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# Citibank<sup>®</sup> NRI Banking

## ACCOUNT INSTRUCTION FORM

Please complete all sections of this form fully before you print and sign.  
Please mention "N.A." for sections not applicable.

Date: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_

I/We request Citibank to execute the instructions mentioned below on my/our following Accounts.

Primary Account Holder: \_\_\_\_\_ Joint Account Holder: \_\_\_\_\_  
NRE Rupee Checking Account Number: \_\_\_\_\_ NRO Rupee Checking Account Number: \_\_\_\_\_  
Term Deposit Account Number: \_\_\_\_\_

### CONTACT DETAILS

Please update my/our contact details (Please provide proof in case of change of address)

Mailing Address: \_\_\_\_\_  
ZIP/PIN Code: \_\_\_\_\_

Current Residential Address (Non-Mailing Address): \_\_\_\_\_  
ZIP/PIN Code: \_\_\_\_\_

Phone (Home) (country code): \_\_\_\_\_ Phone (Work) (country code) : \_\_\_\_\_

Phone (Mobile) (country code) : \_\_\_\_\_ Email: \_\_\_\_\_

Country of Residence: \_\_\_\_\_ If Country of Residence is US, please complete Form W9 for each account holder.

I am submitting an address proof for my permanent residential address as I do not have an address proof for the above mentioned mailing address in my name due to \_\_\_\_\_

My permanent residential address is: \_\_\_\_\_  
ZIP/PIN Code: \_\_\_\_\_

^Commonly accepted documents for proof of address (self-attested):

- 1. Valid Passport with address page 2. Valid Driving License with address page 3. Documents issued by Government departments of foreign jurisdictions 4. Letter issued by Foreign Embassy/Mission in India (For foreign Passport holder only) Note : P. O. Box Address can be updated only as Mailing Address and only for Middle East countries and Kenya 5. Overseas Citizen of India (OCI) card

### DEBIT CARDS (Please note that Debit Cards will only be mailed to your registered mailing address)

Please issue new Debit Cards for:

Primary Account Holder  NRE Rupee Checking Account  NRO Rupee Checking Account  
Joint Account Holder  NRE Rupee Checking Account  NRO Rupee Checking Account

### PERMANENT ACCOUNT NUMBER [Please provide a signed photocopy, if available]

Please update my/our Permanent Account Number (PAN)

Primary Account Holder: \_\_\_\_\_ Joint Account Holder: \_\_\_\_\_

### PASSPORT DETAILS

Please update my/our Passport details (Please provide signed photocopy of the new passport)

#### Primary Account Holder

Passport number: \_\_\_\_\_ Date of Issue: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_  
Date of Expiry: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_ Nationality: \_\_\_\_\_

#### Joint Account Holder

Passport number: \_\_\_\_\_ Date of Issue: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_  
Date of Expiry: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_ Nationality: \_\_\_\_\_

If you are a US Citizen or Permanent Resident , please complete Form W9 for each account holder.

### ATM PERSONAL IDENTIFICATION NUMBERS (PINS) (Please note that APINs will only be mailed to your registered mailing address)

Please issue new ATM Personal Identification Numbers (APINs) for:

Primary Account Holder  NRE Rupee Checking Account  NRO Rupee Checking Account  
Joint Account Holder  NRE Rupee Checking Account  NRO Rupee Checking Account

**CHEQUE BOOKS** (Please note that Cheque Books will only be mailed to your registered mailing address)

Please issue new Cheque Books with 25 leaves for my :

NRE Rupee Checking Account

NRO Rupee Checking Account

**E-STATEMENTS**

I would like to register for eStatements. I understand I will not receive physical statements in the mail once I register for eStatements.

Yes  No

**DUPLICATE TAX DEDUCTION AT SOURCE (TDS) CERTIFICATES** (Please note that TDS Certificates will only be mailed to your registered mailing address)

Please issue duplicate TDS certificates for:

Financial Year: \_\_\_\_\_  Q1 (Apr-Jun)  Q2 (Jul-Sep)  Q3 (Oct-Dec)  Q4 (Jan-Mar)

Financial Year: \_\_\_\_\_  Q1 (Apr-Jun)  Q2 (Jul-Sep)  Q3 (Oct-Dec)  Q4 (Jan-Mar)

**LINKING OF ACCOUNTS**

Please link my/our Accounts mentioned in this form.

Please note: Accounts can only be linked if the Primary Account holder is common across the accounts.

**DELETION OF HOLDER**

Holder name to be deleted: \_\_\_\_\_

Reason for Deletion: \_\_\_\_\_

**DECLARATION**

I/We hereby declare that all the details provided in this form are true and correct and supported by valid documents enclosed with this form. I/We accept and agree that this declaration shall be in addition to the Terms & Conditions of my/our Account and/or any other declaration provided by me/us with respect to this facility provided by Citibank. I/We agree to indemnify and keep Citibank indemnified from any loss, damage, claim, action, costs, charges and expenses which Citibank may suffer or incur as a result of any defect/misrepresentation made by me/us in the above declaration. I/We understand that address change requests are processed at account holder level. Accordingly, my new address shall be updated across all the linked accounts held with the bank where I am an account holder.

I/We understand and agree that the mailing address can be changed only by the primary account holder of this account and the same address shall apply for all linked accounts where he/she is the primary account holder. Please note that change in address must be signed by the Primary account holder.

**DECLARATION FOR MOBILE NUMBER AND EMAIL ADDRESS CHANGES (if applicable):**

I/We confirm that the mobile number and email address provided in this form are mine/ours and not in use by anyone else. I/We will promptly inform the bank if and when my/our mobile phone or email address changes. I/We authorize Citibank to update the bank's records for sending me/us any communication or transaction advices related to my/our Account. I also authorize the Citibank to contact me/us on these numbers for verification call back or any other checks to confirm the authenticity of any transaction.

**PRIMARY APPLICANT SIGNATURE**

\_\_\_\_\_

**JOINT APPLICANT SIGNATURE**

\_\_\_\_\_

**FOR BANK USE ONLY**

Instructions received by :  Mail  In Person Date: DD \_\_\_\_\_ MM \_\_\_\_\_ YYYY \_\_\_\_\_

ID Number : \_\_\_\_\_ (please attach photocopy of ID proof collected if met in person)

Old Occupation Code : \_\_\_\_\_ Old Occupation Description : \_\_\_\_\_

New Occupation Code : \_\_\_\_\_ New Occupation Description : \_\_\_\_\_

**Met in Person Verification Confirmation:**

Customer met and IDs sighted by: Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
GEID: \_\_\_\_\_

Independently verified by : Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
GEID: \_\_\_\_\_

Signature verified by : Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
GEID: \_\_\_\_\_

E-STATEMENTS