



PIONEER
the lost art of wealth management

IndusInd Bank

*Fields are mandatory. Please use tick (✓) sign to indicate selection.

ACCOUNT OPENING FORM FOR NON-RESIDENT INDIAN (NRI): INDIVIDUAL

Application Date

Branch Code

Tatkal Non-Tatkal

Application No.:

Reference Code

P2 Code

I/ We wish to open my/ our Non-Resident Account(s) at your branch.

TYPE OF ACCOUNT*

Savings Account:	Account Type (Select any one)	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> Both (NRE & NRO)		
	Product Variant (Select any one)	<input type="checkbox"/> Regular	<input type="checkbox"/> Indus Maxima	<input type="checkbox"/> Indus Select	<input type="checkbox"/> Indus Exclusive	<input type="checkbox"/> PIONEER
Current Account:	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> Both (NRE & NRO)			

MODE OF OPERATION*

Single Either or Survivor Anyone or Survivor Jointly Others (please specify) _____

Former or Survivor **Note:** For NRE/FCNR(B) accounts where 2nd applicant is a Resident Close Relative (As defined in Section 2(77) of the Companies Act 2013)/ For NRO accounts where 2nd applicant is a Resident Indian, mode of operation will be Former or Survivor.

CHOICE ACCOUNT NUMBER

Choose your Account Number: (Subject to availability)

NRE Preferred Account Number: NRO Preferred Account Number:

NRE OR Sum of Digits
(Select 1-10 digits of the 12 digit account number) (Mention sum of digits you want as account number)

NRO OR Sum of Digits
(Select 1-10 digits of the 12 digit account number) (Mention sum of digits you want as account number)



INITIAL DEPOSIT DETAILS

Cheque No./ DD No. / Wire Transfer Ref. No. Dated _____ Drawn on _____

Bank for _____ (currency) _____ (amount)

Debit my/ our existing IndusInd Bank Ltd NRE/ NRO A/c No. for ₹ _____

APPLICANT/S DETAILS

Description	1 st Applicant	2 nd Applicant
Cust. ID (Existing Customers)*:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
CKYC ID:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Salutation*	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Others <small>Please Specify</small> _____	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Others <small>Please Specify</small> _____
First Name*:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Middle Name:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Last Name*:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Gender*:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender
Date of Birth*:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
PAN ¹ :	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

¹For NR accounts, PAN is mandatory, in the absence of which Form 60 is to be provided.

Marital Status*:	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Others
Mother's Maiden Name*:	<input type="text"/>	<input type="text"/>
Country of Residence*:	<input type="text"/>	<input type="text"/>
No. of Years Abroad*:	<input type="text"/>	<input type="text"/>
Nationality*:	<input type="text"/>	<input type="text"/>
Residential Status*:	<input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Person of Indian Origin(PIO) <input type="checkbox"/> Overseas Citizen of India (OCI) <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/> Non Resident Indian <input type="checkbox"/> Person of Indian Origin(PIO) <input type="checkbox"/> Overseas Citizen of India (OCI) <input type="checkbox"/> Others _____ (Please specify)
Relation with 1 st Applicant:	<input type="text"/>	<input type="text"/>
Passport No*:	<input type="text"/>	<input type="text"/>
Date of Issue*:	<input type="text"/>	<input type="text"/>
Date of Expiry*:	<input type="text"/>	<input type="text"/>
Place of Issue*:	<input type="text"/>	<input type="text"/>
Type of Visa/ Labour Card/ Work Permit*:	<input type="text"/>	<input type="text"/>
<i>(Visitor & Business Visas are not allowed)</i>	<input type="text"/>	<input type="text"/>
Visa No*:	<input type="text"/>	<input type="text"/>
Visa Issuance Date*:	<input type="text"/>	<input type="text"/>
Visa Expiry Date*:	<input type="text"/>	<input type="text"/>
Preferred Address for Communication*:	<input type="checkbox"/> Overseas <input type="checkbox"/> India	<input type="checkbox"/> Overseas <input type="checkbox"/> India
Overseas Address*:	<input type="text"/>	<input type="text"/>
Landmark:	<input type="text"/>	<input type="text"/>
City/ Town/ Province:	<input type="text"/>	<input type="text"/>
State*:	<input type="text"/>	<input type="text"/>
Country*:	<input type="text"/>	<input type="text"/>
PIN/ ZIP*:	<input type="text"/>	<input type="text"/>
Mobile No.*:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Number</small>
Tel. No.:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>
Fax:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>
E-mail ID*:	<input type="text"/>	<input type="text"/>
India Address*:	<input type="text"/>	<input type="text"/>
<i>(If your preferred address for communication is India, please fill India address)</i>	<input type="text"/>	<input type="text"/>
Landmark:	<input type="text"/>	<input type="text"/>
City/ Town/ Province:	<input type="text"/>	<input type="text"/>
State*:	<input type="text"/>	<input type="text"/>
PIN/ ZIP*:	<input type="text"/>	<input type="text"/>
Mobile No.*:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Number</small>
Tel. No.:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>
Fax:	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>	<input type="text"/> <small>Country Code</small> - <input type="text"/> <small>Area Code</small> - <input type="text"/> <small>Number</small>

