

INSTITUTIONAL ACCOUNT OPENING FORM

(For Trusts, Associations, Societies, Clubs and Government Entities)



IDFC BANK

Please fill the form in Black Ink and in CAPITAL LETTERS.
ALL fields marked “**” are mandatory.

Date of Application

D D M M Y Y Y Y

If entity is an existing customer of IDFC Bank, simply share the Customer ID here and fill only the sections marked “✓”

TELL US ABOUT YOUR ENTITY

***Entity Name**

Account Title

***Entity Type**

<input type="checkbox"/> Trust	<input type="checkbox"/> Association	<input type="checkbox"/> Section 8 Company
<input type="checkbox"/> Society	<input type="checkbox"/> Government	<input type="checkbox"/> Liaison/Project/Branch office of TASC entity
<input type="checkbox"/> International Unregistered Club (Rotary/Lions etc)		

***Segment**

<input type="checkbox"/> Education	<input type="checkbox"/> Healthcare	<input type="checkbox"/> NGO	<input type="checkbox"/> Religious Institution
<input type="checkbox"/> Clubs	<input type="checkbox"/> Sports Association	<input type="checkbox"/> Trade Association	<input type="checkbox"/> Professional Association
<input type="checkbox"/> Housing Society/RWA	<input type="checkbox"/> Private Trust	<input type="checkbox"/> Retiral Trust	<input type="checkbox"/> Central Govt. Org.
<input type="checkbox"/> State Govt. Dept./Agency	<input type="checkbox"/> Govt. Scheme Funds	<input type="checkbox"/> Local Authority/Body	<input type="checkbox"/> Defence
<input type="checkbox"/> Co-operative Credit Society	<input type="checkbox"/> Quasi-Govt./Autonomous Body		

***Sub-Segment**

<input type="checkbox"/> School	<input type="checkbox"/> College	<input type="checkbox"/> University	<input type="checkbox"/> National Institutes (IIT/IIM/NIT etc.)
<input type="checkbox"/> Hospital	<input type="checkbox"/> Research Centre	<input type="checkbox"/> CSR Foundation	<input type="checkbox"/> Charitable/Social/Welfare
<input type="checkbox"/> Temple	<input type="checkbox"/> Church	<input type="checkbox"/> Mosque/Dargah	<input type="checkbox"/> Gurudwara
<input type="checkbox"/> Endowment Board	<input type="checkbox"/> Diocese	<input type="checkbox"/> Waqf Board	<input type="checkbox"/> SGPC
<input type="checkbox"/> Sports Club	<input type="checkbox"/> Private Club	<input type="checkbox"/> Gymkhana	<input type="checkbox"/> Family Trust
<input type="checkbox"/> PF Trust	<input type="checkbox"/> Gratuity/SA trust	<input type="checkbox"/> Pension Fund Trust	<input type="checkbox"/> ESOP Trust
<input type="checkbox"/> Gram Panchayat	<input type="checkbox"/> Office of DDO/BDO	<input type="checkbox"/> Municipal Corporation	<input type="checkbox"/> Municipality/Municipal Council

***PAN**

Form 60 & 61 **Form 49A** (If yes, please share a copy of form 49A)

We are exempt from the requirement of PAN
(We shall submit IT exemption certificate and relevant declaration)

***Date of Incorporation**

D D M M Y Y Y Y

Website Address

***COMMUNICATION ADDRESS**

Address for All Communication from IDFC Bank Ltd.

Landmark **City** **District**

(If any)

State **Country** **Pin Code**

Contact Details Mobile Landline No.

Fax

(STD Code) (Number) (STD Code) (Number)

E-mail



IDFC BANK

***REGISTERED ADDRESS**

Registered Address Same as above Yes No (If no, please fill in below)

Landmark (If any) _____ **City** _____ **District** _____

State _____ **Country** _____ **Pin Code** _____

Contact Details Mobile _____ Landline No. _____ (STD Code) _____ (Number) _____

Fax _____ (STD Code) _____ (Number) _____

E-mail _____

ENTITY PROOF

***Entity Proof**

Name of Document _____

ID Number (if applicable) _____ Expiry Date (if applicable) _____

***Address Proof**

Name of Document _____

ID Number (if applicable) _____ Expiry Date (if applicable) _____

Additional Documents Shared

IT Registration u/s 12AA or 80G (for Savings Account) Constitutional Document (Trust Deed/Bye-Laws/MOA/Constitution/Rule Book)

Schedule 3/Proof of Appointment of the persons signing the documents List of present Trustees/Governing body members

***CREDIT FACILITY FROM ANY OTHER BANK?**

I/We declare that we do not enjoy credit facility from other bank(s) I/We enjoy credit facility from other bank(s), details as below

Bank and Branch	Facility Type	Account Number	Amount

✓ WHICH OF OUR SOLUTIONS WOULD THE ENTITY LIKE FOR YOUR BUSINESS?

