

Account Source Code	:
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(To be filled by applicant only)

ACCOUNT OPENING FORM FOR NON-RESIDENT INDIVIDUALS

For office use only	Please fill the form in BLOCK LETTERS only.						
Branch Name	Branch Code Date D D M M Y Y Y						
Customer ID 1	Account No. 1						
Customer ID 2	Account No. 2						
CKYC 1	Scheme Code 1						
CKYC 2	Scheme Code 2						
Application Type New Update	PGK Required Yes Only for Individual SBNRE Accounts)						
Account Type NRO Savings NRO Current	NRE Savings NRE Current Scheme Name						
1st APPLICANT PERSONAL DETAILS							
Account to be opened at Branch Please open my/our account							
Applicant's Name : Mr./Mrs./ Ms. FIRST NAM (Same as Passport)	E MIDDLE NAME LAST NAME						
Maiden Name (if any)							
Spouse Name							
Mother's Name	Father's Name						
Date of Birth DDMMYYYYY	Minor Yes No						
Gender Male Female Others	Marital Status Married Unmarried Others						
Citizenship IN-Indian Others	(ISO 3166 Country Code) Mariner / Seafarer Yes No						
Residential Status NRI PIO/OCI Cardholders	Foreign National Others Country of Residence :						
Occupation Type S-Service (Private Sector	Public Sector Government Sector) B-Business						
O-Others (Professional	Self Employed Retired Housewife Student) X- Not Categorised						
PAN No. Form 60 (PAN / Form	60 Mandatory) Income : INR Lacs p.a. Aadhaar No.						
	60 Mandatory) Income : INR Lacs p.a. Aadhaar No						
PASSPORT	VISA						
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PASSPORT Passport No. Date of Issue	VISA sa usiness Visas are not allowed) Date of Issue						
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I am a tax resid			declaration (Any			
	dent of India and not resident of ar	ny other country OR	I am a tax res	sident of country/ies mentioned i	n the table below :	
	the country/ies in which the entity	-			<i>i</i> :	
Place / City of Birth			untry Code of Bir			
Address for Tax P	Purpose Indian Address	Overseas Addr	ess	Address Type Resident	tial Busir	ness / Office
ISO 3166 Count Code of Jurisdicti of Residence*	ion or equivalent	Identification Type (TIN or other*, please specify)	TIN Issuing Country	Documents provided (copy of certificate of tax residence or copy of TIN or others)	documenta	which the ry evidence alid
* In case "Tax Identific Instructions :- I. The applicant shoul government body to iii. In case the applican MODE OF ACCO Self Either INITIAL DEPOSIT Amount Rs. Cheque No / D Drawn on Bank	Curre	Certificate of Tax Resident sees. Authorized governmentries then it should provide	ce issued by authorient body includes Green the requisite details or Survivor Amount (in words)	overnment or agency thereof or a mun s by a separate annexure alongwith a pointly by all Minor account (operated by guard ords) Branch from ted from the first separate annexure alongwith approach and the first separate annexure alongwith approach and the first separate annexure alongwith approach and the first separate annexure along with a point separate annexure along with a	icipality. propriate documentar Other: dian)	y evidence.
				(emitting Bank Nam	ne and Address
Debit NRE SB	/ NRE CA Account No.					
The Cheque should	d be issued from another NRE A/c	crossed A/c payee a	nd drawn payable	to "Doha Bank QSC A/c - < Cu	stomer Name>"	
CHANNEL REGIS	STRATION DETAILS - (FOR NO	ON PGK A/C's)				
					** Debit	** Internet
Service Holder	Name on Card				Card ☑	Banking ☑
First Applicant						
Second Applican	it					
Mobile Alert :	Y N The mobile banking	service will be active	ited on the Prima	y Applicants mobile number pro	vided above	
Please contact the	branch staff and fill up the manda	ate for Debit Card / In	ternet Banking in	case of Joint account holder.		
NOMINATION						
NOWINATION						
I /We do not v FORM DA 1Notes to f ban I/We nominate Doha Bank Q I/We give my/or	wish to make a nomination for about the common of the comm	f the Banking Regulat in the event of my/ou nch. Name on Passbook /	ur/minors death t	ne amount of deposits in the al	bove account may	be returned b
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APPLICANT DECLARATION

C-KYC: My Personal/KYC details may be shared with Central KYC Registry. I hereby give consent to receive information from Central KYC registry through SMS/e mail on the above registered number/e mail address.