MINOR DECLARATION (Leave blank if not applicable)

Name of the Guardian _____ Full Address _____
 City _____ Country _____

I hereby declare that the date of birth of the minor who is my _____ is _____ and I am his / her natural and lawful guardian / guardian appointed by court order dated _____ (copy enclosed). I shall represent the said minor in all future transactions of any descriptions in the above account until the said minor attains majority. I also confirm that funds held in minor account would be utilized 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.

MARINERS INTERNATIONAL DECLARATION (Leave blank if not applicable)

- I hereby declare and confirm that I am a Non-Resident Indian and I am presently on contract with (mention name of the shipping company) _____ company registered in (mention country's name) _____ (address of the principal) I also confirm that I will inform the Bank, in case I do not renew my contract OR choose to go on a new contract OR I am unable to proceed on a new contract OR in any case in the event that my status of Non-resident Indian is altered.
- I hereby confirm that I have just returned after completion of my contract with _____ (company) registered in _____ (address of the principal). I am on a break for _____ days/ months and will be joining on a new contract on/by _____.

GENERAL DECLARATION FOR NRIs

- I / We hereby declare that I / we am / are Non-Resident Indian / Person of Indian Origin. I / We understand that the above account will be opened on the basis of the statements / declarations made by me / us, and I / we also agree that if any of the statements / declarations made herein is found to be incorrect in material particulars, you are not bound to pay any interest on the deposit made by me / us. The account will be put into use for bonafide transactions not involving any violation of the provisions of any regulations/ laws of the country of my residence and of India including the provisions under the Foreign Exchange Management Act, 1999.
- I/ We undertake to intimate the Bank immediately on my/ our return back to India with the intention of staying there for an indefinite period or for permanently and till then furnish a declaration to the Bank that I/ we continue to stay outside India and have not become residents of India under the provisions of Sec. 6 of The Income Tax Act, 1961.
- I/We agree that no claim will be made by me / us for any interest on the deposit(s) for any period after date(s) of maturity of the deposit(s).
- I/We agree to abide by the provision of the Foreign Currency (Non-Resident) Account, Non-resident (External) Account Scheme. I/ We hereby undertake to intimate you about my / our return to India for permanent residence immediately on arrival.
- I/We confirm that the amounts deposited/ invested in the account/s shall be legally belonging to me and will be through legitimate sources and will not be for the purpose of the contravention of any law including Anti Money Laundering Laws.
- I/ We authorize the Bank to automatically renew the deposit on due date for an identical period (unless otherwise specifically instructed before due date). The earlier receipt given to me will be treated as discharged receipt on due date. I/We understand that the interest applicable or renewals will be at the applicable ruling rates on the date of maturity and that the renewed receipt will be made available on my/ our presenting the duly discharged original receipt on the maturity date or later for payment.
- I/We further understand that the renewal will be in accordance with the provisions of the Reserve Bank of India Scheme in force at the time of renewal.
- I/We agree that if the premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by Reserve Bank of India in this regard.
- I/We shall not make available to any person resident in India, foreign currency against reimbursement in Rupees or in any other manner in India.
- 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 Reserve Bank of India.
- I/We have read, understood that any changes in terms and conditions applicable to this relationship would be made available to me / us on request at any IndusInd Bank Branch.
- I/We do hereby declare that information furnished in this form is true to the best of my/ our knowledge and belief.
- I/ We hereby authorize issuance of Debit card and provision of Internet Banking, Mobile Banking and Phone Banking Services as above. I/ we undertake to ratify and confirm all the user(s) do(es) or cause(s) to do through ATM, POS, Net Banking, Mobile Banking and Phone Banking Channels. This authority shall continue to be in force until anyone of us revokes by a notice in writing delivered to you.
- I/We have received the deposit rules annexed to this account opening form and agree to abide by the same.
- In case of joint accounts, instructions received from one of the account holders to stop operations will be deemed to be sufficient notice to the Bank to act upon such instructions. Further operations would be allowed only upon receipt of fresh instructions from all the account holders
- I/We consent / do not consent to receive information / service updates and product updates etc. for Marketing purposes through Telephone/Mobile/SMS/Email by the Bank/ its agents. I/We confirm that I/We have read and understood the above Declaration, and that the contact details provided on the form are correct.
- I/We hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

