AXIS BANK

CUSTOMER UPDATION FOR KYC - NRI / PIO / OCI
All fields are mandatory

BARCODE

The Branch Head Axis Bank Ltd.

Branch Sol ID | Date: D D M M Y Y Y Y | CKYCR No./KYC identifier

	Prefix	First Name	Middle Name	Last Name
Customer Name				
Maiden Name (If any*)				
Father Name* Or				
Mother Name* Or				
Spouse Name*				

Customer ID | Account Number

Occupation ☐ Salaried ☐ Self Employed ☐ Politician ☐ Retired ☐ Student ☐ Housewife ☐ Unemployed ☐   *** Occupation Code** (To be filled by branch Official)

If Salaried (To be ticked only when Occupation is Salaried) ☐ Pvt Ltd ☐ Public Ltd ☐ Proprietorship ☐ Partnership Firm ☐ Public Sector ☐ Government ☐ Multinational ☐ Trust/Association/Society/Club

If Self Employed Nature of Business (To be ticked only when Occupation is Self Employed) ☐ Information Technology ☐ Professional Service Provider ☐ Agriculture ☐ Bullion/ Gold Jewellery ☐ Stock Broker ☐ Real Estate ☐ Trader ☐ Money Lender

No of years in Business (Applicable in case of Occupation is Self Employed) ____ Years | **Annual Income** (Only Absolute numeric value to be filled) | **Gender** ☐ M ☐ F ☐ T^ | ^T stands for 'third gender'

Source of Funds ☐ Salary ☐ Business Income ☐ Investment Income ☐ Agriculture ☐ Other Please Specify (Only Alphabetical character allowed)

Constitution Code ☐ 02 - NRI ☐ 17 - OCI ☐ 18 - PIO ☐ 19 - Foreign National

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*All fields are mandatory
*OVERSEAS ADDRESS

*Landmark | *City

*State | *Country | *Pin code

*Overseas Mobile No. Country Code

Please ensure to furnish correct email ID. You will be sent monthly account statements on the email ID mentioned below

*Email Address | RKADAM@yahoo.com (preferably provide your personal email ID)

*Overseas Tel. No. (R) Country Code | *Overseas Tel. No. (O) Country Code

*Residence Type ☐ Owned ☐ Rented/Leased ☐ Ancestral/Parental ☐ Company Provided
*For change of address in Demat A/c, please submit a seperate CKYCR form along with this form.

*INDIAN ADDRESS

*Landmark | *City

*State | *Country | *Pin code

*Indian Mobile No. Country Code | **Indian Tel. No. (R) Country Code

*Residence Type ☐ Owned ☐ Rented/Leased ☐ Ancestral/Parental ☐ Company Provided | ***Preferred Mobile Number (Tick one)** ☐ Overseas ☐ Indian

Dormant Account To Be Activated: ☐ Y ☐ N | Account Number | Reason For Not Operating_____

*Preferred Communication Address (Tick one) ☐ Overseas Address ☐ Indian Address | (Address Proof Mandatory for the address mentioned on the form)

Aadhaar No. (If Applicable) ■■■■■■■■ ☐☐☐☐ | *Date of Birth D D M M Y Y Y Y

*Permanent Account Number (PAN) | Or form 60 (overleaf)

*Passport Number | *Issue Date D D M M Y Y Y Y | *Expiry Date D D M M Y Y Y Y

*Country of issue

*Visa Reference No. | *Issue Date D D M M Y Y Y Y | *Expiry Date D D M M Y Y Y Y

*Country of issue | *Types of Visa

AFFIX RECENT PHOTO & Cross sign across photo

Mandatory field*
I do hereby solemnly declare that the information provided above is up to date and correct. I accept all the Terms and Conditions mentioned overleaf and hereby submit my recent photograph and self-attested photocopy of the following.

Nationality | Address Proof | DOC. ID No.

Identity Proof | DOC. ID No.

Issuing Authority

Any updation of my details including personal information, change of address etc. will be provided by me to the bank, along with documents of proof within 2 weeks.

Customer Signature

Date D D M M Y Y Y Y | Place

ACKNOWLEDGEMENT TO CUSTOMER

	Prefix	First Name	Middle Name	Last Name
Customer Name:				

Date of Request Received D D M M Y Y Y Y | Request Option No.

