

SAVING ACCOUNT OPENING FORM

 Please fill up in Black Ink & Tick	& in BLOCK letters only. Please leave one box blank between two words.
3. In case of illiterate custome	nces. Thumb Impression (TI) to be affixed and verified. Bar Code ncelled. (PLEASE DO NOT SIGN BLANK FORM)
5. Fields with are Mandatory.	
Work Item ID	
Customer ID	Account Number
ype of Saving A/c	Pratham Shakti Param Vishesh
Services required	SMS Alert Cheque Book
	(Not Applicable for Pratham & Shakti)
FIRST/PRIMARY APPL If you are already a customer	r of IDFC FIRST Bank, fill in your Customer ID here
CKYC No (If any)	
	PERSONAL INFORMATION
Name	(Please complete as per your identity proof)
Prefix First name	Middle name Last name
Maiden Name (If Any) In case	of Female member
Prefix First name	Middle name Last name
rainers/Spouse Name "If	f PAN not provided, father name is mandatory"
Prefix First name *Mother's Name	Middle name Last name
Thother's reality	
Prefix First name	Middle name Last name
Gender Male	Female Third Gender *Date of Birth (Age Proof Mandatory for Minor) *Dlane of Birth (Age Proof Mandatory for Minor) *Dlane of Birth
Country of Birth	*Country of Tax Residence *Place of Birth
Foreign Tax Identification	(Please complete below if you are a Tax Resident of any country other than India) n Number *TIN Issuing Country
Toreign lax identification	Thursday Country
eparate annexure to be executed in case of dua	ual country of tax residence. *Citizenship India Others
'Nationality	Resident Individual Non-Resident Indian Person of Indian Origin Foreign National
Marital Status	Married Un-married Others Others
Caste category	General OBC SC ST (Please specify)
*Religion/Community	Hindu Muslim Christian Sikh Jain Zoroastrians Buddhists
	Others Others
PAN	(Please specify) Form 60 Form 49A
A call and NI calls	(Please fill if PAN is not available) (Please submit copy of form 49A)
Aadhaar Number	Driving License
MCNDECA Coud No	Expiry Date DD MM YYYY Voter ID Voter ID
MGNREGA Card No National Population Regis	
vational Population Regis	Expiry Date D D M M Y Y Y
*Services required	Debit Card Mobile Banking Internet Banking
Name on Debit Card	(Not Applicable for Shakti) I FIGURE BUTKING I THEFTICE BUTKING
*Customer type	Minor Senior Citizens General Public
	SIMPLIFIED MEASURES ACCOUNT
Proof of Identity	SITIL EN TEASONES ACCOUNT
Document Type Code	Identification Number
Proof of Address Document Type Code	Identification Number
Please refer at the end of form for inst	structions/ Clarification)
	*ADDRESS AS PER OFFICIALLY VALID DOCUMENTS
*Address	
	*District
Landmark Area *City/Town/Village *State/ U.T.	*District *Country *Country



