

PLEASE FILL THE FORM IN BLOCK LETTERS AND BLACK INK

 Preferred Home Branch \_\_\_\_\_ Employee Code (applicable only for Kotak Bank Staff) OPTY ID \_\_\_\_\_

|         |  |  |   |
|---------|--|--|---|
| Purpose | <input type="checkbox"/> Savings Account | <input type="checkbox"/> Third Party Products  | <input type="checkbox"/> Other Services   |
|         | <input type="checkbox"/> Current Account | <input type="checkbox"/> Life Insurance <input type="checkbox"/> Mutual Fund           | <input type="checkbox"/> Demand Draft <input type="checkbox"/> Kotak World Multi Currency Travel Card |
|         | <input type="checkbox"/> Deposits        | <input type="checkbox"/> General Insurance <input type="checkbox"/> Non-MF Investments | <input type="checkbox"/> NEFT <input type="checkbox"/> Misc. Remittance                               |
|         |  | <input type="checkbox"/> Best Compliment Card  | <input type="checkbox"/> Others _____   |

**PERSONAL DETAILS** \* Fields are Mandatory Existing CRN  YES  NO (Please fill the below details)

 \*CKYCR  New  Existing – No Change  Existing – Update Change Update CKYCR Change  Local  Global  
 C-KYCR No \_\_\_\_\_ Local change will not be updated in Central KYC Repository (CKYCR) and will only be applicable to Kotak Mahindra Bank Limited

 \*Name Title \_\_\_\_\_ (First Name) \_\_\_\_\_ (Middle Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_ (upto 40 characters only)

 Maiden Name \_\_\_\_\_ (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_ \*Mother's Maiden Name \_\_\_\_\_ (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_  
(applicable to married woman, documentary proof required) (Mention Mother's Pre-Marriage Name)

 \*DOB DD MM YY YY  Minor  Senior Citizen \*Father / \*Spouse Name \_\_\_\_\_ (First Name) \_\_\_\_\_ (Last Name) \_\_\_\_\_  
(If PAN not available Father's Name Mandatory)

 \*Residential Status  Residential Indian  Foreign National \*Citizenship  Indian  Others \_\_\_\_\_

 \*Gender  Male  Female  Transgender \*Education  Non-Graduate  Graduate  Post Graduate  Others \_\_\_\_\_

 \*Marital Status  Single  Married  Others \_\_\_\_\_ \*Annual Income  0 - 2 lakhs  > 2 - 5 lakhs  > 5 - 10 lakhs  > 10 - 25 lakhs  > 25 lakhs

 Facebook ID \_\_\_\_\_ Twitter ID \_\_\_\_\_

 \*Occupation Type Service –  Private Sector  Public Sector  Government Sector  
 Professional  Self Employed  Retired  Housewife  Student  Business  Not Categorized

**Permanent Address**

 Line 1 \_\_\_\_\_  
 Line 2 \_\_\_\_\_  
 Line 3 \_\_\_\_\_ Landmark \_\_\_\_\_  
 \*District \_\_\_\_\_ \*City \_\_\_\_\_ \*PIN Code \_\_\_\_\_  
 \*State \_\_\_\_\_ Telephone No. (STD) \_\_\_\_\_

 Residence Address /  Office Address

 Line 1 \_\_\_\_\_  
 Line 2 \_\_\_\_\_  
 Line 3 \_\_\_\_\_ Landmark \_\_\_\_\_  
 \*District \_\_\_\_\_ \*City \_\_\_\_\_ \*PIN Code \_\_\_\_\_  
 \*State \_\_\_\_\_ Telephone No. (STD) \_\_\_\_\_

 Preferred Mobile No. \_\_\_\_\_ Alternate Mobile No. \_\_\_\_\_

 Preferred Email ID \_\_\_\_\_  
(Monthly e-statements & alerts will be sent on email id mentioned here)

 \*Preferred Correspondence Address  Permanent Address  Residence Address  Office Address