Name of Branch Official | Employee Number of Branch Official

Signature

FATCA-CRS DECLARATION Please tick the applicable tax resident declaration (Any one) (Mandatory)

☐ I am a tax resident of India and not resident of any other coun try OR   ☐ I am a tax resident of the country/ies mentioned in the table below:

Please indiate the country/ies in which the entity is a resident for tax purpose and the associated Tax ID Number below:

City of Birth* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐   Country of Birth* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Address Type for Tax Purposes   ☐ Residential   ☐ Business   ☐ Registered Office

Country#	Tax Identification Number%	Identification Type (TIN or Other, please specify)%	Address For Tax Purpose
			☐ Communication Address ☐ Permanant Address ☐ Please note the address below
			Landmark
			Pin / State / Country

#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$
FATCA-CRS Certification: I have understood the information requirements of this Form (read along with the FATCA/CRS Instruction and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete and hereby accept the same.

Signature

FORM 60

Form for declaraton to be filled 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 of Income Tax Act, 1961

If applied for PAN and it is not yet generated enter date of ap plication ☐☐ ☐☐ ☐☐☐☐ (D D M M Y Y Y Y)

and acknowledgement number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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

a. Agricultural income (Rs.) ☐☐☐☐☐☐☐☐☐☐   b. Other than Agricultural income (Rs.) ☐☐☐☐☐☐☐☐☐☐

Verification

I, _____

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 fo the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax. Verified today, the _____ day of _____ 20 _____

Signature

Date ☐☐ ☐☐ ☐☐☐☐ (D D M M Y Y Y Y)   Place ☐☐☐☐☐☐☐

FOR BRANCH OFFICE USE ONLY

Request Received Date: ☐☐ ☐☐ ☐☐☐☐ (D D M M Y Y Y Y)   Forwarded To OCL Date ☐☐ ☐☐ ☐☐☐☐ (D D M M Y Y Y Y)

Signature

Request Accepted By _____   Employee Number _____   Designation _____

Certified that this form is complete in all respect & all relevant documents are obtained & verified Mode of operation and signatures of the A/c. The request may please be processed

For Axis Bank Ltd.   Branch _____   Designation   OH ☐   BH ☐   S.S. No : _____

Signature

Documents Received
☐ Certified Copies   ☐ E-KYC data received from UIDAI   ☐ Data received from Offline verificaion
☐ Digital KYC Process   ☐ Equivalent e-document   ☐ Video based KYC

TERMS & CONDITIONS

- In case of Joint A/c., separate form is required.
- I hereby state that I have no objection in authenticating myself with Aadhaar based authentication system and consent to providing my Aadhaar number, Biometric Information and/or One Time Pin (OTP) data(and/or any similar authentication mechanism) for Aadhaar based authentication for the purposes of Re-KYC for updating mydetails in my accounts with Axis Bank.
- I understand that the Biometric Information and/or OTP and/or any other authentication mechanism, I may provide for authentication shall be used only for authenticating my identity through the Aadhaar Authentication system and for obtaining e-KYC from UIDAI for that specific transaction and for no other purposes.
- I understand that Axis Bank shall ensure security and confidentiality of my personal identity data provided for the purpose of Aadhaar based authentication.I hereby state that I am physically present and provided my Biometric Information for authenticating myself and for receiving e-KYC details from UIDAI for the purpose of Re-KYC for updating my details in my accounts with Axis Bank.
- All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement with Axis Bank for business purpose and on need to know basis.
- Axis Bank shall always strive to comply with the rules and regulations as applicable from time to time on this context in accordance with the bank's Privacy policy.If I intend to revoke my consent to the sharing of the data, the products/services available to me, pursuant to the consent provided earlier, shall no longer be available to me, and I shall be required to initiate closure of such products/services.
- All the terms and conditions, processes and alternatives have been explained to me in local language as well.

DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my/our 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/We am/are aware that I/we may be held liable for it.
- My personal / KYC details may be shared with Central KYC Registry.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Customer Signature

Date ☐☐ ☐☐ ☐☐☐☐ (D D M M Y Y Y Y)   Place ☐☐☐☐☐☐☐☐