*COMM	UNICATION ADDRESS Same as per Officially Valid Document
*Address	
Landmark Area	
*City/Town/Village	*District *Pin *Pin
*State / U.T.	*Country *Country
	CTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES Officially Valid Document Same as Communication Address
	Officially Valid Document Same as Communication Address
*Address	
	*City/Town///illago
Landmark Area	*City/Town/Village *7ID / Poot Code
*District	*ZIP / Post Code
*State / U.T.	*Country *Co
	*CONTACT DETAILS
Land line No (Residence) STD Code	Land line No (Office) STD Code
Mobile No ISD Code	I do not wish to disclose the mobile number and understand the implication of not receiving communication from bank
Email ID	
	*EMPLOYMENT DETAILS
Occupation	
Salaried Public	Private Government (Please Specify Corporate Type)
Self Employed Agricult	ure and Allied Dairy Artisan Technician/Skilled Worker
Daily Wa	age Worker Weaver Services Retail Shop
Business Manufact	urer Trading Retail Shop Furniture Contractor Education Services
Self Employed Professional	Doctor Lawyer CA/CS Engineer Independent Consultant Architect
Self Employed Specified	Shroff Money Lender Stock Broker Dealer
Home Maker Retired	Student Farmer Politician Unemployed
Home Maker Retired Source of Income	
Home Maker Retired Source of Income Salaried Profession	Student Farmer Politician Unemployed Investment Income Business Services Agriculture Family Income
Home Maker Retired Source of Income	
Home Maker Retired Source of Income Salaried Profession Annual Income	Investment Income Business Services Agriculture Family Income
Home Maker Retired Source of Income Salaried Profession Annual Income Up to Rs. 1 Lakh	Investment Income Business Services Agriculture Family Income Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh Rs. 10 Lakh to Rs. 25 Lakh Above Rs.50 Lakh Above Rs. 5 Crores
Home Maker Retired Source of Income Salaried Profession Annual Income Up to Rs. 1 Lakh	Investment Income Business Services Agriculture Family Income Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh to Rs. 25 Lakh
Home Maker Retired Source of Income Salaried Profession Annual Income Up to Rs. 1 Lakh Rs. 25 Lakh to Rs. 50 Lakh 1.GST Status	Investment Income Business Services Agriculture Family Income Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh Rs. 10 Lakh to Rs. 25 Lakh Above Rs.50 Lakh Above Rs. 5 Crores GST DETAILS Registered Unregistered(If Registered, please fill up the GST Annexure)
Home Maker Retired Source of Income Salaried Profession Annual Income Up to Rs. 1 Lakh Rs. 25 Lakh to Rs. 50 Lakh 1.GST Status 2.Exempt from GST 3.Related person*	Investment Income Business Services Agriculture Family Income Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh Rs. 10 Lakh to Rs. 25 Lakh Above Rs.50 Lakh Above Rs. 5 Crores GST DETAILS Registered Unregistered(If Registered, please fill up the GST Annexure) Yes No (If exempt, please submit proof / provide notification reference)
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*Foreign Tax Identification	on Number *TIN Issuing Country
Separate annexure to be executed in case of c	
*Nationality	*Citizenship India Others The
*Residential Status	Resident Individual Non-Resident Indian Person of Indian Origin Foreign National Married Others Others
*Marital Status *Caste category	General OBC SC ST (Please specify)
*Religion/Community	Hindu Muslim Christian Sikh Jain Zoroastrians Buddhists
rengion, community	Others Others
PAN	(Please specify) Form 60 (Please fill if PAN is not available) (Please submit copy of form 49A)
Aadhaar Number	(Please fill if PAN is not available) (Please submit copy of form 49A) Driving License
	Expiry Date DD MM YYYY
MGNREGA Card No	Voter ID Voter ID
National Population Regi	ster Passport Passport
	Expiry Date D D M M Y Y Y Y
*Services required	Debit Card Mobile Banking Internet Banking
Name on Debit Card	
*Customer type	Minor Senior Citizens General Public
Proof of Identity	SIMPLIFIED MEASURES ACCOUNT
Document Type Code	Identification Number
Proof of Address Document Type Code	
(Please refer at the end of form for in	Identification Number
	*ADDRESS AS PER OFFICIALLY VALID DOCUMENTS
*Address	
	*67.77
Landmark Area	*City/Town/Village *7ID / D. J. C. J. *7ID / D. J. *7ID / D. J. C. J. *7ID / D. J. *7ID / D. J. *7ID / D. J. C. J. *7ID / D. J.
*District *State / U.T.	*ZIP / Post Code
*Address	COMMUNICATION ADDRESS Same as per Officially Valid Document
Address	
Landmark Area	
*City/Town/Village	*District *Pin *Pin
*State / U.T.	*Country
ADDRESS IN THE	JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES
Sam	e as per Officially Valid Document Same as Communication Address
*Address	
Landmark Area	*City/Town/Village
*District	*ZIP / Post Code
*State / U.T.	*Country
	*CONTACT DETAILS
Land line No (Residence)	STD Code Land line No (Office) STD Code
Mobile No SD Code	I do not wish to disclose the mobile number and understand the implication of not receiving communication from bank
Email ID	
O a sum at ! : ::	*EMPLOYMENT DETAILS
Occupation Salaried	Public Private Government (Please Specify Corporate Type)
	Agriculture and Allied Dairy Artisan Technician/Skilled Worker
_ =	Daily Wage Worker Weaver Services Retail Shop
	Manufacturer Trading Retail Shop Furniture Contractor Education Services
Self Employed Profes	
_	3