<input type="checkbox"/> Current Account	<input type="checkbox"/> #Savings Account
Variant	Variant
<input type="checkbox"/> Dynamic Account <input type="checkbox"/> Regular Account	<input type="checkbox"/> Dynamic Account <input type="checkbox"/> Regular Account
If Regular Account _____	If Regular Account _____
<input type="checkbox"/> Government Account	<input type="checkbox"/> Government Account

Account Branch _____

Do you wish to opt for our Point of Sale (POS) terminal? Yes No

Do you wish to opt for our Payment Gateway facility? Yes No

Mode of Operation Singly Jointly Either or As per the Trust/Board Resolution/Account Opening Authority Letter

Number of Authorised Signatories _____

Cheque Book Yes No If Yes 25 leaves 50 leaves

Statements Physical **Frequency** Monthly Via E-mail **Frequency** Daily Weekly Fortnightly Monthly

Doorstep Banking (Cheque pickup and drop only) Yes No

- Locations Registered Address Communication Address
- Frequency Ad-hoc Beat - Daily **OR** Mon Tue Wed Thurs Fri Sat
- Contact Person _____ Mobile _____

SMS Alerts Yes NO (SMS will be sent to the mobile number mentioned in the Communication Address)

*(Based on eligibility as per RBI guidelines)



IDFC BANK

Title	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	<input checked="" type="checkbox"/> SIGNATORY 3
Name	<input type="text"/> <small>*FIRST NAME *MIDDLE NAME *LAST NAME</small>	
Designation	<input type="text"/>	
Internet Banking	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Transact <input type="checkbox"/> View Debit/ATM <input type="checkbox"/> Yes <input type="checkbox"/> No Card Usage <input type="checkbox"/> International <input type="checkbox"/> Domestic Card	
Name as you would like on your Debit Card:	<input type="text"/>	
If Existing IDFC Bank Ltd. customer	Customer ID <input type="text"/>	(If yes, you can leave the rest of this section blank)
*DOB	<input type="text"/> <small>D D M M Y Y Y Y</small>	*PAN <input type="text"/> DIN <input type="text"/>
*Aadhaar No.	<input type="text"/>	
*Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	*Nationality <input type="text"/>
*Mother's Maiden Name	<input type="text"/>	
Landline No.	<input type="text"/> <small>(STD Code)</small>	<input type="text"/> <small>(Number)</small>
*E-mail ID	<input type="text"/>	
Identity Proof	Name of Document <input type="text"/>	
	Document ID No. <input type="text"/>	Expiry Date <input type="text"/> <small>D D M M Y Y Y Y</small>

FCRA DECLARATION

(Mandatory to be filled for both regular accounts and FCRA accounts for all entities other than Retiral Trusts and Government Departments)

- Yes, I/We wish to open a FCRA account for receipt of foreign contribution (Donations from Foreign Nationals/Entities) in accordance with the Foreign Contribution Regulation Act, 2010.** We confirm that the approval from Ministry of Home Affairs (MHA) is being sought for crediting foreign contribution in this account. We are aware that this account can be used only after the approval has been received from the MHA and this account will be exclusively used for receipt of foreign contribution in accordance with the Foreign Contribution Regulation Act, 2010 and credit of any local funds will not be allowed in this account. Also foreign contribution received in this account will be utilised by us for the purpose for which it was received and all debits will be in accordance with the FCRA Act, 2010.
- No, I/We wish to open a regular account.** We confirm that as a part of the routine operations, the entity will NOT receive any foreign contribution (donation from Foreign Nationals/Entities) in this account. We further confirm that this account will be used exclusively for the credit of local funds and any credit of foreign contribution will NOT be allowed in this account.

BUDGETARY ALLOCATION DECLARATION

(For Savings Account being opened by Government Departments only)

We confirm that we do not receive budgetary allocation for performance of our functions. We confirm that this account is being opened to receive funds for the _____ scheme/project.

DECLARATION FOR EXEMPTION FROM REQUIREMENT OF PAN

We declare that as per provisions of the Section 139A of the Income Tax Act, we are not required to obtain a PAN from the Assessing Officer of the Income Tax Dept. Hence we do not have any PAN number allotted to us. Kindly accept this application without the submission of PAN and also allow cash deposit in our account without submission of PAN or Form 60/61. Further, the interest income on the Fixed Deposits held with the Bank is not subject to TDS provision u/s 194A of the Income Tax Act, 1961. We hereby submit documents in support of what is mentioned above.

