



Account opening form

(For Non Resident Indians- Individuals)

**Please affix a recent
Self Attested passport
size photograph**

(For Non Resident Indians- Individuals)

[illegible]

Branch office.....
(Where account is to be opened)

(Please indicate by tick mark wherever applicable)

(To be filled in Capital letters)

Please open an account as per details below:-

[illegible]

1. Residential Status:-

	Name of Customer	Resident/ Non Resident
1 st Applicant		
2 nd Applicant		
3 rd Applicant		

2.

Gender	Male		Female	
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3.

Identification Mark	
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4. Type of Account

Nature of Deposit	Type of deposit*	Amount (Specific Currency)	Period(For Fixed Deposit)
Foreign Currency (Non- resident) Account(FCNR)			
Non-Resident (External) Account (NRE)			
Non-Resident Ordinary Account (NRO)			

**Please specify the desired option such as Saving/Current/Fixed Deposit /PD / Flexi Deposit etc*

5. Instruction for auto renewal

Auto Renewal Required ☐ YES ☐ NO If no, payment instructions are given at item No 14(c)	If yes, number of times it is required..... Whether for entire proceeds/principal/for Rs.	Period for which auto renewal is required
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6. Passport Details

	Passport No	Date of issue	Date of expiry	Place of issue	Nationality	Date of Birth
1 st Applicant						
2 nd Applicant						
3 rd Applicant						

7. Minor

Yes		No		If yes, furnish details of guardian											
Name of applicant (Minor)															
a. Relationship with minor		Father				Mother				Any other					
b. Name of Guardian Mr./Ms															
c. Address of Guardian															

8. Occupation

	Salaried*	Business*	Self employed*	Retired	House wife	Student	Other specify*
1 st Applicant							
2nd Applicant							
3rd Applicant							

*Please provide details of Name of employer/Line of business/Industry/profession etc.....
.....

9. Income per annum

	Source of Income	< Rs 5000	Rs 5000-20000	Rs 20000-50000	Rs 50000-1 Lac	Rs 1 Lac-5 Lacs	Rs 5 Lacs-Rs 10 Lacs	Above Rs 10 Lacs
1 st Applicant								
2nd Applicant								
3rd Applicant								

10. Education

	Under Graduate	Graduate	Post Graduate	Professional
1 st Applicant				
2nd Applicant				
3rd Applicant				

11. Communication Address: (Please give all available Details)

Overseas office address(Land Mark is Compulsory)	Overseas Residential Address
.....	
.....	
Country.....ISD Code.....	Country.....ISD Code.....
Phone No.....Fax No.....	Phone No.....Fax No.....
Mobile No.....	Mobile No.....
e-mail Address	e-mail Address
Address in India (if any)	
.....	
.....Phone no.....	
.....e-mail.....	

Dealing with Other Branch of OBC: If Yes, Pls give details (Branch Name & Account No.).....

.....

Existing Credit Facilities: If Yes, please give amount and details.....

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12. Mode of Operations

Self		Any of us or survivor(s)		All of us jointly or survivor(s)	
Either of us or survivor(s)			Former or survivor		

13. ATM cum Debit Card-Please issue ATM cum Debit card. I/We have read the terms and conditions governing the use of ATM cum Debit card (available on bank’s website www.obcindia.co.in)

Name of Primary Account holder																		
Name of Add On card holder																		

(Maximum 19 characters, No Nick Name please, please leave one blank space between each word)

Despatch Mode:

Hold at Branch		Courier	
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14. Internet banking services:

Please register my Mobile Number for SMS Alert.

Inquiry Only		Inquiry, Requests & Financial Transactions (Fund Transfer, Utility Payments, e-remit etc)	
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Name of Customer for providing Internet Banking Facility																	
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Only one user is permitted. User may specify 3 choices of his/ her log-in name preference consisting minimum 6 and not exceeding 10 alphanumeric characters.

Login Preference																					
First Preference	Second Preference																				
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Third Preference																					
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#Availing SMS Alert Service with Internet Banking is Mandatory. Therefore, providing E-mail ID & Mobile Number is essential to avail Net Banking Services.

I/We have gone through the internet banking services guidelines and agree to abide by terms and conditions governing its use and availment by me/all of us (available on bank's site www.obconline.co.in). I also agree to any other changes to be made by the bank from time to time. Please provide me/us this facility.

15. Instructions/Declarations

I/ We hereby declare that I/ We are eligible to open and maintain the account as requested above. I/We confirm that all the information given in this application form is true, correct, complete and up-to-date in all respect and I/We have not withheld any information. I/We shall be held responsible for the same time if it is found incorrect; you are not bound to pay any interest on the deposit made by me/us and further take necessary action as per rules. I/We agree that in respect of treatment of deposit, all rules and regulations of the Bank or as prescribed by the RBI shall be applicable. I/We confirm having read and understood the Rules and Regulations of the bank including Bank's tariff regarding the conduct of the account/ deposit and pertaining to the phone banking, ATM,, Debit Card, Internet Banking and electronic banking facilities (collectively called the said banking facilities- available on the Bank's website www.obcindia.co.in) and agree to be bound and abide by them/any other rules that may be in force from time to time. It is my/our responsibility to obtain the terms and conditions from your bank and receive the same.