Self Employed Specifi	ed Shroff	Money Lender	Stock Broker Dealer							
Home Maker	Retired	Student	Farmer Politic	ian Unemployed						
Salaried Profes	sion Investment	ncome Business	Services Agricult	ure Family Income						
Annual Income Up to Rs. 1 Lakh Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh to Rs. 25 Lakh										
Rs. 25 Lakh to Rs. 50	Lakh Above R	s.50 Lakh	ove Rs. 5 Crores							
THIRD/JOINT APPLICAN										
If you are already a customer of	IDFC FIRST Bank, fill in you	Customer ID here								
CKYC No (If any)										
*Name		PERSONAL INFOR		e complete as per your identity proof)						
Prefix First name *Maiden Name (If Any) In case	of Female member	Middle name	Last name							
Transcri transcri	or remain member									
Prefix First name *Father's/Spouse Name "	If DAN not provided fother nom	Middle name	Last name							
Prefix First name	IF PAIN not provided, father nam	Middle name	Last name							
*Mother's Name		Middle fiame	Last flatfle							
Prefix First name		Middle name	Last name							
*Gender Male	Female	Third Gender	*Date of Birth							
*Country of Birth	T emale	*Country of Tax Reside	(A D 6 Ma d-t 6 Mi N	*Place of Birth						
*Foreign Tax Identificatio	n Number	(Please complete below if you are a Tax F *TIN Issuing Country	tesident of any country other than India)							
Separate annexure to be executed in case of du	al country of tax residence.	*Citizenship	India Others							
*Nationality	Decident Individu		(Please spe	cify)						
	Resident Individu	al Non-Resident In		Foreign National						
*Marital Status	Married		Others Please specify)							
*Caste category	General									
*Religion/Community	Hindu	Muslim Christia	n Sikh Jain Zc	proastrians Buddhists						
	Others Please specify)									
PAN				orm 49A ease submit copy of form 49A)						
Aadhaar Number			Driving License							
			Expiry Date DD M	MYYYY						
MGNREGA Card No			Voter ID							
National Population Regis	ster		Passport							
rational ropulation regis			Expiry Date D D M	MYYYY						
*Services required	Debit Card	Mobile Banking	nternet Banking							
Name on Debit Card	(Not Applicable for Shakti)									
*Customer type	Minor	Senior Citizens Ge	neral Public							
		MPLIFIED MEASURE								
Proof of Identity Document Type Code	511		ion Number							
Proof of Address		identincat	IOTT NUTTION							
Document Type Code		Identificat	ion Number							
(Please refer at the end of form for ins		AS DED OFFICIALL	Y VALID DOCUMENTS							
*Address	ADDRESS	AS PER OFFICIALL	T VALID BOCOMENTS							
Address										
Landmark: Auss	1 1 1 1 1 1 1									
Landmark Area										
*City/Town/Village		*District	*0	*Pin						
*State/ U.T.			*Country							
*(COMMUNICATION AD	DRESS Same as p	er Officially Valid Document							
*Address										