Name _____

Name _____

Name _____

DECLARATION (Please read carefully and sign at the end of this section after you have filled in all the details in the form)

1. I/We wish to avail the banking facilities/products from IDFC Bank Limited ("IDFC Bank"), and have read, understood and agree to the Terms and Conditions displayed on the website of IDFC Bank i.e. www.idfcbank.com, which may be amended by IDFC Bank from time to time and hosted and notified on the website of IDFC Bank. 2. I/We have read, understood and agree to the charges/costs, mentioned in the extant Schedule of Charges. This Schedule of Charges is also displayed on www.idfcbank.com 3. I/We agree to abide by and be bound by all applicable rules/regulations/instructions/guidelines issued by the Reserve Bank of India, and under the FEMA regulations, 2000 governing EEFC Accounts, the Foreign Exchange Management Act, 1999 and Foreign Account Tax Compliance Act, 2010 (to the extent applicable to India) and the Common Reporting Standards (CRS), in force from time to time. I/We have declared our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 (the Act) as notified by Central Board of Direct Taxes (CBDT) in this regard. 4. I/We authorise IDFC Bank to conduct my/our credit history verification with CIBIL or any other credit rating agency and acknowledge that IDFC Bank shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me/us to IDFC Bank. I/We declare that I/we have not availed any credit facility from any bank or have obtained NOC from such bank(s) for opening of a current account with IDFC Bank. 5. I/We agree to furnish and intimate to IDFC Bank any other particulars that we are called upon to provide on account of any change in law/statutory requirements either in India or abroad. I/We authorize IDFC Bank to exchange, share or part with all the information provided herein with financial institutions/agencies/statutory bodies/other such persons, as may be required by IDFC Bank. I/We shall not hold IDFC Bank or its agents/representatives liable for using/sharing such information. 6. I/We hereby declare that the information provided herein as well as in the documentary evidence provided by me/us to IDFC Bank (the "Customer Information") is true, correct and complete in all aspects to the best of my/our knowledge and that I/we have not withheld any Customer Information that may affect the assessment/categorization of the account as a Reportable account or otherwise. I/We further agree that any false/misleading Customer Information given by me/us or suppression of any material fact will render my/our account liable for closure and the bank shall have the right to initiate any action, under law or otherwise. 7. If any of the information provided here is incorrect, I/we hereby agree to indemnify and keep indemnified IDFC Bank, affiliates and their successors or assignees. 8. I/We agree and understand that IDFC Bank reserves the right to reject my/our account opening application form/request without assigning any reason thereof and without being liable to me/us in any manner whatsoever. 9. All fees/charges to be paid shall be exclusive of goods and services tax (GST), as may be applicable. 10. IDFC Bank will provide me/us Services Accounting Code (SAC) and this will be quoted in all invoices/credit/debit notes. 11. IDFC Bank will determine if I/We are related party based on documents available or submitted for this purpose. 12. IDFC Bank will determine the location of service provided which shall be binding on me/us. 13. I/We shall provide the Bank with the details of exemption or lower rate of tax, if any supported by relevant documents prior to availing of services. 14. For smooth realisation of input tax credit, I/We shall validate the invoices uploaded in the GSTN portal by the Bank between the 10th - 15th day of the month succeeding the relevant period. In case of any discrepancies, I/We shall bring it to the notice immediately. 15. IDFC Bank will issue invoices on a monthly basis. The contents of all the invoices, debit notes, credit notes, etc. will be as per rules and guidelines in the GST law.

Would you like IDFC Bank to contact you and tell you about new products, features and offers? Yes No

RECENT Colour Photograph	Name of Applicant 1 _____ <div style="border: 1px solid black; height: 40px; width: 100%;"></div> Signature of Applicant (i)	RECENT Colour Photograph	Name of Applicant 2 _____ <div style="border: 1px solid black; height: 40px; width: 100%;"></div> Signature of Applicant (ii)
stamp		stamp	
RECENT Colour Photograph	Name of Applicant 3 _____ <div style="border: 1px solid black; height: 40px; width: 100%;"></div> Signature of Applicant (iii)		
stamp			

BANK USE SECTION

Payment Details Amount Cheque/DD NEFT/RTGS

Cheque No. Bank Name _____ Branch Name _____

Customer ID Account No.

