

1. ACCOUNT DETAILS

Customer Name _____

<input type="checkbox"/> Savings Bank A/c : <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	Savings CIF: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<input type="checkbox"/> Locker No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	<input type="checkbox"/> Jewel loan A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<input type="checkbox"/> FDOD A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	<input type="checkbox"/> KKV A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<input type="checkbox"/> KCC a/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	<input type="checkbox"/> FE A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<input type="checkbox"/> PPF A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	<input type="checkbox"/> ICICI Policy No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<input type="checkbox"/> Demat A/c No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 300px; height: 20px;"></table>	
<input type="checkbox"/> Loan A/c No.: (HL/AL/PL/EL) <table border="1" style="display: inline-table; border-collapse: collapse; width: 400px; height: 20px;"></table>	
<input type="checkbox"/> Credit Card No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 200px; height: 20px;"></table>	

FATCA/CRS updated: YES / NO (Mandatory to submit FATCA/CRS declaration for updating overseas contact details)

2. CUSTOMER PROFILE

1. Occupation

a) If Salaried, employed with

<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Pvt. Ltd.	<input type="checkbox"/> Public Ltd.	<input type="checkbox"/> Public Sector
<input type="checkbox"/> Government	<input type="checkbox"/> Multinational	<input type="checkbox"/> Others _____		

b) If Self Employed, and

<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Trading	<input type="checkbox"/> Services	<input type="checkbox"/> Retailing	<input type="checkbox"/> Agriculture
If in Business, nature of Business <input type="checkbox"/> Stock Broker	<input type="checkbox"/> Real Estate	<input type="checkbox"/> Shroffs and Moneylenders <input type="checkbox"/> Others _____		
If Professional, type of Profession <input type="checkbox"/> Doctor	<input type="checkbox"/> CA/CS	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Architect	<input type="checkbox"/> Consultant
<input type="checkbox"/> Engineer	<input type="checkbox"/> Others _____			

c) If Others

<input type="checkbox"/> House Wife	<input type="checkbox"/> Retired	<input type="checkbox"/> Student
-------------------------------------	----------------------------------	----------------------------------

d) If Agri Allied/Farmer details of landholding

<input type="checkbox"/> Nil	<input type="checkbox"/> <=5 acres	<input type="checkbox"/> > 5 acres
------------------------------	------------------------------------	------------------------------------

2. Education

<input type="checkbox"/> Under Graduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> Post Graduate	<input type="checkbox"/> Professional
---	-----------------------------------	--	---------------------------------------

3. Gross Annual Income(₹)

<input type="checkbox"/> Nil	<input type="checkbox"/> < 1Lac	<input type="checkbox"/> 1Lac - 5 Lacs	<input type="checkbox"/> 5 Lacs - 10 Lacs	<input type="checkbox"/> 10 Lacs - 15 Lacs
<input type="checkbox"/> 15 Lacs-20 Lacs	<input type="checkbox"/> 20 Lacs - 25 Lacs	<input type="checkbox"/> 25 Lacs - 50Lacs	<input type="checkbox"/> 50 Lacs - 1 Cr	<input type="checkbox"/> > 1 Cr

4. Source of funds:

<input type="checkbox"/> Salary	<input type="checkbox"/> Business Income	<input type="checkbox"/> Agriculture Income	<input type="checkbox"/> Investments in heritage
<input type="checkbox"/> Rent	<input type="checkbox"/> Pension	<input type="checkbox"/> Funds from family members	<input type="checkbox"/> Other (pl specify) _____

5. ID Proof

<input type="checkbox"/> Passport	<input type="checkbox"/> Aadhaar Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> Voter ID Card	<input type="checkbox"/> NREGA Card
-----------------------------------	---------------------------------------	--	--	-------------------------------------

6. Address Proof

<input type="checkbox"/> Passport	<input type="checkbox"/> Aadhaar Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> Voter ID Card	<input type="checkbox"/> NREGA Card
-----------------------------------	---------------------------------------	--	--	-------------------------------------

3. CUSTOMER INSTRUCTIONS

 Update Communication Address (Mandatory to submit address proof)

House/Flat No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>	Floor No. <table border="1" style="display: inline-table; border-collapse: collapse; width: 50px; height: 20px;"></table>	Premise/Building Name <table border="1" style="display: inline-table; border-collapse: collapse; width: 300px; height: 20px;"></table>
<table border="1" style="display: inline-table; border-collapse: collapse; width: 450px; height: 20px;"></table>		Street/Road Name & No. <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table> Landmark/ Suburb	<table border="1" style="display: inline-table; border-collapse: collapse; width: 200px; height: 20px;"></table>	Locality <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
State <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>	City <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	PIN code <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>

 Update Permanent Address (To be filled only if different from new communication address, mandatory to submit address proof)

House/Flat No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>	Floor No. <table border="1" style="display: inline-table; border-collapse: collapse; width: 50px; height: 20px;"></table>	Premise/Building Name <table border="1" style="display: inline-table; border-collapse: collapse; width: 300px; height: 20px;"></table>
<table border="1" style="display: inline-table; border-collapse: collapse; width: 450px; height: 20px;"></table>		Street/Road Name & No. <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
<table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table> Landmark/ Suburb	<table border="1" style="display: inline-table; border-collapse: collapse; width: 200px; height: 20px;"></table>	Locality <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
State <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>	City <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	PIN code <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>

 Update Email ID

 Register for Email Statement

 Tel No.

 Update Passport details

Passport No.: <table border="1" style="display: inline-table; border-collapse: collapse; width: 100px; height: 20px;"></table>	Issuance Date: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>	Expiry Date: <table border="1" style="display: inline-table; border-collapse: collapse; width: 150px; height: 20px;"></table>
--	---	---

 Passport Issuing Country:

 Update PAN

 Update DOB

 Mother's Maiden Name:

Update Registered Mobile No.

Register for all Alerts
(Charges applicable)

Mandatory Alerts

4. CUSTOMER DECLARATION

- I/We understand and agree that the above information will be used for updating in all the accounts maintained with ICICI Bank
- I/We confirm having checked the mobile number updated/to be updated in the Bank records and understand that all SMS alerts for electronic banking transactions, transaction advices and any communication related to my account will be received on the mentioned mobile number
- I/We also authorize the bank to contact me on the above mentioned number for verification call back or checks to confirm the veracity of any transaction, as deemed fit by the bank

For detailed Terms & Conditions, please visit www.icicibank.com

(Primary Applicant)

(Joint Holder 1)

(Joint Holder 2)

(Please collect acknowledgement for this request)

5. FOR BRANCH USE ONLY

- The applicant(s) has/have signed in my presence and the signatures have been verified with the Bank's records
Enclosed photocopy of the below document is attested by Customer and verified with original
- Document obtained - Passport Aadhaar Card Driving License Voter ID Card NREGA Card
- KRA form obtained for change of address in Demat account

(Bank Official Name & Employee ID)

(Bank official signature)

(BM/DBM Signature & Employee ID)

Branch
Seal