Landmark Area								
*City/Town/Village *District *Pin *Pin *Pin *Pin *Pin *Pin *Pin *Pin								
*State / U.T. Country *Country								
ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES Same as per Officially Valid Document Same as Communication Address								
Same as per Officially Valid Document Same as Communication Address *Address								
Addiess								
Landmark Area *City/Town/Village *City/Town/Village								
*District *ZIP / Post Code								
*State / U.T. Country *Country								
*CONTACT DETAILS Land line No (Residence) Land line No (Office)								
STD Code STD Code Mobile No I I do not wish to disclose the mobile number and understand the implication of not receiving								
ISD Code Email ID								
*EMPLOYMENT DETAILS								
Occupation Salaried Public Private Government (Please Specify Corporate Type)								
Self Employed Agriculture and Allied Dairy Artisan Technician/Skilled Worker Daily Wage Worker Weaver Services Retail Shop								
Business Manufacturer Trading Retail Shop Furniture Contractor Education Services								
Self Employed Professional Doctor Lawyer CA/CS Engineer Independent Consultant Architect								
Self Employed Specified Shroff Money Lender Stock Broker Dealer								
Home Maker Retired Student Farmer Politician Unemployed Source of Income								
Source of Income Salaried Profession Investment Income Business Services Agriculture Family Income								
Annual Income								
Up to Rs. 1 Lakh to Rs. 5 Lakh Rs. 5 Lakh to Rs. 10 Lakh Rs. 10 Lakh to Rs. 10 Lakh Above Rs. 5 Crores								
*INITIAL DEPOSIT DETAILS (Not Mandatory for Pratham A/C)								
Amount(Rs.)								
Drawn On Bank Branch								
(The cheque should be crossed A/C payee and drawn Payable to "IDFC FIRST Bank Limited - Customer Name")								
UTR *MODE OF OPERATION								
Singly Jointly Either or Survivor Former or Survivor Any or Survivor								
Minor under Guardian Minor Independent (above 10 years to less than 18 years) Self or POA Holder / Assignee								
Debit Card or Internet Banking transactions will not be available for accounts operated 'Jointly' or as 'Former or Survivor'								
*ACCOUNT IF OPERATED UNDER GUARDIAN (Please complete as per your identity proof)								
Guardian's Name								
Date of Birth Prefix First name Middle name Last name Existing Customer ID Mandatory for existing customer								
Relationship with Minor Father Mother By Court Order (If yes please affix a copy) Other (Please specify)								
Declaration: I shall represent the minor in all future transaction of any description								
in the above account till the same minor attains the majority. I shall indemnify the bank against any claims of the above minor of any withdrawals/transaction made by me in his/her account. Signature of Guardian								
*INFORMATION ON OTHER PRODUCTS AND OFFERINGS								
From time to time IDFC FIRST Bank Limited communicates various new products/special features of existing products/promotional								
offers which are of significant benefit to its customers. Please help us to serve you better by giving your consent to be informed about such benefits. Your Consent Yes No								



*DECLARATION (Please read carefully and sign at the end of this section)

I/We being prospective/existing customer of IDFC FIRST Bank Limited ("IDFC FIRST Bank"), have read, understood and agree to abide by and be bound by all the Terms and Conditions displayed on website of the IDFC FIRST Bank i.e. www.idfcfirstbank.com and other applicable laws which governs/will govern, all of my/our accounts, for present and future, maintained/opened/to be maintained/to be opened with IDFC FIRST Bank Limited, from time to time and also by the provisions of the various services/facilities which are availed/utilised at present or may be availed/utilised in future as & when required including but not limited to (a) ATMs (b) Phone Banking (c) Debit Card (d) Mobile Banking (e) Net Banking.

I/We understand that IDFC FIRST Bank Limited shall have the absolute discretion to amend or supplement any of the said Terms and Conditions from time to time. IDFC FIRST Bank Limited may communicate the so amended Terms and Conditions by hosting the same on the aforesaid website or in any other manner as per regulatory gu lines. I/We agree to keep ourselves updated of such changes and be bound by the terms as are in force from time to time. I/We have read, understood and agree to the charges/costs, including but not limited to the charges/costs mentioned in the extant Schedule of Charges and all other facilities availed/to be availed by me/us and hereby agree to bear the charges as revised by IDFC FIRST Bank Limited, from time to time, at its sole discretion.

I/We hereby agree to abide by and be bound by all applicable rules/regulations/instruction/guidelines including but not limited to those issued by the Reserve Bank of India, including the FEMA Regulations 2000 Governing EEFC Accounts, the Foreign Exchange Management Act, 1999 and Foreign Account Tax Compliance Act, 2010 (to the extent applicable to India) and the Common Reporting Standards (CRS), in force from time to time. I/We confirm having declared our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 (the Act) as notified by Central Board of Direct Taxes (CBDT) in this regard.

I/We do hereby authorise IDFC FIRST Bank Limited to conduct my/our credit history verification with CIBIL or any other credit rating agency and acknowledge that IDFC FIRST Bank Limited shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me/us to IDFC FIRST Bank Limited. I/We declare that I/We have not availed any credit facility from any bank or have obtained NOC from such bank(s) for opening of Current Account with IDFC FIRST Bank Limited.