**FATCA / CRS Declaration**

| Part A  |   | Yes                      | No                       |
|---|---|--------------------------|--------------------------|
| a.  | Are you Citizen of any country other than India (dual / multiple) [including Greencard] | <input type="checkbox"/> | <input type="checkbox"/> |
| b.  | Is your Country of birth is any country other than India                                | <input type="checkbox"/> | <input type="checkbox"/> |
| c.  | Are you Tax resident of ANY country / ies other than India                              | <input type="checkbox"/> | <input type="checkbox"/> |
| d.  | Do you have POA or a mandate holder who has an address outside India                    | <input type="checkbox"/> | <input type="checkbox"/> |
| e.  | Is your Address or telephone number outside India                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| If your answer to any of the above questions is a 'YES', please fill Part B |   |                          |                          |

| Part B   |                                   |  |
|--|-----------------------------------|--|
| Address for Tax Residence <small>(include City, State, Country and Pin code)</small>   |                                   |  |
| Country of Birth   | Place within the Country of Birth |  |
| <small>(In case Country of Birth is USA, however Nationality and Country of Tax Residency is other than USA, please provide documentary evidence)</small>  |                                   |  |
| Source of Wealth   | Nationality                       |  |
| <small>Please list below the details, confirming ALL countries of tax residency/ permanent residency/ citizenship and ALL Tax Identification Numbers.</small>  |                                   |  |
| Country of Tax residency   | Tax identification Number *       | Tax identification Document (TIN or functional equivalent) |
|  |                                   |  |
| *It is mandatory to supply a TIN or functional equivalent (in case TIN not available) if the country in which you are tax resident issues such identifiers. If no TIN /functional equivalent is yet available or has not yet been issued, please provide an explanation below: |                                   |  |
|  |                                   |  |

I being the beneficial owner of the account opened / to be opened with Kotak Mahindra Bank Limited and the income credited therein, declare that the above information and information in the submitted documents to be true, correct and updated, and the submitted documents are genuine and duly executed. I acknowledge that towards compliance with tax information sharing laws, such as FATCA / CRS, the Bank may be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from the account holder. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if the Bank does not receive a valid self certification from me) the Bank may be obliged to share information on my account with relevant tax authorities. Should there be any change in any information provided by me I ensure that I will intimate the Bank promptly, i.e., within 30 days. Towards compliance with such laws, the Bank may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, the Bank may also be constrained to withhold and pay out any sums from my account or close or suspend my account(s). I also understand that the account will be reported if any one of the aforesaid FATCA / CRS criteria for any of the account holders i.e. primary or joint are met.

**SMS BANKING & ALERT FACILITY**

Please select either (a) or (b) as per your requirement

| Alert Type  | SMS                      | E-mail                   |
|---|--------------------------|--------------------------|
| a) Daily Balance + Transaction and Value Added Alerts | <input type="checkbox"/> | <input type="checkbox"/> |

OR

| Alert Type   | SMS                      | E-mail                   |
|--|--------------------------|--------------------------|
| b) Weekly Balance + Transaction and Value Added Alerts | <input type="checkbox"/> | <input type="checkbox"/> |

**CHANNEL ACCESS REQUEST**

| Phone Banking            | Net Banking              | Debit Card #             |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

To apply for EMV Chip and PIN based card for Domestic usage only, **Please tick**

# Default Debit Card will be EMV Chip and PIN enabled for International usage. For Privy League Customers default Debit Card will be Privy League Platinum / Signature Chip Card depending on the program chosen.

| Special Debit Card Type   | For CPC Use   |
|---|---|
| <input type="checkbox"/> Yes, I wish to personalize my Debit card with an image | Image Code <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/><br>(To be filled by Branch, if applied for Image Card) |

