Sr. No. :

A/c. No. :

Cust ID 1 :

Cust ID 2 :

Cust ID 3 :

NRI

ACCOUNT OPENING & RELATIONSHIP FORM

THE COSMOS CO-OP. BANK LTD.

(Multistate Scheduled Bank)

Registered Office : 'Cosmos Tower', Plot No.6, ICS Colony, University Road, Ganeshkhind, Shivajinagar, Pune - 411 007. Tel.-020-67086708

NRI RELATIONSHIP FORM

Date [ ] (dd /mm / yyyy)

(For non resident Indians & persons of Indian origin)

Please open my NRI account at your ______ Branch

PERSONAL DETAILS

	Title	First Name	Middle Name	Surname	Occupation
1st applicant	(Mr/Ms)				
2nd applicant	(Mr/Ms)				
3rd applicant	(Mr/Ms)				

	Date of birth (dd/mm/yy)	Sex M/F	Mother's maiden Name	Marital Status	PAN / GIR	Relationship with first applicant
1st applicant						
2nd applicant						
3rd applicant						

Overseas Address

Address

Zip code **Country**

Phone **Fax No.**

E-mail ID

Mobile No.

Address In India

Bldg./flat No. & Name

Road No. & Name **Area** **City**

State **Pin Code** **Mobile**

Phone **Fax No.**

E-mail ID

Mailing Address ☐ Overseas / ☐ India (Please tick as applicable)

PASSPORT DETAILS

	Passport No.	Date of Issue	Date of Expiry	Place of Issue	Nationality
1st applicant					
2nd applicant					
3rd applicant					

Passport & residence visa/ work permit duly attested by ☐ Banker ☐ Indian Embassy / High Commission ☐ Notary public

VISA DETAILS

	Visa No.	Date of Issue	Date of Expiry	Place of Issue
1st applicant				
2nd applicant				
3rd applicant				

Mandate to operate the account ☐ **No** ☐ **Yes (mandate letter attached)**

* 1) ______ 2) ______ 3) ______

SCHEME DETAILS

I/we would like to open the following accounts with your bank.

Type of Account	Deposit Amount	Period	Rate of Interest
NRE Account			
☐ Savings Bank			
☐ Term Deposit			
☐ Current Account			
NRO Account			
☐ Savings Bank			
☐ Term Deposit			
☐ Current Account			
FCNR (B) Account			
☐ US Dollars			
☐ Euro			
☐ Japanese Yen			
☐ GBP			
RFC Account			
☐ US Dollars			
☐ Euro			

MATURITY/ INTEREST PAYMENT INSTRUCTIONS FOR FIXED DEPOSITS

on maturity of fixed deposit

☐ renew principal and interest ☐ renew principal only ☐ issue DD/Pay Order drawn on ______________________________ (city)

☐ credit to account no. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐ Others________________________________

for regular interest payment *(fill only in case of monthly/quarterly interest payout and on maturity if the interest is not to be renewed with the principal)*

☐ credit to account no. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐ issue DD/Pay Order drawn on ________________________

Kindly note : Unless prior written notice is received by the bank, the bank will automatically renew the deposit plus accrued interest if any for the same period on the maturity date at the prevailing rate of interest.

INITIAL PAYMENT DETAILS

Amount in figures ☐☐☐☐☐☐☐☐ Amount in words ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Cheque / DD No. ☐☐☐☐☐☐☐☐☐☐ Bank & Branch ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

dated ☐☐☐☐☐☐☐☐ ***(Cheque should be crossed a/c payee and drawn payable to 'Cosmos Bank account - Customer name)***

ACCOUNT OPERATION

☐ Single ☐ Either or survivor ☐ Former or survivor ☐ Anyone or survivor ☐ Jointly by all ☐ Others

INSTRUCTIONS

Statement Frequency

Savings account ☐ Quarterly ☐ Monthly* ☐ By email every month

Current account ☐ Monthly ☐ Weekly*

☐ by mail ☐ Collect personally ☐ By email every month (*charges applicable)

Chequebook ☐ Yes ☐ No

Nomination ☐ Yes *(Please complete the attached nomination form)* ☐ No

MINOR ACCOUNT

Name of parent/guardian ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Minors date of Birth (dd/mm/yyyy)** ☐☐☐☐☐☐☐☐

Relationship with minor ☐ Father ☐ Mother ☐ By court order (if yes please affix a copy)

☐ Others (please specify) _______________________

I shall represent the minor in all future transactions of any description in the above account till the said minor attains majority. I shall fully indemnify the bank against any claim of the above minor for any withdrawal/ transaction made by me in his/her account.