I, (Name) hereby declare that I don't have any other type of saving account with IDFC FIRST Bank Limited In case of any existing saving accounts maintained in my name, IDFC FIRST Bank Limited is hereby authorized to close the existing account within 30 days of this account opening and transfer the credit balances thereunder (if any) to this account. (This is applicable for IDFC FIRST Pratham Account only) I further request you to register my mobile number & Email ID as mentioned in the Form to this account. SMS alerts may be sent to this mobile number.

I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. I hereby declare that all the above information voluntarily furnished by me is true, correct and complete.

I/We also agree to furnish and intimate to IDFC FIRST Bank, any other particulars that are called upon me to provide on account of any change in law either in India or a broad in the subject matter herein. I/We hereby authorise IDFC FIRST Bank Limited to exchange, share or part with all the information/data provided herein including personal and business information with financial institutions/credit bureaus/agencies/statutory bodies/other such persons, in order to facilitate IDFC FIRST Bank Limited to comply with its obligations under various applicable laws, regulations, and standards: I/We shall not hold IDFC FIRST Bank Limited or its agents/representatives liable for using /sharing information provided herein by me/us.

I/We hereby declare that the information provided herein as well as in the documentary evidence provided by me/us to the IDFC FIRST Bank Limited(the "Customer Information") are is true, correct and complete in all aspects to the best of my/our knowledge and that I/We have not withheld any material Customer Information that may affect the assessment/categorisation of the account as a Reportable account or otherwise. I/We further agree that any false/misleading Customer Information given by me/us or suppression of any material fact will render my/our account liable for closure and the bank shall be, in its sole discretion, have the right to initiate any further action, under law or otherwise. In the event of any change/inaccuracy in the Customer Information, I/We further agree and confirm to declare, disclose and furnish, within a maximum period of 30 days, to IDFC FIRST Bank Limited such changes in the Customer Information, its supporting Annexures as applicable to me/us duly signed and self-certified by me/us as well as in the documentary evidence in relation thereto.

I/We also hereby agree to indemnify and keep indemnified IDFC FIRST Bank Limited, affiliates and their successors or assignees if any of the representations and declarations made hereunder by me/us is incorrect, false or misleading in any of its particulars and/or any non-compliance by me of the terms hereunder. I/We hereby declare that all Foreign Exchange transactions, as may be entrusted by me/us to the IDFC FIRST Bank Limited from time to time, will be in strict conformity with the provisions of the Foreign Exchange Management Act, 1999 ("the Act"). Further, I/We also declare that said transactions, as and when initiated, shall not involve and shall not be designed for the purpose of any contravention or evasion of the provisions of the Act or of any rule, regulation, notification, direction or order made under the Act and any other applicable laws/regulations for the time being in force and effect.

I/We also agree that my/our failure to disclose any material fact known to us, now or in future, may invalidate our application and IDFC FIRST Bank Limited would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by IDFC FIRST Bank Limited if the deficiency is not remedied by us within the stipulated

I/We agree and understand that IDFC FIRST Bank Limited reserves the right to reject my/our account opening application form/request without assigning any reason thereof and without being liable to me/us in any manner whatsoever. I/We further agree and understand that IDFC FIRST Bank Limited reserves the right to retain this account opening application form, and the documents provided herewith by me/us, including photographs, KYC documents, and are not liable to return the same to

I/We authorize IDFC FIRST Bank to submit application/other relevant documents submitted by me to CERSAI. I/We hereby provide my consent to receive information from Central KYC Registry through SMS/mail on the above registered number/email address.

I understand, acknowledge and authorize that as per the provisions 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.

I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in the account opening form and signed by me as well as in the documentary evidence provided by me or if any certification become incorrect

I also agree that our failure to disclose any material fact known to me now or in future, may invalidate my application and IDFC 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.

I agree to furnish any particulars/information that is called upon me by IDFC Bank on account of any change in law either in India or abroad in the subject matter herein. 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 forthwith and provide the bank with all information/documents that may be necessary for any proceeding before GOI/RBI/Income Tax Authorities.