I/We agree and undertake to inform the bank in writing of any change in residential status. I/We undertake to operate and use the account / deposit as well as the said banking facilities strictly in accordance with the exchange control regulation as laid down by the Reserve Bank of India from time to time. I/We agree that if the premature withdrawal is permitted on my/ our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by the Bank or Reserve Bank of India in

this regard including the penal clauses for premature withdrawal of deposit/ renewed deposit. In the event of death of any one of us, the payment of term deposit before maturity may be allowed to the survivor(s)

I/We undertake that I/We shall not make available to any person resident in India foreign exchange against re-imburement in Rupees or in any other manner in India. Further, I/We also undertake that in cases of debits to the accounts for the purpose of investment in India and credits representing sale proceeds of Investments, I/We will ensure that such investments/ disbursement will be in accordance with the regulations made by the Reserve Bank of India in this regard. I/ We declare that I/ We am/ are aware that any violation or non- observance of the undertakings given above is subject to action under FEMA 1999.

Provision: In case of premature withdrawal of FCNR deposit (issued against tender of currency notes/ coins) before completion of the minimum stipulated period, a penalty as stipulated by the Bank shall be charged and deducted from the proceeds of the deposits.

Declaration under section 10(5) of FEMA 1999: I/We hereby declare that all foreign exchange transactions as are being entrusted and may be entrusted by me/us to the bank from time to time do not/will not involve and are not/ will not be designed for the purpose of any contravention or evasion of the provision of the aforesaid. Act or of any rule, regulations, notification, direction or order made thereunder. I/We also hereby agree and undertake to give such information/documents as will reasonably satisfy you about the transaction in terms of above regulations. I/We also undertake that if I/We refuse to comply with any such requirements or make untenable complaint there against, the bank shall be within its right to refuse in writing or otherwise to undertake the transaction and shall, if it has reason to believe that any contravention/ evasion is contemplated by me/us, report the matter to Reserve bank of India.

- (a) Please issue me / dispatch a cheque book/ Pass book (in case of NRE/NRO account)
- (b) Please credit the interest to my NRE/NRO Account No...../or remit interest by DD/Electronic Transfer at my/our Indian/overseas address/ bank account no.....withafter deducting remitting charges, as may be applicable from time to time.
- (c) Please credit proceeds on maturity to my/our Account No..... with.....

1 st Applicant	2 nd Applicant	3 rd Applicant
(Signature/ thumb impression of Applicants)		
1. Mr./Ms.....will sign as.....		
2. Mr. /Ms.....will sign as.....		
3. Mr./Ms.....will sign as.....		

16. Introduction

☐ Self (Existing customer of the bank-Please write your Account number here

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☐

New customer- Please enclose copies of passport and resident visa

I know Mr./Ms..... for the past.....years as a.....
(Friend/relative/neighbor) and confirm his/her occupation as a.....

Signature of the introducer.....rubber Stamp.....

(Verification of Signature by an official of the Indian Embassy/High commission/consulate/notary Public etc, along with Rubber Stamp, where applicable. Verification is not required where the account is being introduced by an account holder of the bank)

I. In case, introducer is having account with the bank

Name of introducer																			
Introducer's Account No																			

II. In case of introduction, given by Indian Embassy/ High Commission/ Consulate/ Notary Public etc, a communication (in duplicate) shall be sent by the bank thanking them for introducing the customer, and also for returning one copy of the communication, to ascertain the authenticity of the attestation of signatures.

17. Nomination

Nomination required	Yes		No		If yes, please fill in the following particulars
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FORM -Nomination under section 45ZA of the Banking Regulation Act 1949 and rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank Deposits.

I/We [Name(s) and address (es)], nominate the following person to whom, the event of my/our/minor's death, the amount of deposit, particulars whereof, are given below, may be returned by (Name and address of branch/office in which deposit is held)

Nature of Deposit	Distinguishing Number	Additional Details, if any	Name	Address	Relationship with depositor, if any	Age	If nominee is a minor, his date of birth

As the nominee is a minor on this date, I/We appoint Mr./Mrs/Ms

..... (Name, address and age) to receive the amount of deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place.....

Date.....

Signature(s)/thumb impression(s) of depositor(s)

**Name(s), Signature(s),
And Address (es) of
Witness (es)**

18. FOR OFFICE USE

(i)

ATM CUM DEBIT CARD NO			
Date of Issue			
Customer's Classification			

(ii) Documents Attached:

Acceptable Proof of Residence	
Photo Identity	

(iii) Classification:

Threshold Limit: Rs

Classification of Accounts as

Very High Risk (C-4)	High Risk (C-3)
Medium Risk (C-2)	Low Risk (C-1)

(iv)

	Introducer's Signature verified by	Customer's Signature attested by	Creation of Customer Master Data authorized by	Customer's classification confirmed & account opened by
NAME				
PA No				
Date				
Signature				