* 1) ____________________________ 2) ____________________________ 3) ________________________

INTRODUCTION DETAILS

☐ **Introduction by existing Cosmos Bank account holder**

Name

Cust ID   Account No.

I confirm that I am an account holder of The Cosmos Co-op. Bank Ltd., Pune for over six months. I confirm that I personally know the applicant's details herein for more than six months and confirm his/her identity and address.

Signature ______________________   Signature verified (for Bank use) ______________________

☐ **Introduction by existing Banker (signature verification certificate required)**

DECLARATION

I / We, ____ presently residing at ____
____, do hereby solemnly declare and undertake as under :

1. I am / We are Non Resident of Indian Nationality / Foreign National of Indian Origin / Foreign National.
2. I / We understand that the above account will be opened on the basis of the statements / declarations made by me / us and will be opened in the form and as per various Regulations framed under Foreign Exchange Management Act 1999 ("the Act") and in particular, Foreign Exchange Management (Deposit) Regulations, 2000 ("the Regulations") as amended from time to time. I / We also agree that if any of the statements / declarations made here is found to be not correct in material particulars, you are not bound to pay any interest on the deposit made by me / us and to discontinue the services.
3. The account will be put into use only for bonafide transactions not involving any violations of the provisions of any Government / Exchange Control Regulations.
4. I / We agree that the rate and the manner of Interest to be paid shall be as per the Regulations and no claim will be made by me / us for any interest on the deposits for any period after the date/s of maturity of the deposit/s.
5. I / We agree to abide by the provisions of the FCNR / NRE / NRO / RFC Accounts scheme as laid down by the RBI and as per the said Act and regulations as amended from time to time.
6. I / We hereby undertake to intimate you about my / our return to India for permanent residence immediately on arrival.
7. I/We authorize the Bank to automatically renew the deposit on due date for an identical period (unless otherwise specifically instructed before due date) . The earlier receipt given to me will be treated as discharged receipt on due date . I/ We understand that the interest applicable on renewals will be at the applicable ruling rates on the date of maturity and that the renewed receipt will be made available on my/our presenting the duly discharged original receipt on the maturity date or later for payment. I/We further understand that the renewal will be in accordance with the provisions of the Reserve Bank of India scheme in force at the time of renewal.
8. I/We agree that if 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 Reserve Bank of India in this regard. Further the Bank at its discretion can recover penalty & swap cost at prevailing rates.
9. I/We shall not make available to any person resident in India, foreign currency against reimbursement in Rupees or in any other manner in India.
10. I/We confirm that all debits /credits to my/our accounts shall be as specified in the said Act and the Regulations. Further, in case of NRO A/c, I/We undertake that all debits to my /our accounts for the purpose of investment in India and credits representing sale proceeds of investments in India shall be in accordance with the Regulations and are covered either by general or special permission of Reserve Bank of India .
11. I/We will be liable to comply with the rules of the Foreign Exchange Management Act of 1999 and the Regulations and the amendments thereof in force from time to time and as stipulated by the Reserve Bank of India.
12. I/We understand that the Bank may at its absolute discretions, discontinue any of the services completely or partially without any notice to me /us. I/We agree that the Bank may debit my account for service charges as applicable from time to time.
13. I/We have read, understood and hereby accept & agree to the Terms& Conditions given for all the products & services I have requested.
14. I/We agree and undertake that in case of FCNR(B) Accounts, if the remittance from outside India is not in designated currency and the same is converted to the designated currency as stipulated in the Regulations , it shall be at my/our entire risk and costs and I/We shall not challenge the rate of conversion.
15. I/We hereby agree and confirm to bear any losses or claims that may arise directly/indirectly on account of the Bank acting on any instructions received by it by fax or any electronic media given by me/us or on my/our behalf and agree to keep the Bank indemnified from any such losses and /or claims.
16. I/We do hereby declare that the information furnished in this form is true to the best of my/our knowledge and belief.
17. I /We hereby indemnify and forever keep indemnified the Bank and its successors and assigns of, from and against any and all claims, actions, penalties that may be made, suffered or incurred by the Bank by reason of my/our non-compliance.

