding: 2px;">D D M M Y Y Y Y</span>

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**

Savings / Current / Fixed Deposit Account No.	Type of account / deposit		Redesignate	Delete Name	Rebook
	Single	Joint			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In case the space provided above is not sufficient to mention all Savings / Current / Fixed Deposit Account No., then the additional details can be shared through a separate Annexure mentioning the remaining account numbers.

**I) 1<sup>st</sup> and 2<sup>nd</sup> APPLICANT'S PHOTOGRAPH AND SIGNATURE**

<div style="border: 1px solid black; width: 100px; height: 100px; margin-bottom: 10px;"></div> <p><b>Name:</b> _____ <b>Date:</b> _____</p>	<div style="border: 1px solid black; width: 100px; height: 100px; margin-bottom: 10px;"></div> <p><b>Name:</b> _____ <b>Date:</b> _____</p>
1 <sup>st</sup> Applicant's latest passport size photo (Signature across the photograph)	2 <sup>nd</sup> Applicant's latest passport size photo (Signature across the photograph)
1 <sup>st</sup> applicant's signature (Guardian's signature in case of minor)	2 <sup>nd</sup> 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")**

**J) BRANCH USE SECTION**

1st applicant ATM / Debit card number

2nd applicant ATM / Debit card number

Resident joint applicant Debit card hotlisted  Yes  No (To be hotlisted only if card has this account mapped to it)

Hotlisted on

Time

Hotlisted on

Time

Debit Card Hot-Listed by

Customer Signature verified by

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

Current ethnic code

New ethnic code  M/

(M – NRO Redesignated Regular)

**K) CPU USE SECTION**

Ethnic code verified  Yes  No  Na Old  New

Category patch done  Yes  No  Na

Term deposit's liquidated and rebooked as NRO  Yes  No  Na

ATM / NRO Domestic Debit card issued  Yes  No  Na

Account level TDS flag changed  Yes  No  Na

Debit card of Resident Joint applicant delinked from the account  Yes  No  Na

Verified 1st applicant is a not a joint holder in another resident account  Yes  No  Na

Sweep - In  Yes  No  Na

Inward Standing Instructions  Yes  No  Na

Sweep - Out  Yes  No  Na

Low level memo raised  Redesignated NRO account / Do not issue International Debit card

Do not issue Interest / TDS certificate

For premature closure of Fixed deposit, ref CPU

Document submitted 1<sup>st</sup>  ID Proof  Add Proof  Photo

2<sup>nd</sup>  ID Proof  Add Proof  Photo

Branch Stamp and Signature

CPU Stamp and Signature

**L) PERSON OF INDIAN ORIGIN DECLARATION**

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 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 PIO
<input type="checkbox"/> I am a spouse of _____ who is an Indian Citizen	<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"/> 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	<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)	Further, I hereby (Please select from the below)
<input type="checkbox"/> Submit the below mentioned documents in support of my declaration	<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"/> 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.

**M) 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

1<sup>st</sup> applicant's signature

**FIRST APPLICANT**

New Signature Desired for account opening

1<sup>st</sup> applicant's signature

Old Signature as per passport/ Existing Customer ID

2<sup>nd</sup> applicant's signature

**SECOND APPLICANT**

New Signature Desired for account opening

2<sup>nd</sup> applicant's signature



**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
	<b>If customer does not agree to be Specified U.S. person/ reportable person status</b>
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:

1. Certificate of residence issued by an authorized government body\*      2. Valid identification issued by an authorized government body\* (e.g. Passport, National Identity card, etc.)

\* Government or agency thereof or a municipality

## V) DECLARATION

I/We hereby declare that I/We am/are Non-Residents Indian(s). 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. 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, but the mode of operation will be changed to former or survivor after which I will not be able to operate the resident account. I am aware that in case of more than two account holders in the re-designated NRO account jointly held with resident Indian(s) then the resident Indian(s) will be deleted from the said account. I am aware that in case, there are more than two account holders in the resident savings account and I am a joint holder in that account, then my name will be removed from that resident account. In case if there are more than two account holders and I am the primary account holder then the third joint holder's name will be removed (if the third holder's status is Resident). In case the third holder's status is an NRI, then the second joint holder's name will be removed (if the second holder's status is Resident) from the re-designated NRO account. 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.

**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 serving 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.

1<sup>st</sup> applicant's signature(Guardian's signature in case of minor)

2<sup>nd</sup> 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.