Branch Code _____ Branch Name _____ Product Code _____

Sourcing Branch Code _____ Lead Generator _____ Lead Warmer _____

Lead Converter _____ Biz/Segment Code _____ Profit Centre _____

Lead ID Promo Code RM Code

Banker Certification

I have met the customer at his: Communication Address Business Address Other _____

I have seen the original KYC documents and returned these to the customer. Copy/Photo taken for record

The customer has signed in my presence

Signature/Stamp

Name _____ Date

D D M M Y Y Y Y

Employee ID _____

ANNEXURE 1 - FATCA/CRS DECLARATION

A		Incorporation Information	Details
		Place of Incorporation	
		Country of Incorporation	
		Company Identification Number	
B		Declaration of Tax Residency	
	Sr. No.	Country(ies) of Tax Residency	Tax Identification Number
C		Exclusion Category, if applicable, for Tax Residents outside India (Refer Glossary)	Details
1		US Persons	
2		Other than US Persons	

Note: Please attach a copy of the Tax Residency Certificate/Copy of Incorporation or Equivalent Document for each of the countries mentioned above.

ANNEXURE 2 - FATCA/CRS DECLARATION

A. Listed entity/its related entity	Yes	No
a) Whether the entity is a listed entity? If yes, Listed in <input type="checkbox"/> NSE <input type="checkbox"/> BSE <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>
b) Whether the entity is a related entity* of a listed entity? Specify the name of the listed company _____ Listed in <input type="checkbox"/> NSE <input type="checkbox"/> BSE <input type="checkbox"/> Others _____ (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>
* An entity is a related entity of another entity if either entity controls the other entity, or the two entities are under common control (i.e., Ownership of more than 50% of the votes/value in an entity)		
B. Non - Individuals other than Listed entity/its related entity (Tick applicable category)		
a) Government Entity	<input type="checkbox"/>	<input type="checkbox"/>
b) International Organization	<input type="checkbox"/>	<input type="checkbox"/>
c) Central Bank	<input type="checkbox"/>	<input type="checkbox"/>
d) Entity wholly owned by a,b, or c above	<input type="checkbox"/>	<input type="checkbox"/>
e) Tax-Exempt Entity engaged in a Charitable Purpose	<input type="checkbox"/>	<input type="checkbox"/>
C. Business		
a) Holding Company (with subsidiaries engaged in non-financial trade or business)	<input type="checkbox"/>	<input type="checkbox"/>
b) Company providing, financing and hedging services to related entities	<input type="checkbox"/>	<input type="checkbox"/>
D. Income/Assets Criteria		
a) 50% or more of the income in preceding financial year is from trading/business activities AND	<input type="checkbox"/>	<input type="checkbox"/>
b) 50% or more of the assets in preceding financial year are held for trading/business purposes		

ANNEXURE 3 - BENEFICIAL OWNERSHIP DECLARATION

(Not to be filled in for listed entities, subsidiaries of listed entities, Government Entities, and International Organisations)

Please tick the relevant option below:

The following natural person(s) (listed in table below) exercise control or ultimately have a controlling ownership interest i.e. having ownership/entitlement of the specified limit (**Note 1**) of shares/capital/profit/property or exercise control through other means such as voting rights, agreement, arrangement etc.

OR

There are no natural person(s) who exercise control or ultimately have a controlling ownership interest as stated above, therefore details of all partner(s) (for partnership)/trustees (for trust)/senior managing official (for unincorporated bodies)/directors/senior management (for companies) who are natural person(s) as stated in the below table.

Sr. No	Name	Please tick the type of Address mentioned R - Residence / O - Office	Date of Birth	Gender	Control Details	
					Type (Note 2)	%
1.		<input type="checkbox"/> R <input type="checkbox"/> O				
2.		<input type="checkbox"/> R <input type="checkbox"/> O				
3.		<input type="checkbox"/> R <input type="checkbox"/> O				
4.		<input type="checkbox"/> R <input type="checkbox"/> O				
5.		<input type="checkbox"/> R <input type="checkbox"/> O				

Sr. No	Nationality	Documents (Note 3)		Father's Name (Note 4)	Occupation (Service/Business/ Others)	Country of Birth	Country of Tax Residence	Tax Identification Number
		PAN ⁵	Document Collected					
1.								
2.								
3.								
4.								
5.								