* Signature :	Signature :	Signature :
Name :	Name :	Name :
Address :	Address :	Address :
Account No:	Account No:	Account No:

* 1st Applicant Photo	2nd Applicant Photo	3rd Applicant Photo
* Signature	Signature	Signature

(applicants should also sign across the photograph)

To be filled in by the Bank

I/we have verified the particulars of the applicant/s on the basis of passport/ ____________________ and am/are satisfied with the non-resident Indian status of the applicant/s.

(Name of Authorised Official)	Signature / Code No.	Date

Nomination Form DA 1

Nomination under section 45 ZA read with section 56 of the Banking Regulations Act, 1949 & Rule 2 (1) of the Co-operative Bank's (Nomination) Rules, 1985 in respect of Bank Deposits.

I/we ______________________________ ______________________________

Name(s) and address(es) of Depositors Name(s) and address(es) of Depositors

______________________________ ______________________________

______________________________ ______________________________

Nominate the following person to whom in the event of my/our/minor's death. The amount of deposit in the account(s), particulars whereof are given below, may be returned by The Cosmos Co-op. Bank Ltd., Pune ______________________ Branch.

Nature of Account	Account No.	Additional details , if any

Nominee

Name

Mailing Address

City **State** **Pin code**

Country

Relationship with depositor (if any) : Age (yrs) :

Date of birth (if nominee is minor)
(dd/mm/yyyy)

* As the nominee is a minor on this date, I/we appoint Shri/Smt/ Kum.

Mailing Address

To receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minors death during the minority of the nominee.

* 1) ______________________________

2) ______________________________

3) ______________________________

****Signature(s) / thumb impression(s) of the account holder(s)**

Witness(es) ***

Name

Signature*** ______________________

Address

Place

Date

Name

Signature*** ______________________

Address

Place

Date

* Strike out if nominee is not a minor. ** Where the deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor. *** Thumb impression(s) shall be attested by two witnesses.

Registration No. (to be filled in by the Bank) ______________________

RULES & REGULATIONS

This Form requires 8 (Eight) Signatures of each Depositor at places marked- ✱

NRO : NON - RESIDENT ORDINARY

* The account can be opened by Non-Resident Indians and Persons of Indian Origin / Foreign Nationals (who is on temparory visit in India)
* The account can be opened in the form of Savings Account, Current Account or Term Deposit.
* The account can be opened by a non-resident/ PIO jointly with a resident or non-resident.
* In case of debits to the accounts for the purpose of investment in India and credits representing sale proceeds of investments, it is the account holder's responsibility to ensure that such investment would be covered by the general or special permission of RBI.
* The account can be operated by any person other than the account holder by a duly executed POA. However, the POA holder is Not allowed to open/close the account or to repatriate outside India Funds held in the account other than to the non-resident individual account holder nor to make payment by way of gift to a resident or transfer funds from the account to other NRO Account.
* The account will be maintained only in Indian Rupees.
* The account holder/s is/are required to inform the Bank within SIX months of their permanently returning to India or at the time of choosing to become a resident , whichever is earlier.
* If the account holder(s) ceases to be an NRI, the savings A/c will have to be converted into Resident Rupee A/c & FDs can be continued till original maturity at the desire of Account holder.