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresentating, I/We am/are aware that I/We may be held liable for it.

I/We, the undersigned, being customers of Doha Bank QSC, hereby confirm that I/We have read, understood and agree to abide and be bound by all the provisions of the Terms & Conditions as displayed on www.dohabank.co.in which govern / shall govern, all of my / our accounts, present, past and future, maintained / opened / to be maintained / to be opened with the Doha Bank QSC from time to time, and also the provisions of the various services / facilities provided at present / that may be provided in future.

I/We understand that the Doha Bank QSC may, at its sole discretion subject to applicable regulatory / statutory / internal guide lines, at any time, and from time to time, add to, alter or modify any of the Terms & Conditions and that I/We hereby agree to abide and be bound by all such changes as if they form part of the Terms & Conditions as at present and that any transaction in my / our account(s) with the Doha Bank QSC and / or usage of any Services by me / us subsequent to such change shall be deemed and tantamount to my / our acceptance of all such changes

I/we agree that the Bank may debit my account for service charges as applicable form time to time. I/We agree that If the premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by Bank/Reserve Bank of India in this regard.

I/We am/are Non residents / PIO / OCI Card Holders.

I/We hereby declare that I am/we are Non Resident Indian (s) of Indian origin. I/We further confirm that myself/ourselves/parents/grandparents was/were citizens of India by virtue of constitution of India or Citizen ship Act 1955 (57 of 1955). I/We hereby declare that I am/We are Non Resident Indian (s) ("NRI") as defined under the Foreign Exchange Management Act, 1999, and the Rules and Regulations made there under (herein after referred to as "FEMA"). I/We understand that the above account will be opened on the basis of the statement/declarations made by me/usand I/we also agree that if any of the statements/declarations made herein is found to be not correct or false in material particulars, the Bank is not bound to pay any interest on any deposit made by me/usand the Bank may close the account immediately without reference to me/us.

I/We confirm that the Non-Resident accounts (NRE/NRO and FCNR) opened with the Bank shall be operated and maintained for the purpose of conducting bona fide transactions in Rupees and permissible currencies (as may be designated by Reserve Bank from time to time) in accordance with the provisions of the Foreign Exchange Management Act, 1999 ('Act') and the rules and regulations made there under and that such opening, operation and maintenance shall not in any manner contravene or violate the provision's of the Act and the rules and regulations made there under,

I/We understand, it is my/our responsibility to comply with tax laws and accordingly I/We would comply with the worldwide tax reporting and filing obligation as applicable.

I hereby agree to Doha Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information from time to time through E-mail, SMS, Phone call.

The Average Monthly / Quarterly / Half Yearly Balance required to be maintained for this account is Rs. Product:

I/We have understood that non-maintenance of the above Average Monthly / Quarterly / Half Yearly Balance will attract charges. These charges have been explained to me for the respective Product. I/We understand the detailed charging structure for non-maintenance and the same is available on Doha bank's Website and Service charges and fees brochure.

FATCA/ CRS DECLARATION

Branch Staff Emp Designation

Checked by

FOR OFFICE USE ONLY

- I/ We hereby certify that I / we have declared my/our status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No. S.O. 2155(E) dated 7 August 2015 and RBI Circular Ref No. DBR.AML.BC.No.36/14.01.001/2015-16 dated 28 August 2015 in this regard. 1.
- I/We understand and acknowledge that as per the provisions of Income Tax Act, 1961 Rules made thereunder and the guidelines issued by the 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 our account(s) as per the prescribed format to the Central Board of Direct 2. 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.
- I / We certify that the information provided by me/us above as applicable to me/us and signed by me/us as well as in the documentary evidence provided by me/us are, to the best of my/our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment / categorization of my account as a U S 3. Reportable Account or Other Reportable Account or otherwise.
- 4. I / We undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided above as well as in the documentary evidence provided by me/us or if any certification becomes incorrect and to provide fresh and valid self- certification along with documentary evidence.
- 5. I / We also agree that my/our failure to disclose any material fact known to me/us, now or in future, may invalidate me from transacting in the account and Doha Bank, Q.S.C. would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by Doha Bank, Q.S.C., under the guidelines issued by CBDT/RBI from time to time, if the deficiency is not remedied by me/us within the stipulated period.
- 6. I/We also agree to furnish and intimate to Doha Bank, Q.S.C. any other particulars that are called upon me/ us to provide on account of any change in law either in India or abroad in the subject matter herein