Signature/Thumb Impression of 1st Applicant	Signature/Thumb Impression of 2nd Applicant	Signature/Thumb Impression of 3rd Applicant
Witness	Name	Name
(required only if Applicant uses thumb impression)	Signature	Signature
Date of Declaration DD MM YYY	Witness 1 Place of Declaration	Witness 2



										S١	ΝE	ΕF	C	D.	T F	ΆC	ΊL	ITY	′																	
I/We wish to c	pt fc	or Sw	eep	Out	t fac	ility	/ fro	om	the	e Se	eni	or d	citi	zer	n/M	lino	r A	\ccc	ount	t be	eing	9 0	pen	ed	*											
Sweep Out is a facility which provides liquidity of a Savings Account coupled with higher interest earnings of a Fixed Deposit (FD) Through Sweep Out facility, savings balance from the account is transferred automatically into a Fixed Deposit, at a specific threshold limit Fixed deposits are formed for default tenure of 1 year 1 day only, at applicable interest rates Sweep Out will be triggered basis frequency selected, subject to availability of balances in the Savings Account Sweep In facility is enabled by default for all FDs book through Sweep Out The frequency of Sweep Out for deposit booking will be weekly, and will start 7 days from when the Sweep Out is set-up																																				
Details														Se	nior Citizen Account							Minor Account					ınt	_								
Balance required in account to enable Sweep In														R:	Rs. 75,000							Rs. 15,000														
Remaining balance post deposit booking														R	s. 50	0,00	00							Rs	s. 10),OC)0									
Minimum amount of	depo	sit bo	ookec	d thi	roug	h Sv	vee	0 0	ut											R	s. 25	5,00	00							Rs	s. 5,	000	Э			
Maximum amount o	f dep	osit b	ooke	d th	ıroug	gh S	wee	р С	ut																	Rs	s. 99	9,99	9,99							
*Applicable only for Ser	nior ci	tizen/	Minor	Acc	count																															_
				An	nex	kur	e 1	: N	101	11M	VΔ	TI	10	1 [DE.	TΑI	IL	(Nc	mir	nat	ion	fo	rm	DΑ	A 1)											
Nomination under Secti The Nominee or Gu					_	_													g Co	mp	anie	es (1	Vom	ina	tion) Rı	ules	198	5 ir	ı res	pec	t of	bar	ık d	eposi	ts
Yes, I want to nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the account may be returned by IDFC FIRST Bank Limited										t																										
Nominee Name																																				
		Prefix	:	F	irst r	nam	ie							N	1idc	lle r	nam	ne										La	ıst ı	nam	ie					
Nominee Address			Ш		\perp																												L			
				\Box	\perp																															
Relationship with c	epos	sitor'	's, if a	any		Τ	Τ	Г	Г			Τ			Τ	7		ate	of	Bir	th	D	D		М	М]	Υ	Y	Y	Υ		A	ge		_
If the nominee is min the amount of depo (Where deposit is m	sit in	the a	accou	int (on b	eha	lf o	fnc	mii	nee	in	the	ev	/en	t of	my	/oı	ur/m	nino	r's (dea	th (duri	ng	the	m	ino	rity	of	the	no	mir	nee.			
Guardian Name					\perp																															_
		Prefix	:	F	irst r	nam	ie							Ν.	1idc	lle r	nam	ne										La	ıst ı	nam	ie					
Guardian Address	Ш		Щ		<u></u>												L												L	L		L	L	L	Щ	
				\perp	\perp																								L	L	Ш	L	L			
**Where deposit is m Would you like the No, I do not wa consequences	nom nt to of no	inee nom ot nom	nam ninat mina	ie to te a atino	o be inyoi g an	me ne (ention in the terminal in the	one my	ed o be ny	on ; hal acc	you If a	ur a t th unt.	ncc	ma	nt s	stat ent.	em	nent und	:/de erst	vic	es d tl	ne] Y∈ adv	es.] N	0									
Date DD 1	1 M	Y	/ Y	Υ	Υ			Pla	асе																			L		L		L		L		
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(required only if Applicant uses thumb impression)													Siç	gna	atur	е												S	igr	natu	re					

Witness 1

Witness 2



ANNEXURE 2: FORM NO. 60 [See second proviso to rule 114B]

Form for declaration to be filed by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

