

Annexure D -Request for dormant account activation and updation of Re-KYC (Foreign National Customer)

 Date : / /

 Service Request No.:

 Account Number/s:

Dear Sir / Madam,

I / We, holder/s of above-mentioned Account/s with your Bank, request you to activate my / our Account, which is in Dormant status. The Reason for no operations in the account: _____

I/We confirm enclosing Self-attested copy of Officially Valid Documents (Identity and Address proof) for account holder/s.

Re-KYC (updation of KYC information):

Profile / Personal Details:

- There is no change in my profile. Attached herewith are the KYC documents for the purpose of Re-KYC updation.
- I wish to update my profile details as mentioned below. Attached herewith are the KYC documents matching with the new details for the purpose of Re-KYC.

Latest photograph
(Mandatory)

Change in Profile / Personal Details:

Please update the following information in your records. Also enclosed is the self-attested copy of my Passport, Visa/Permit and FRRO Registration.

| | |
|---|--|
| Name (in CAPITAL LETTERS) | <input type="text"/> |
| Passport Details | |
| Passport Number | <input type="text"/> |
| Date of Issue | <input type="text"/> |
| Date of Expiry | <input type="text"/> |
| Visa Details | |
| Visa Type | <input type="text"/> |
| Date of Issue | <input type="text"/> |
| Date of Expiry | <input type="text"/> |
| FRRO Registration Details | |
| Service Number | <input type="text"/> |
| Valid From | <input type="text"/> |
| Valid To | <input type="text"/> |
| Occupation | If Student/self-employed/businessman (please specify nature of business) <input type="text"/> |
| Annual Income (INR) | <input type="text"/> |
| Name of University (If Student)/Organization (if employed) | <input type="text"/> |
| Permanent Account Number | <input type="text"/> |
| Address | <input type="text"/> <input type="text"/> |
| Mobile Number | <input type="text"/> |
| Email ID | <input type="text"/> |

Customer's Sign
(in case of change in contact details)

FATCA / CRS Declaration:

| Part A | | | |
|---|--|--------------------------|--------------------------|
| | | Yes | No |
| a. | Are you citizen of any country other than India (dual / multiple [including Green card]) | <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 man date holder who has an address outside India | <input type="checkbox"/> | <input type="checkbox"/> |
| e. | Is you 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 _____ | | |
| | | *City _____ |
| *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> | | |
| <small>☞</small> | *Country of Tax residency | Tax identification Number* |
| | | Tax identification Document (TIN or functional equivalent) |
| <small>*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.</small> | | |

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.

I understand that any inaccurate, incomplete or false disclosure of statement of financial transaction or reportable account by me would lead to penal consequence on the Bank under applicable law. The Bank shall be entitled to take any necessary action and recover from me such amount levied due to such inaccuracy, incompleteness or false disclosure. I shall indemnify the Bank in respect of all or any liabilities incurred by Bank, by reason of any of the information or particulars given by me, being incorrect or false or being suppressed or omitted.

I do hereby solemnly declare, that the information provided above with respect to my account is true, correct and complete and the said details may be updated in the Bank records.

Signature of the Account Holder

Customer Acknowledgement Copy: (Applicable if submitted at the branch)

Service Request No: _____

 Acknowledgement date:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| D | D | / | M | M | / | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

Signature of the Bank Official: _____