Note:

- 25% or more in case of a company and 15% or more in other type of entities
- Types of control - please use the applicable one
(a) Ownership (b) Other means (c) Senior managing official (d) Trustee (e) Settlor (f) Protector (g) Beneficiary (h) others
- Please quote PAN⁵. Please provide a copy of any of the following documents: Passport/Voter ID/Driving License/Aadhaar/UIDAI letter and mention the same in the space above.
- Father's name is mandatory if PAN is not provided

⁵Applicable for Indian nationals/resident individuals. For other countries, functional equivalent of PAN (like Tax identification number or any unique number like SSN) can be provided

I/We agree that I/We will notify **IDFC Bank** without delay of any changes to the Beneficial Owner/Controlling natural person, as declared in the table above.

1. Signature of Authorised Signatories:

Name _____

Designation _____

Date

D D M M Y Y Y Y

2. Signature of Authorised Signatories:

Name _____

Designation _____

Date

D D M M Y Y Y Y

3. Signature of Authorised Signatories:

Name _____

Designation _____

Date

D D M M Y Y Y Y



IDFC BANK

ANNEXURE 6 - GST ANNEXURE

CUSTOMER DETAILS

Branch Name [Grid]

Customer Name [Grid]

GST Status Registered Unregistered

Are you exempted from GST? Yes (Please submit documentary evidence for the exemption) No

If exempt Customer level exemption Account level exemption

Related person to IDFC Bank Yes No (If yes, please note that GST as may be applicable, needs to be paid by the related person.)

(Refer Glossary of terms for definition of related person)

If Registered then Provide the State wise GST details

Please mention the primary GSTN for this account as the first GSTN.

Table with 5 columns: Sr.No., Name of the State, GST Registration Number#, Address as per GSTN records\$, Remarks. Multiple rows for data entry.

\$ Address as per GSTN records is the address of receiving the service. If you have more than 10 GST Registration Numbers; please use another copy of this sheet.

Name _____ Name _____ Name _____

Designation _____ Designation _____ Designation _____

Signature and Stamp box

Signature and Stamp

Signature and Stamp box

Signature and Stamp

Signature and Stamp box

Signature and Stamp

GLOSSARY OF TERMS

Definition of related person under GST is as under:

- (a) persons shall be deemed to be "related persons" if-
 - (i) such persons are officers or directors of one another's businesses;
 - (ii) such persons are legally recognised partners in business;
 - (iii) such persons are employer and employee;
 - (iv) any person directly or indirectly owns, controls or holds twenty-five per cent or more of the outstanding voting stock or shares of both of them;
 - (v) one of them directly or indirectly controls the other;
 - (vi) both of them are directly or indirectly controlled by a third person;
 - (vii) together they directly or indirectly control a third person; or they are members of the same family;
- (b) the term "person" also includes legal persons;
- (c) persons who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever described, of the other, shall be deemed to be related.

Explanation I. - The term "person" also includes legal persons.

Explanation II. - Persons who are associated in the business of one another in that one is the sole agent or sole distributor or sole concessionaire, howsoever described, of the other, shall be deemed to be related.

U.S. Persons

- a) A tax resident of U.S.
- b) A U.S. entity or organization incorporated in U.S.
- c) A partnership or a corporation organized in the U.S. or under the law of the U.S. or any states thereof
- d) A trust- (i) where a court within the United States would have authority under applicable law to render orders or judgments concerning substantially all issues regarding administration of the trust, and (ii) one or more U.S. persons have the authority to control all substantial decisions of the trust,
- e) An estate of a decedent that is a citizen or resident of the United States

Exclusion Categories for U.S. Persons

- a) A corporation the stock of which is regularly traded on one or more established securities markets
- b) Any corporation that is a member of the same expanded affiliated group as defined in section 1471(e)(2) of the U.S. Internal Revenue Code, as a corporation described in clause (i)
- c) The United States or any wholly owned agency or instrumentality thereof
- d) Any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing
- e) Any organization exempt from taxation under section 501(a) of the U.S. Internal Revenue Code or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code
- f) Any bank as defined in section 581 of the U.S. Internal Revenue Code
- g) Any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code
- h) Any regulated investment company as defined in section 851 of the U.S. Internal Revenue Code or any entity registered with the U.S. Securities and Exchange Commission under the Investment Company Act of 1940 (15 U.S.C. 80a-64);
- i) Any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code
- j) Any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code
- k) A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any State
- l) A broker as defined in section 6045(c) of the U.S. Internal Revenue Code
- m) Any tax-exempt trust under a plan that is described in section 403(b) or section 457(g) of the U.S. Internal Revenue Code

Exclusion Category – For other than U.S. Persons

- a) A corporation, the stock of which is regularly traded on one or more established securities markets
- b) Any corporation that is a related entity of a corporation mentioned above:
- c) A Governmental Entity
- d) An International Organisation
- e) A Central Bank
- f) A Financial Institution