## DORMANT ACCOUNT ACTIVATION FORM



(Only for Resident Individual customers)

Please fill the form in Black Ink and in CAPITAL LETTERS.		
Account Number		
Reason for not transacting / dormancy:		
I/We hereby request you to activate my/our account, basis the following documents		
PRIMARY HOLDER DETAILS		
Customer ID CKYC ID (If applicable)		
Customer Name		
Aadhaar No.		
Voter ID Expiry Date DD MM YYYYY		
Driving License Expiry Date DD MM YYYYY		
Passport Expiry Date D D M M Y Y Y Y		
NREGA National Population Register (NPR)		
PERMANENT ADDRESS		
I wish to change my permanent address  There is no change in my permanent address		
Aadhaar Passport Driving License Voter ID NREGA NPR		
Line 1		
Line 2		
Landmark		
City State Pin Code		
COMMUNICATION / MAILING ADDRESS		
I wish to change my mailing address  There is no change in my mailing address		
Same as above / Self declaration with CPV This is my Residence Place of work		
Line 1 Line 2		
Landmark		
City State Pin Code		
City State I I II Code		
TELL US WHAT YOU DO FOR A LIVING		
Occupation (Select Anyone)     Public Private Government		
Corporate Name		
1b) Self Employed Doctor CA Architect Lawyer Consultant Entertainment		
Professional Alternate Medical Practitioner Beautician Others		
1c) Self Employed Business Sole Proprietorship Partnership/Company No. of years in business <a> &lt; = 5 yrs</a> < = 5 yrs		
1d) Any other Occupation Homemaker Retired Farmer Politician Student Minor		
2) Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth		
3) Gross Annual Income (INR)		
FATCA DETAILS		
Place of Birth Country of Birth Country of Tax Residence		
For Toy Desidents of countries in addition to India, places associate below.		
For Tax Residents of countries in addition to India, please complete below:		
Country of Tax Residence Foreign Tax Identification Number TIN Issuing Country		



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Customer ID
Customer Name
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Voter ID Expiry Date DD MM YYYYY
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I wish to change my mailing address  There is no change in my mailing address  Place of work
Same as above / Self declaration with CPV This is my Residence Place of work
Line 1
Line 2 Landmark
(If any)
City State Pin Code
TELL US WHAT YOU DO FOR A LIVING
Occupation (Select Anyone)     Public Private Government
Corporate Name
1b) Self Employed Doctor CA Architect Lawyer Consultant Entertainment
Professional Alternate Medical Practitioner Beautician Others
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1d) Any other Occupation Homemaker Retired Farmer Politician Student Minor
2) Source of Income Salary Business Professional Fees Investments Agriculture Family Wealth
3) Gross Annual Income (INR)
Please submit the GST annexure if you are registered or exempt under GST
4) Are you a PEP* or related to one? Yes No
*Definition: Politically Exposed Persons (PEPs): Politically exposed persons are individuals who are or have been entrusted with prominent public functions by a country. Examples of PEPs include, but not limited to: (i) Heads of States or of Governments (ii) Senior politicians (iii) Senior government / judicial / military officers (iv) Senior executives of state-owned corporations (v) Important political party officials (vi) Senior Indian Diplomatic personnel posted outside the country. The term PEP also includes the families and close associates of the PEPs mentioned above.
FATCA DETAILS
Place of Birth Country of Birth Country of Tax Residence
For Tax Residents of countries in addition to India, please complete below:
Country of Tax Residence Foreign Tax Identification Number TIN Issuing Country



## **DECLARATION & SIGNATURE(S)**

- I/We, the undersigned, have read, understood and agree to absolutely and unconditionally abide by and be bound by the Terms and Conditions displayed on website www.idfcfirstbank.com as revised from time to time by IDFC FIRST Bank Limited. In relation to all of my/ our accounts, for present and future, maintained/opened/to be maintained/ to be opened with IDFC FIRST Bank Limited.
- I certify that I have declared my status as per applicable FATCA / CRS rules in India as notified by Government of India / Central board of Direct Taxes (CBDT) / Reserve Bank of India ( RBI ) in this regard.
- 3. I certify that the information stated in this form and supporting documentary evidence provide by me is to the best of my knowledge and belief true, correct and complete and that I have not withheld any material information / document that may affect the assessment/ categorization of the account at a US Reportable account/ Other Reportable account or otherwise.
- 4. I understand, acknowledge and authorize that as per the provision 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.
- 5. I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in this form and signed by me as well as in the documentary evidence provided by me or if any certification become incorrect.
- 6. I also agree that our failure to disclose any material fact known to me now or in future, may invalidate my application and IDFC FIRST 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.
- 7. I agree to Furnish any particulars / information that is called upon me by IDFC FIRST Bank on account of any change in law either in India or abroad in the subject matter herein.
- 8. 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 forthwide and provide the bank with all information/ documents that may be necessary for any proceeding before GOI/RBI/ Income Tax Authorities.
- 9. I/We state, declare, confirm and agree that the Bank has duly explained to me/us that submission of a copy of my / our Proof of Possession of Aadhaar Number (OVD) containing Aadhaar number, as an Officially Valid Document (OVD) is not mandatory and I/We have the option to submit any one of the documents as per the list of Officially Valid Documents (updated by the RBI from time to time).
- 10. I/We further state, declare and confirm that I am/ We are providing my/ our Proof of Possession of Aadhaar number ( OVD ) as an officially valid document voluntarily in accordance with extant rules and regulations; I/ We authorize IDFC FIRST Bank to redact/blacken out the Aadhaar number through appropriate means on my / our behalf ".
- 11. I hereby authorise IDFC FIRST Bank and its vendors to access my Aadhaar number and fetch my details. I understand that IDFC FIRST Bank and its vendors will not be storing or sharing the same in any manner.
- 12. I/We hereby consent Bank to report my KYC at CERSAI as and when it's required.

Customer has signed in my presence.

13. I/We hereby consent to receive CKYC related information from Central KYC Registry and Bank through SMS and/or Email.

I/We hereby give my/ our consent to download my/ our KYC Records from the Central KYC Registry ( CKYCR ), only for the purpose of verification of my/ our identify and address from the database of CKYCR Registry. I/We understand that my / our KYC Record includes personal information such as my name, address, date of birth, PAN number etc.

PRIMARY HOLDER SIGNATURE	JOINT HOLDER SIGNATURE	
dama.	Name	
Name	Name	
WITNESS 1	WITNESS 2	
(Required only if applicants use thumb impressions)	(Required only if applicants use thumb impressions)	
FOR BANK USE ONLY		
Service Request No.		
Employee ID		
Name of the Branch Official		
	Signature of the Branch Official	
I have seen and verified the original OVD docume	-	