NRE : NON-RESIDENT EXTERNAL

* The account can be opened by Non-Resident Indian/Person of Indian Origin only.
* The account can be opened in the form of Savings Account, Current Account or Term Deposit .
* The Account can be opened by a non resident / PIO Jointly with a resident or non resident on former or survivor basis.
* The account can be operated by any person other than the account holder by a duly executed POA. However , the POA holder is Not allowed to open, close the account or to repatriate the funds under any circumstances.
* The account holder(s) is/are required to inform the Bank within SIX months of their permanently returning to India OR at the time of choosing to become a permanent resident, whichever is earlier.
* If the account holder(s) ceases to be a NRI, the savings A/c will have to be converted into Resident Rupee A/c & FDs can be continued till original maturity at the desire of Account holder.

FCNR (Banks) FOREIGN CURRENCY NON-RESIDENT

* The account can be opened by Non-Resident Indian/Person of Indian Origin only.
* The account can be opened in the form of Term Deposit only.
* The Account can be opened by a non resident / PIO Jointly with a resident or non resident on former or survivor basis.
* The account can be operated by any person other than the account holder by a duly executed POA. However, the POA holder is Not allowed to open, close the account or to repatriate the funds under any circumstances.
* The account holder(s) is/are required to inform the Bank within SIX months of their permanently returning to India OR at the time of choosing to become a resident, which ever is earlier.
* If the Account holder ceases to be an NRI, FCNR deposit can be continued till original maturity at the desire of Account holder.

RFC- RESIDENT FOREIGN CURRENCY

* Returning Indians (NRIs / PIOs) i.e. the Indians who were Non Residents earlier & have returned for permanent stay in India, can open account.
* The account can be opened in the form of Term Deposit only.
* Joint account can be opened only with any other eligible person to open RFC account.

COMMON TO ALL NON-RESIDENT ACCOUNTS

The deposit held under Non-Resident account with the Bank branches are covered under scheme of Deposit Insurance and Credit Guarantee Corporation (DICGC) upto a limit of Rs. One lakh but not covered by the Deposit Protection Scheme under the UK Banking Act, 1987 and are not insured by the Federal Deposit Insurance Corporation (FDIC) of the USA or by any other insurance corporation outside India.

The rules and operations related to Non-Resident accounts are subject to the RBI and FEMA regulations. The Bank may also amend and /or change its rules/charges at its sole discretion with/without any prior notice to the customer. All the changed rules/charges prescribed/amended are binding on the customers and he/she/they are required to comply with the same. I/we have read, understood & hereby accept & agree to the rules & regulations given for the above products.

✱ Signature of Depositor(s) 1) ____________ 2) ____________ 3) ____________

ABOUT US

FOR BANK USE

Customer ID : ________________ ________________ Branch

Account No.: ________________ Date : ________

The information contained in this form will be kept strictly confidential and used only by the bank for its internal purposes.

Marital Status : ☐ Single ☐ Married

Name of Spouse : ________________ Date of Birth of Spouse: ________

Occupation of Spouse : ________________ Number of Children: ____

Wedding Anniversary : ________________

Educational Qualifications ☐ Graduate ☐ Post Graduate ☐ Doctorate ☐ Others ________

University last graduated from ________________

Where did you here about us ?

- ☐ TV Channel ________
- ☐ Radio Station ________
- ☐ Newspaper Brand ________
- ☐ Internet Website ________
- ☐ Friends / Family
- ☐ Others ________

Which other types of accounts do you hold ?

- ☐ Savings ________ Bank
- ☐ Fixed ________ Bank
- ☐ Current ________ Bank
- ☐ Recurring ________ Bank
- ☐ Others ________ Bank

What are your areas of investment ?