1 st Applicant Recent Passport Size Photograph (Sign Across)	Name: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	2 nd Applicant Recent Passport Size Photograph (Sign Across)	Name: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature of First Applicant		Signature of Second Applicant	



ANNEXURE I

NOMINATION FORM DA1 (Please choose one of the available options)

- I/We hereby confirm that I/We do not require any nomination facility on my/our bank deposit
- I/We require nomination under Section 45ZA of the Banking Regulation Act 1949, and rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of the bank deposits.

I/We _____ nominate the following person(s) to whom in the event of my/our minor's death the amount of deposit in the account may be returned by IndusInd Bank Ltd.

I agree / Do not agree for the name of my nominee to be displayed on Fixed Deposit Advice/ Statement of Account and/or other documents/ letters.

Details of Deposit		Nominee				If nominee is a minor, his/ her date of birth
Nature of Deposit & Distinguishing No.	Additional details, if any	Name	Address	Relationship with Depositor, if any	Age	

**As the nominee is a minor on this date, I/We appoint _____ 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 nominee

*Signature/s/ Thumb impression of the depositor/s

Witness(es)

Name: <input type="text"/> <input type="text"/> Address: <input type="text"/> <input type="text"/> <div style="text-align: right; margin-top: 20px;">_____ Signature***</div>	Name: <input type="text"/> <input type="text"/> Address: <input type="text"/> <input type="text"/> <div style="text-align: right; margin-top: 20px;">_____ Signature***</div>
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*Where deposit is made in the name of minor, the nomination must be signed by a person lawfully entitled to act on behalf of the minor. **Strike out if nominee is not a minor. ***Thumb impression(s) shall be attested by two witnesses.



ACKNOWLEDGEMENT

We acknowledge your nomination in form DA1 relating to Account No. in the name of

Ref. No.:

Date of Registration:

Manager:

Stamp/ Seal

ANNEXURE II

FORM NO. 60 (In absence of PAN Card)

1. Name <input type="text"/>										2. Date of Birth <input type="text"/>									
3. Father's Name (in case of individual) <input type="text"/>																			
4. Flat/ Room No. <input type="text"/>										5. Floor No. <input type="text"/>									
6. Name of premises <input type="text"/>										7. Block Name/No. <input type="text"/>									
8. Road/ Street/ Lane <input type="text"/>										9. Area/ Locality <input type="text"/>									
10. Town/ City <input type="text"/>										11. District <input type="text"/>									
12. State <input type="text"/>										12A. Country <input type="text"/>									
13. Pin code <input type="text"/>										14. Tel. No. (with STD code) <input type="text"/>									
14A. Overseas Tel. No. (with ISD code) <input type="text"/>										15. Mobile No. <input type="text"/>									
16. Amount of transaction (₹) <input type="text"/>										17. Date of transaction <input type="text"/>									
18. In case of transaction in joint names, number of persons involved in the transaction <input type="text"/>																			
19. Mode of transaction: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Card <input type="checkbox"/> Draft/Banker's Cheque <input type="checkbox"/> Online transfer <input type="checkbox"/> Other																			
20. Aadhaar No. issued by UIDAI (if available) <input type="text"/>										20A. OCI/ PIO Card No. <input type="text"/>									
21. If applied for PAN and it is not yet generated, enter date of application and acknowledgement number <input type="text"/>										<input type="text"/>									
22. If PAN not applied, fill estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) for the financial year in which the above transaction is held. Please mention income including income earned abroad during financial year.																			
a. Agricultural income (₹) <input type="text"/>										b. Other than agricultural income (₹) <input type="text"/>									
23. Details of document being produced in support of identify in Column 1																			
Document code <input type="text"/>										Passport number <input type="text"/>									
Name and address of the authority issuing the document <input type="text"/>																			
24. Details of document being produced in support of address in Columns 4 to 13																			
Document code <input type="text"/>										Document Identification number <input type="text"/>									
Name and address of the authority issuing the document <input type="text"/>																			
Verification																			
I, <input type="text"/> do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare that I do not have a Permanent Account Number and my/ our estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in accordance with the provisions of Income-tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.																			
Verified today, the <input type="text"/> day of <input type="text"/> 20 <input type="text"/>																			
Place: <input type="text"/>										(Signature of declarant)									

- Note:
- 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,
 - 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;
 - 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.
 - 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.

