

# IndusInd Bank

## Customer Updation Form for Non Individual Entities

### ACCOUNT HOLDER DETAILS

Customer ID:

Account No. (New):

Account No. (Old):

Account Title:

PAN No.:

Email ID:

Date of Commencement of Business/Incorporation:

#### CONSTITUTION:

HUF     
  Partnership     
  Public Ltd     
  Private Ltd     
  FI/PSU     
  Trust  
 Proprietorship     
  Club     
  Society     
  Association     
  Govt. Dept.     
  LLP  
 Others (Pls. specify) \_\_\_\_\_

#### NATURE OF ACTIVITY/ BUSINESS:

Financial Service     
  Stock Broking     
  Real Estate     
  Trader     
  Manufacturing  
 Import/ Export     
  Non-Profit Organization     
  Others (Pls. specify) \_\_\_\_\_

ANNUAL TURNOVER: \_\_\_\_\_

#### REGISTERED ADDRESS:

Address\*:

Flat No. and Bldg. Name:

Road Name and Area Landmark:

City and State:

Country:  PIN Code:

Telephone Number:

Rented     
  Owned

#### COMMUNICATION ADDRESS:

Address\*:

Flat No. and Bldg. Name:

Road Name and Area Landmark:

City and State:

Country:  PIN Code:

Telephone Number:

Mobile Number:

Rented     
  Owned

I wish to update my Registered /Communication address as mentioned above and for which address proof is also attached\*: (please tick)  Yes  No

#### PERSONAL DETAILS OF KARTA/ PROPRIETOR/ PARTNERS/ DIRECTORS / TRUSTEES/ MANAGING COMMITTEE MEMBER/ AUTH. SIGNATORY

Sr. No.	Name	Nationality	Residential Address	Phone No.

## FATCA Declaration

ENTITY TYPE:  FINANCIAL  NON-FINANCIAL GIIN No: \_\_\_\_\_

COUNTRY OF INCORPORATION: \_\_\_\_\_ CITY OF INCORPORATION: \_\_\_\_\_

1. I/ We declare that the Entity is tax resident of any country other than India  Yes  No (If Yes, please fill Part A & B)
2. The controlling person/ Ultimate Beneficial Owner/ Proprietor is tax resident of country other than India  Yes  No (If Yes, please fill Part C)

**PART A** (To be filled if YES is declared for the above statement except for Proprietorship customer)

Customer Identification Number: \_\_\_\_\_ Issuing Country: \_\_\_\_\_

Address for Tax Purpose: \_\_\_\_\_

Details of Country/ies in which the entity is resident for tax purpose and the associated Tax ID number:

Country	Tax Identification Number (or equivalent)	Identification Type (TIN or Other, please specify)

**PART B** (To be filled by Non-Financial entities)

Entity is:  Traded in Stock Exchange  Subsidiary of listed company  Controlled by a listed company  Not Listed

Name of the listed Company: \_\_\_\_\_ Name of Stock Exchange: \_\_\_\_\_

Type of Non-Financial Entity:  Active  Passive

**PART C** (To be filled by Passive Non-Financial Entities for Controlling Person and Proprietor)

Name: \_\_\_\_\_

Date of Birth: 

D	D	M	M	Y	Y	Y	Y
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 Country of Tax Residency: \_\_\_\_\_

Beneficial Interest: \_\_\_\_\_ PAN: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address\*: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Country	Tax Identification Number (or equivalent)	Identification Type (TIN or Other, please specify)

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Occupation Type: \_\_\_\_\_

**SIGNATURE AND PHOTOGRAPH OF PERSON/S AUTHORISED TO OPERATE THE ACCOUNT**

Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp	Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp
	Name _____ Designation _____		Name _____ Designation _____
Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp	Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp
	Name _____ Designation _____		Name _____ Designation _____
Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp	Recent Passport Size Photograph to be signed across the photograph	Signature with Stamp
	Name _____ Designation _____		Name _____ Designation _____

- I do hereby solemnly declare that the information provide above with respect to my account is up to date and correct.
- I do hereby submit a self-attested photocopy of required documents.
- I have also attached my recent photograph above.

**Note:**

- 1) Please provide self-attested address proof even when there is no change of address.
- 2) If you wish to make a change in any of your contact details please fill the appropriate boxes given above.
- 3) If there are more than 6 signatories use photo copy of this form.
- 4) Details declared on the form will be updated in bank records if the same is not already available in Bank records.

FOR BRANCH USE ONLY (Please tick mark)			
All Documents Self-Attested	<input type="checkbox"/>	Signature on the form / documents & system matched	<input type="checkbox"/>
All Documents Verified with Originals	<input type="checkbox"/>	Documents submitted Validity checked	<input type="checkbox"/>
Recent Passport size colour Photo attached	<input type="checkbox"/>	Name & Address on document submitted match with system	<input type="checkbox"/>
<input type="checkbox"/> Face to Face <input type="checkbox"/> Non face to face			
Signature _____		Branch Name _____	
Name & ECN _____		Branch Code _____	