Signature Joint Applicant

Designated Officer Signature

Approved by

Authorised by

7. I/We shall indemnify Doha Bank, Q.S.C. for any loss that may be caused to Doha Bank, Q.S.C. on account of providing incorrect or incomplete information by me/us.

Signature Primary Applicant

APPLICANT		Signature	Applicant 1	ANT		Signature	Applicant 2
PRIMARY	РНОТО		Date :	JOINT APPLICANT	РНОТО	Customer ID Place :	Date :
OVE		RANCH DECLARATIO					
I confirm having met the customer and verified the original with the document proof. Signature Authenticated by a Bank / Indian Embassy / High Commission / Consulate / Notary Public or a person known to the Bank.			certif	I hereby confirm having done the due diligence. I hereby certify that his account opening form is complete in all respects and relevant documents have been obtained.			
	3.7 (A)	not required as the cus nch, Account No.	tomer has account with				
Date	:	Branch Staff Signa	ature		Designated	d Officer Emp Name	
Bran	ch Staff Emp Name		Emp Code		Designated	d Officer Emp Code	

Branch Name

Entered by



Date :	
Branch :	

	FATCA	DECLARATION -	- Individual Custo	omers	
Customer Name :					
SECTION A					
1. Please indicate if y If "Yes", please provid i) Copy of US Passpi ii) Form W9 iii) Taxpayer Identifica If "No" please proceed	ort / Green Card tion Number (TIN)	reen Card Holder?		Yes	No
SECTION B					
If "Yes", please provid 3. Please indicate if (Including Home, Mail	your place of birth is in Use copy of Certificate of Loss you have a current US adding, P.O. Box, "Care Of" or le the applicable details:	s o <mark>f N</mark> ationality (if appli dress o <mark>r telephone</mark> n		Yes Yes	No No
Street Address :			Zip Code :		
City:			State :		
Residence No.:			Mobile No.:		
If Question (2) or (3) is	s answered "Yes", please p	rovide Form W8 BEN			
untrue or incorrect declarati be any subsequent change	acknowledges and undertake ions and indemnifies and holds to the above noted declaration Signature	Doha Bank harmless ag	ainst any damages, clain	ns or demands that may a f such change within thirty	rise in the future. Should there
	YC) Application Form Ind		son		
Addition of Related Person Related Person Type Name*	Deletion of Related Person Guardian of Minor Prefix Fir	KYC Assignee	Middle Nam	ed Representative	Last Name
PROOF OF IDENTITY (Pol)	OF RELATED PERSON (Pleas	e refer to annexure)			
A- Passport NumberB- Voter ID CardC- PAN Card				port Expiry Date	D D — M M — Y Y Y Y
□ D- Driving Licence□ E- UID (Aadhaar)□ F- NREGA Job Card			Drivin	g Licence Expiry Date	D D — M M — Y Y Y Y
	t notified by the central government	ent)	Identi	fication Number	
S- Simplified Measures	Account - Document Type co	ode	Identi	fication Number	
2. APPLICANT DECLARA	TION				
inform you of any changes the	ils furnished above are true and co erein, immediately. In case any of th re that I may be held liable for it.				
Date: DD-MM-	Y Y Y Y Place:			Signature / T	humb Impression of Applicant
3. ATTESTATION / FOR OF	FICE USE ONLY				
Documents Received	Certified Copies	KYC VERIFICATION	CAPPIED OUT BY		
Date DD - MI	M — Y Y Y Y	KIG VERIFICATION	CANNED OUT DI		
Emp. Name Emp. Code	Emp. Design	nation		Emp. Branch	