Instruction:

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

Document Code	Nature of Document	Proof of Identity	Proof of Address
	A. For Individuals and HUF		
01	AADHAAR Card	Yes	Yes
02	Bank/Post office passbook bearing photograph of the person	Yes	Yes
03	Elector's photo Identity Card	Yes	Yes
04	Ration/Public Distribution System card bearing photograph of the person	Yes	Yes
05	Driving License	Yes	Yes
06	Passport	Yes	Yes
07	Pensioner Photo card	Yes	Yes
08	National Rural Employment Guarantee Scheme (NREGS) Job card	Yes	Yes
09	Caste or Domicile certificate bearing photo of the person	Yes	Yes
10	Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer as per annexure A prescribed in Form 49A	Yes	Yes
11	Certificate from employer as per annexure B prescribed in Form 49A	Yes	Yes
12	Kisan passbook bearing photo	Yes	No
13	Arm's license	Yes	No
14	Central Govt. Health Scheme /Ex-servicemen Contributory Health Scheme card	Yes	No
15	Photo identity card issued by the government./ Public Sector Undertaking	Yes	No
16	Electricity bill (Not more than 3 months old)	No	Yes
17	Landline Telephone bill (Not more than 3 months old)	No	Yes
18	Water bill (Not more than 3 months old)	No	Yes
19	Consumer gas card/book or piped gas bill (Not more than 3 months old)	No	Yes
20	Bank Account Statement (Not more than 3 months old)	No	Yes
21	Credit Card statement (Not more than 3 months old)	No	Yes
22	Depository Account Statement (Not more than 3 months old)	No	Yes
23	Property registration document	No	Yes
24	Allotment letter of accommodation from Government	No	Yes
25	Passport of spouse bearing name of the person	No	Yes
26	Property tax payment receipt (Not more than one year old)	No	Yes
27	Letter issued by National Population Register containing details of name and address as an address	No	Yes
	B. For Association of persons (Trusts)		
	Copy of trust deed or copy of certificate of registration issued by Charity Commissioner	Yes	Yes
	C. For Association of persons (other than Trusts) or Body of Individuals or Local authority or Artificial Juridical Person)		
	Copy of Agreement or copy of certificate of registration issued by Charity commissioner or Registrar of Cooperative society or any other competent authority or any other document originating from any Central or State Government Department establishing identity and address of such person.	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 Sl. No. 18 and the total amount of transaction is to be filled in Sl. No. 16.

In case the estimated total income in column 22b exceeds the maximum amount not chargeable to tax, the person should apply for PAN, fill out item 21 and furnish proof of submission of application.

ANNEXURE III

INDEMNITY LETTER RELATING TO INSTRUCTIONS GIVEN BY EMAIL

To

IndusInd Bank Limited,

Notwithstanding anything to the contrary contained in any other document/ agreement, I/ We, the undersigned, hereby request and authorize you to act and rely on any instructions or communications for any purpose (including but not limited to the instructions/ communications pertaining to the operation of all my / our accounts or to any other facilities or services that may be provided by you from time to time) which may from time-to-time be or purport to be given by facsimile, untested telexes and faxes, telegraph, cable or email by me/ us including such instructions/ communications as may be purported to be given by those authorized to operate my/ our account(s) with you. I/ We understand and acknowledge that there are inherent risks involved in sending the instructions to you via facsimile, untested telexes and faxes, telegraph, cable or e-mails and hereby agree and confirm that all risks shall be fully borne by me/ us and I/ we assume full responsibility for the same, and I/ we will not hold the Bank liable for any losses or damages including legal fees arising upon your acting, or your failure to act, wholly or in part in accordance with the instructions so received.

In view of you agreeing, subject to the terms and conditions hereunder, to act upon the instructions as aforesaid, I/ We hereby irrevocably agree and undertake:

That the Bank shall be entitled to act as you see fit, without incurring any liability whatsoever to me/ us or to any other person, upon any instructions for any purpose which may from time to time be or purport to be given by facsimile, untested telexes and faxes, telegraph, cable or e-mail by me/ us (including such instructions as may be or purported to be given by those authorized to operate my/ our account(s) with you), even if such instructions or communications are not followed up by written confirmation to the Bank.