1	First Nam	ne .																2	2 Date of Birth/Incorporation of declarant (DD/MM/YYYY)							
	Middle Name																									
	Surname																									
3	Father's Name (in case of individual) First Name																									
	Middle Na	ame																								
	Surname																									
4	Flat/ Roc					5	5 F	Floor No.																		
6	Name of premises											Block Name/No.														
8	Road/ Street/ Lane											Area/ Locality														
10	Town/ City									1	1	Distr	ict					12	Stat	е						
13	Pin code				14	Т	eleph	ione N	Numb	er (v	(with STD code) 15 Mobile Number															
16	Amount o	of tra	nsact	ion (F	Rs.)												18				ction i					
17	Date of tr (DD/MM/																10	trans			ns inv	olved	in the	9		
19	Mode of t	ransa	action	n: 🗆	Cash,		□ Che	eque,		□ Cá	ard,] Draf	ft/Bar	nker's	Cheq	ue,		Online	trans	fer,		Other			
20	Aadhaar (if availab		ber is	sued	by UI	DAI																				
21	If applied enter dat																									
	Acknowle	edger	ment	Numk	oer																					
22	If PAN no the financ										inco	me c	of spo	use, n	ninor	child	etc. as	s per s	ectio	n 64 c	f Incor	me-ta	x Act	, 1961) for	
	a Agr	icultı	ural in	icome	(Rs.))																				
	b Oth	er th	an ag	ıricult	ural ir	ncome	e (Rs.)																		
23	Details of support of (Refer Ins	of ide	ntity	in Col	umn		d in	Do	cume de	nt		nber	nt Ide	entific	ation		lame locum		ddres	s of th	e auth	ority	issuin	g the		
24	Details of support of (Refer Ins	of add	dress	in Co	lumns			Do:	cume de	nt		nber	nt Ide	entific	ation		Name docum		ddres:	s of th	e auth	ority	issuin	g the		
	Verification																									
child e	I further de	ectic	n 64	of Inc	come-	tax A	ct, 19	61) ca	: Acc	ount ted i	Num n acc	ber a corda	and m ince v	ıy/ ou vith th	r esti ne pro	mated ovision	total	incom	ne (in	cludin	-	me of	spou	se, m	inor	
n whi	ch the abov	/e tra	ınsact	ion is	held	will b	e less	s than	ı max	imun	n am	ount	not c	harge	able	to tax										
Verifie	d today, th	e			d	ay of				_ 20		_ P	lace: _						((Signa	ture o	f decl	arant))		

^{1.} Before signing the declaration, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income - tax Act, 1961 and on conviction be punishable, (i) in a case where tax sought to be evaded exceeds twenty-five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine; (ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine.

^{2.} The person accepting the declaration shall not accept the declaration where the amount of income of the nature referred to in item 22b exceeds the maximum amount which is not chargeable to tax, unless PAN is applied for and column 21 is duly filled and proof of submission of application is furnished.



Instruction:

(1) Documents which can be produced in support of identity and address (not required if applied for PAN and item 20 is filled)

SI.	Nat	ure of Document	Document Code	Proof of Identity	Proof of Address
A.	For	Individuals and HUF			
	1.	AADHAR card	01	Yes	Yes
	2.	Bank/Post o c e passbook bearing photograph of the person	02	Yes	Yes
	3.	Elector's photo identity card	03	Yes	Yes
	4.	Ration/Public Distribution System card bearing photograph of the person	04	Yes	Yes
	5.	Driving License	05	Yes	Yes
	6.	Passport	06	Yes	Yes
	7.	Pensioner Photo card	07	Yes	Yes
-	8.	National Rural Employment Guarantee Scheme (NREGS) Job card	08	Yes	Yes
	9.	Caste or Domicile certificate bearing photo of the person	09	Yes	Yes
	10.	Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted O c er as per annexure A prescribed in Form 49A	10	Yes	Yes
	11.	Certificate from employer as per annexure B prescribed in Form 49A	11	Yes	Yes
	12.	Kisan passbook bearing photo	12	Yes	No
	13.	Arm's license	13	Yes	No
	14.	Central Government Health Scheme/Ex-servicemen Contributory Health Scheme card	14	Yes	No
	15.	Photo identity card issued by the government./Public Sector Undertaking	15	Yes	No
	16.	Electricity bill (Not more than 3 months old)	16	No	Yes
	17.	Landline Telephone bill (Not more than 3 months old)	17	No	Yes
	18.	Water bill (Not more than 3 months old)	18	No	Yes
	19.	Consumer gas card/book or piped gas bill (Not more than 3 months old)	19	No	Yes
	20.	Bank Account Statement (Not more than 3 months old)	20	No	Yes
	21.	Credit Card statement (Not more than 3 months old)	21	No	Yes
	22.	Depository Account Statement (Not more than 3 months old)	22	No	Yes
	23.	Property registration document	23	No	Yes
	24.	Allotment letter of accommodation from Government	24	No	Yes
	25.	Passport of spouse bearing name of the person	25	No	Yes
	26.	Property tax payment receipt (Not more than one year old)	26	No	Yes
В.		Association of persons (Trusts)			
		by of trust deed or copy of certificate of registration issued by arity Commissioner	27	Yes	Yes
C.		Association of persons (other than Trusts) or Body of ividuals or Local authority or Artificial Juridical Person			
	con or a	by of Agreement or copy of certificate of registration issued by Charity or any other competent authority any other document originating from any Central or State Government partment establishing identity and address of such person.	28	Yes	Yes