**CUSTOMER DECLARATION**

I hereby declare that the above information is true and correct to the best of my knowledge. I further agree that any false / misleading information given by me or suppression of any material fact will result in withholding declining of the transaction of the Bank. I do hereby authorize the Bank to conduct my Credit History verification with CIBIL or any other Credit Rating agency. I authorize the Bank to share my transaction details with regulatory / enforcement authorities whenever such information is called for. I authorize the Branch official to update the document details in the Bank records as per copies of documents submitted by me. **SMS BANKING & ALERT FACILITY:** I understand that Alert Facility enables me to receive alerts on my Email id and /or Mobile number regarding account transactions and maintenances. I further understand that New Alerts may be added from time to time. By selecting any of the options, I expressly consent and authorize the Bank to make Telephone calls and send SMS and / or Emails to inform me on any information or updates related to Bank's existing / new Product / Services. The said consent is valid till such time I withdraw the same in writing. In case I do not wish to receive information / updates, I will register myself for "Do Not Call" on the Bank's website www.kotak.com. I am aware that alerts that have been mandated by RBI and such alerts as deemed appropriate by the Bank will be sent even if I have not subscribed for the facility. I am further aware that the transactions & Value Added Alerts will be sent to the First Holder / Guardian for all individual accounts where the mode of operation is "Singly" or "Either/Survivor" and to all holders where mode of operation is "Jointly". I understand that charges for this services as mentioned in General Schedule of Feature and Charges will be levied. **MOBILE BANKING:** I agree and understand that Mobile Banking services will be activated if opted for Net Banking access / Debit Card.

**SIGNATURE / THUMB IMPRESSION & PHOTOGRAPH**

Affix latest Coloured  
Passport Size  
Photo

(Please sign in Black ink only)

**Documents Section (BANK USE)**

| Document Name   | ID Proof | Address Proof |
|---|----------|---------------|
| Passport Number <input type="text"/>  |          |               |
| Passport Expiry Date <input type="text"/>   |          |               |
| Voter ID Card <input type="text"/>  |          |               |
| PAN <input type="text"/>  |          |               |
| Driving License <input type="text"/>  |          |               |
| Driving License Expiry Date <input type="text"/>  |          |               |
| E-UID( AADHAAR) <input type="text"/>  |          |               |
| NREGA Job Card <input type="text"/>   |          |               |
| <b>Others (any document notified by the Central Government)</b>   |          |               |
| Document Name:  |          |               |
| Number:   |          |               |
| <b>Simplified Document No</b> <input type="text"/>  |          |               |
| <input type="checkbox"/> Identity card with applicant's photograph issued by Govt. Dept.                                      |          | <b>NA</b>     |
| <input type="checkbox"/> Letter issued by a Gazetted Officer  |          |               |
| <b>Simplified Document No</b> <input type="text"/>  |          |               |
| <input type="checkbox"/> Utility Bill   |          | <b>NA</b>     |
| <input type="checkbox"/> Property or Municipal Tax Receipt  |          |               |
| <input type="checkbox"/> Bank account statement / Passbook  |          |               |
| <input type="checkbox"/> Pension or family pension payment orders (PPOs)  |          |               |
| <input type="checkbox"/> Letter of allotment of accommodation from employer issued by State or Central Government departments |          |               |
| <input type="checkbox"/> Documents issued by Govt. Dept. of Foreign Jurisdiction / Foreign Embassy / Mission in India         |          |               |

**KYC Verification Carried Out By (BANK USE)**

Emp. Name

Emp. Designation

Emp. Code  Emp. Branch

Date

Employee Sign

**Approved By**

Sales Official  Sign, Code & Designation

Branch Official  Sign, Code & Designation

Category:  D  A  B  C  S  G  DS  DG

Customer Segment:  RL  CB \*Risk Profile  H  M  L

Additional Info  (If Walk-In, then FI done by) (LOV's e.g. PEP, Illiterate, Blind etc. are available on intranet)

Source Code  LG Code / Promo Code

LC Code  LOB

RM Code  Corporate/Group Co. Code

Group Co. Emp Code  Branch Code

Classification  Sub-Classification  Key  Associate

Authorization Letter 1 (only for Privy)  Authorization Letter 2 (only for Privy)

\*Account Type  Normal  Small  Simplified (for low risk customers)

Branch / Acquisition staff has meet customer at communication address

Employee Name (Emp ID) & Signature

**RPC USE**

FATCA Received  YES FATCA Reportable  YES Country

Re-KYC  YES CRN Created

RPC Stamps

**DOCUMENTS COLLECTED**

EMP\_CERT  Form 60  CPV  BC  PASSBOOK

MARRIAGE  SPBS  OTHERS