That the instructions shall be conclusively presumed for your benefit to be duly authorized by and legally binding on me/ us, and I/ We shall be fully responsible for the same.

You shall not be responsible to ensure the authenticity, validity or source of any instructions and shall not be liable if any instructions turned out to be unauthorized, erroneous or fraudulent.

That you shall be entitled (but not obliged) to keep records of our instructions given or made by facsimile, untested telexes and faxes, telegraph, cable or any other form of electronic communication in such form, physical or electronic, as you may in your sole discretion deem fit, and your records shall be conclusive and binding on me/ us. You shall be entitled to dispose of or destroy any such records at any time and determined by your sole discretion.

That you shall be authorized to disclose all instructions as you may deem fit, to your affiliated, counter parties, service providers, regulators and other authorities or where you are required by law to do so or to protect the interest of your bank.

That you shall be entitled to require any instruction in any form to be authenticated by use of any password, identification code or test as may be specified by you from time to time and I/ We shall ensure the secrecy and security of such password, code or test and I/ We shall be solely responsible for any improper use of the same and I/ We shall not make any claim on you.

That, notwithstanding the above you may, under circumstances determined by you in your absolute discretion, require from me/ us confirmation of any instructions in such form as may specify before acting on the same; and I/ We shall submit such confirmation to you immediately upon receipt of your request. Pursuant to receipt of instructions, you shall have the right but not the obligation to act upon such instructions.

That you shall not be liable to me/ us or any third party for, and that I/ We (jointly and severally) shall indemnify you and keep you indemnified from and against all claims either by me/ us or any other, actions, demands, liabilities, costs, charges, damages, losses, expenses and consequences of whatever nature (including legal fees on a full indemnity basis) and howsoever arising which may be brought or preferred against you or that you may suffer, incur or sustain by reason or on account of you having so acted whether wrongly or mistakenly or not, or of your failing to act wholly or in part in accordance with the instructions and the terms of this letter.

That I/ We confirm that I/ We have the capacity and authority to accept this document and that this document constitutes our valid, legal, effective and enforceable obligation.

That this undertaking cum indemnity letter shall be governed and construed in accordance with the laws of India and I/ We hereby submit to the exclusive jurisdiction of the courts in Mumbai.

This undertaking is an irrevocable letter and binding on my/our heirs and assigns.

Yours faithfully,

E-mail ID*:

**In case E-mail ID is not filled up here and you have opted for Instruction by Fax & E-mail, E-mail ID mentioned by you in the First Applicant details will be considered.*

Name:

Signature of First Applicant

Name:

Signature of Second Applicant

FOR BANK USE ONLY

Account Office: Indian Branch Dubai Abu Dhabi London Others

Mode of Account Opening: Face to Face Non Face to Face

CUST ID: Account No.:

Sourcing Executive Name:

Sourcing Executive Employee No.:

RM Name:

RM Employee No.:

Account opened in the CPU by:

Office Stamp:

Sourcing Executive Signature,
Employee No.

Deputy Branch Manager and Branch Manager Signature,
SS No. or Employee No. & Branch Round Stamp

Permissible Operations by the Mandate Holder/ POA:

- To draw cheques on the Account for local payments
- To deposit foreign currency cheques in the NR account on behalf of the account holder as permitted by RBI regulations
- To make NRE/ NRO Fixed deposits from balances available in the Account in Account Holder(s) names under the same Customer ID and renew such deposits for such periods as may be given in writing by the Mandate Holder
- To operate the account to facilitate making investments in India, as per the eligibility of the account holder to make investments in India
- To use Debit Card issued in respect of the mentioned Account.
- To request for cheque book
- To change address for self
- Mandate Holder can request for re-issue of Mandate Holder card and Mandate Holders ATM PIN
- To activate an account from inactive/ dormant status to active
- Remittance to the account of the account holder held outside India

Restrictions on the Mandate Holder/ POA:

- Mandate Holder cannot open new Accounts, which has to be done by the Non-Resident Account Holder himself, except for transferring funds to a Fixed Deposit/ Recurring Deposit in the name of the account holder
- The Resident Mandate Holder/ POA is not permitted to repatriate outside India funds held in the account other than to the non-resident individual account holder nor make payment by way of gift to a resident on behalf of the non-resident account holder or transfer funds from the account to another NRO account.
- Mandate holder cannot close the Account or do a premature liquidation of a Fixed Deposit/ Recurring Deposit
- Mandate Holder cannot request for re-issue of Account holder Debit Card, Account holder's PIN and request for change of address for the account holder
- Mandate Holder cannot deposit foreign currency into NRE account