⁽²⁾ In case of a transaction in the name of a Minor, any of the above mentioned documents as proof of Identity and Address of any of parents/guardians of such minor shall be deemed to be the proof of identity and address for the minor declarant, and the declaration should be signed by the parent/guardian.

⁽³⁾ For HUF any document in the name of Karta of HUF is required.

⁽⁴⁾ In case the transaction is in the name of more than one person the total number of persons should be mentioned in SI. No. 18 and the total amount of transaction is to be filled in SI. No. 16.



	ANNEXURE 3: GST DETAILS										
Date D D M M Y Y Y Y											
Brand	Branch Name										
Customer Name First Name											
Midd	e Name										
Last I		State wise GST details as below:									
Sr No			GSTN records \$ Any other information								
# Ple	ase mention primary G	ore than 5 GST Registration No., a separate Annexure shall be obt STN as the first GSTN. Primary GSTN will be considered as the c rds is the address of receiving the service.									
	ition of Related Pers										
(a)											
	persons who are asso	o includes legal persons; ciated in the business of one another in that one is the sole ag pever described, of the other, shall be deemed to be related.	ent or sole distributor or sole								
			Name :								
			Designation :								

10

Signature



Clarification / Guidelines on filling "Simplified Measures Account" section In case of Simplified Measures Accounts for verifying the identity & address of the applicant, any one POI & POA each from the following documents need to be submitted. Proof of Identity [Pol] documents Document Code Description Identity card with applicant's photograph issued by Central/ State Government Departments, Statut ory/ Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, and Public Financial Institutions. 02 Letter issued by a gazetted officer, with a duly attested photograph of the person Proof of Address [PoA] documents Document Code Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill). 01 02 Property or Municipal Tax receipt 03 Bank account or Post Office savings bank account statement Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address. Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official accommodation. 06 Documents issued by Government departments of foreign jurisdictions and letter issued by Foreign Embassy or Mission in India *FOR BANK USE Branch Name Branch Code Lead Generator Code Profit Centre (BC/RM/RO/Others) Certification: Place of Work Other I have met the Customer at his: Residence I have seen the Original KYC Documents and Returned these to the Customer. Copy/Photo taken for Record The Customer has Signed in my Presence Name of the Branch Official/BC Retailer Employee ID/BC Code Date Signature & Stamp Name of the Operation Officer Employee ID Date Signature & Stamp Customer ID 1: Customer ID 2 Account No: Customer ID 3 **ACKNOWLEDGEMENT** You have subscribed for the product Pratham Shakti Param Vishesh The Bank official has explained to you the Terms & Conditions of account opening, details of Features & Charges as per Bank's Schedule of Charges (SOC) and Average Quarterly / Monthly Balance requirement as applicable to the product subscribed by you. You will be bound and abide by the Bank's General Terms & Conditions available on Bank's website www.idfcfirstbank.com. Customer Name Initial payment details Mode of Payment ___ Cheque ___ DD ___ IFT ___ NEFT ___ RTGS The a/c will be opened subject to verification of documents & clearance of initial payment cheque as per Bank's Policy. Branch Name Signature of Bank official

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Date