<b>Ficici</b> Bank	Service Request No.:					
	Date:	D D M M Y Y Y				
Overseas Mobile Number Updation Form (For Resident Individuals)						
Customer Details						
I/ We hold savings account* number with account, as well as transaction advices.		our bank. I/ We had registered nunication related to my/ our				
(Please fill in all the details in CAPITAL LETTERS and us	e BLACK INK only. Fields with	* (asterisk) are mandatory)				
* Name: Mr/ Ms/ Mrs/ Dr/						
First Name Middle Name	Last Name					
Customer Declaration						
I/ We hereby confirm that I/ we have moved to not holding NRI status and my/ our duration of sta I/ We confirm that I/ we shall not be liable to pay the FATCA/ CRS declaration to the bank within 3 India to any other country.	ay is not more than 180 days taxes in any country outside	s in any country outside India. e India. I/ We agree to submit				
I/ We request you to update my/ our mobile nu communication related to my/ our account, as w the bank to contact me/us on the number mentio the veracity of any transaction, as deemed fit by immediately if there is any change in the address/ information as may be required by ICICI Bank.	vell as transaction advices. I oned below for verification, the bank. It is my/ our respo	I hereby voluntarily authorise callback or checks to confirm onsibility to inform ICICI Bank				
Overseas Mobile Number:						
*ISD code: *Mobile	No.:					
I/ We confirm having checked my/ our mobile nu held by me/ us and is not in use by any third pa promptly inform the bank if and when my mobile	arty and I/we hereby under					
I/ We hereby declare that all details provided in th this declaration shall be in addition to any other d	declaration provided by me/	us with respect to the facility				

I/ We hereby this declaration lity provided by ICICI Bank Ltd and agree to indemnify and keep ICICI Bank Ltd indemnified from any loss, damage, claim action, costs, charges and expenses which ICICI Bank may suffer or incur as a result of any defect/ misrepresentations made by me/ us in the above declaration.

Customer Signatures:						
Signature	Signature	Signature				
Name: *(Primary Applicant)	Name: *(Joint Applicant 1)	Name: *(Joint Applicant 2)				
<ol> <li>Only applicable to Resident customer who moved overseas for temporary basis and is not holding NRI status and duration of stay is not more than 180 days in any country outside India</li> <li>Duly filled request letter should be received at address given below within 7 working days from the date of Service Request raised through Phone Banking for processing</li> <li>Please send duly filled form to '<u>ICICI Bank Limited, RPC Mumbai, Autumn Estate, 5th Floor, 'A' Wing, Near Mhada, Chandivali, Andheri (E), Mumbai - 400 072, INDIA</u>.'</li> </ol>						



## **FATCA/CRS Declaration Form**

Appl. No:

To: ICICI Bank Limited India

Customer ID: \_\_\_\_\_ Name: \_\_\_\_\_ Primary Holder 🔲 Joint Holder 1 🛄 Joint Holder 2 🛄

Part I- Please fill in the countr	for each of the following	(Applicable for all cu	stomers):		
1. Country of :				2.US Person (Refer definition at bottom)	
a) Birth				(Refer definition at bottom)	
b) Citizenship				-	
c) Residence for Tax Purposes					
d) Current Residence (Oversea				Yes No	
Country for NRI) Part II- Please note:					
a. If in all fields above, the country	montioned by you is India at	d (avcant in case of sea	farore) and if you do	not have US porcen status	
please proceed to <b>Part III</b> for sig		iu (except in case of sea		not nave 05 person status,	
b. If for any of the above field, the Payer Identification Number (TI	country mentioned by you is I) or functional equivalent as	not India and/or if your issued in the specific co	US person status is \ untry in the table bel	/es, please provide the Tax ow:	
i) □ TIN or		•	,	Country of Issue	
□ Functional equivalent(Please speci ii) □ TIN or	y name and number)				
Functional equivalent(Please speci	y name and number)				
iii) □ TIN or					
Functional equivalent(Please speci					
c. If you satisfy the criteria mentione reason for the same as given bel		e Taxpayer Identification	Number/functional ed	quivalent, please tick the	
□ I am a person resident out of		licable):			
			ntion O Visa /OResid	dence /O Work permit number)	
	(mention				
	(ment				
Going to the country of resi	ence for first time	(mention CDC/visa numi (m	pention visa number 1	TIN/functional equivalent to be	
communicated to the bank	ithin 90 days, else account w	ill get closed)			
OR	as well as resident for tax p	urposes in India (Pleas	e also fill Part IV se	elf-certification)	
d. In case you are declaring US pe	son status as'No'but your Co	untry of Birth is US, pleas	se provide document	evidencing Relinquishment	
of Citizenship. If not available pr Please also fill <b>Part IV</b> Self-Certi	-	relinquishment certificat	te		
Part III- Customer Declaration		ers)			
<ul> <li>(I) Under penalty of perjury, I certify that:         <ol> <li>1. The applicant is (i) an applicant taxable as a US person under the laws of the United States of America ("U.S.") or any state or political subdivision thereof or therein, including the District of Columbia or any other states of the U.S., (ii) an estate the income of which is subject to U.S. federal income tax regardless of the source thereof. (This clause is applicable only if the account holder is identified as a US person) or</li> <li>2. The applicant is taxable as a tax resident under the laws of country outside India. (This clause is applicable only if the account holder is a tax resident outside of India)</li> </ol></li></ul>					
(ii) I understand that the Bank is relying					
able to offer any tax advice on FAT (iii) I agree to submit a new form withi			, ,	uestions.	
(iv) I agree that as may be required by	domestic regulators/tax authoriti	es the Bank may also be re	quired to infom reporta	ble details to CBDT or close	
or suspend my account. (v) I certify that I provide the information on this form and to the best of my knowledge and belief the certification is true, correct, and complete					
including the taxpayer identification					
Signature :					
Name :			Date (DD/MM/YY)	Y):	
Part IV- Self-Certification: (No	Applicable for NRI customers	except for point (b) below	w): To be filled only if	-	
(a) Any of the indicia parameters is outside India and TIN or functional equivalent is not available since not a resident for tax purpose outside India, or (b) Country of Birth is US and US person is mentioned as "No" in Part I					
Certification:					
I confirm that I am not a US person or a resident for Tax purpose in any country other than India, though one or more parameters suggest my relation with the country outside India.					
Therefore, I am providing the follow	• • •	•	ncy	Signature	
Document Proof submitted (PIs tick document being submitted)  Passport Election Id Card PAN Card Driving License UIDAI Letter NREGA Job Card Govt. Issued ID Card					
Passport Election Id Card PAN Card Driving License UIDAI Letter NREGA Job Card Govt. Issued ID Card Note-The term United States person means:					
<ul> <li>(a) an individual, being a citizen or resident of the United States of America;</li> <li>(b) partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;</li> <li>(c) a trust if: i. a court within the United States of America 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;</li> <li>(d) an estate of a decedent who was a citizen or resident of the United States of America</li> </ul>					
A social security/insurance number, citizen/personal identification/services code/national identification number, a resident / population registration number, Alien card number, etc.					