- ☐ Bonds
- ☐ Fixed Deposits
- ☐ Mutual Funds
- ☐ Equiities
- ☐ Real Estate
- ☐ Bullion
- ☐ Others ________

Other products you may be interested in

☐ Home Loans ☐ Mutual Funds ☐ Insurance Products ☐ Others ________

Approximate annual Income ☐ Less than 25,000 USD ☐ 25,000 - 50,000 USD ☐ Greater than 50,000 USD ☐ Undisclosed

Profession

Organisation Name : ________________

Designation: ________________

Office Address : ________________

City ________ Pin Code ________ Telephone ________

Fax ________ E-mail ID ________________

Travel

Frequency ☐ Once a Year ☐ Twice a Year ☐ Once in two years ☐ Others ________

Destination ☐ India ☐ Others ________ Places often visited in India ________

Stay at ☐ Hotel ☐ Home

Preferred Domestic Airline ________ Preferred International Airline ________

Hobbies

☐ Music ☐ Art ☐ Dance ☐ Education

☐ Net surfing ☐ Travel ☐ Collection ☐ Others ________

Most visited Web-Site

Business ________ News ________ India ________

Travel ________ Music ________ Portal ________

Your Friends who might be interested in our services

Name : ________ Email-ID : ________ Telephone : ________

Name : ________ Email-ID : ________ Telephone : ________

Name : ________ Email-ID : ________ Telephone : ________

Code No. : 1026 / 2000/04 - 17

* 1) ________ 2) ________ 3) ________

FATCA-CRS Annexure for Individual Accounts (including Sole Proprietor)

Details under FATCA and CRS (see instructions)

(Please consult your professional tax advisor for further guidance on your tax residency, if required)

1. Name of the accountholder ______________
2. Customer ID ______________
3. Father's name_________________(mandatory if PAN not provided)
4. Spouse's name_____________(optional)
5. Gender: _____________ (Male, Female, Others)
6. PAN__________
7. Aadhaar number _____________(optional)
8. Identification Type and Identification Number (Documents[1] submitted as proof of identity of the individual): *Name of the document submitted* _________________
   Identification number ______________
9. Occupation Type_______________(Service, Business, Others-please specify)
10. Date of birth __________________ *(in DD/MM/YYYY format)*
11. Nationality_______________
12. City of birth ____________
13. Country of birth ______________________
14. Residence address for tax purposes (include City, State, Country & Pin code)
    ____
15. Address Type: _________ (a)Residential or Business (b) Residential (c)Business (d) Registered Office

[1] Permissible documents are:

- Passport
- Election ID Card
- PAN Card
- ID Card
- Driving License
- UIDAI Card
- NREGA Job Card
- Others

FATCA-CRS Annexure for Individual Accounts (including Sole Proprietor)

16. Tax residence declaration – tick any one, as applicable to you:

☐ I am a tax resident of India and not resident of any other country

Or

☐ I am a tax resident of the country/ies mentioned in the table below

Please indicate ALL the countries in which you are a resident for tax purposes and the associated Tax ID Number below:

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

 # To also include USA, where the individual is a citizen/ green card holder of USA

% In case Tax Identification Number is not available, kindly provide functional equivalent $

Certification

I/We have understood the information requirements of this Form (read along with the FATCA/CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the FATCA CRS Terms and Conditions below and hereby accept the same.

Name:

Signature:

Date: __/ ___/ ____ Place: _________________________

FATCA-CRS Terms and Conditions

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any **change in any information provided by you, please ensure you advise us** promptly, **i.e., within 30 days**.

Please note that you may receive more than one request for information if you have multiple relationships with ABC or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA-CRS Instructions

FATCA-CRS Annexure for Individual Accounts (including Sole Proprietor)

If you have any questions about your tax residency, please contact your tax advisor. **If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.**

[$]It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA/ CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document **evidencing nationality or citizenship** (refer list below); **AND** 3. **Any one** of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; **or** Reason the customer did not obtain U.S. citizenship at birth
Residence/mailing address in a country other than India	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; **and** 2. Documentary evidence (refer list below)
Telephone number in a country other than India	***If no Indian telephone number is provided*** 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; **and** 2. Documentary evidence (refer list below) ***If Indian telephone number is provided along with a foreign country telephone number*** 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; **OR** 2. Documentary evidence (refer list below)
Standing instructions to transfer funds to an account maintained in a country other than India (other than depository accounts)	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; **and** 2. Documentary evidence (refer list below)

List of acceptable **documentary evidence** needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

**** Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.***