

(A Scheduled Commercial Bank)

1

SA FD ACCOUNT OPENING FORM FOR NON RESIDENT INDIANS & FOREIGN NATIONALS

JANA SMALL FINANCE BANK

(A Scheduled Commercial Bank)

Email ID*

KYC

Passport

Passport No*

(1st Applicant)

Place of Issue*

Expiry Date*

Visa

Visa No*

 Others (please specify)

Visa Type*

 Student Visa Residence Permit CDC Work Visa

Expiry Date*

Address Proof*

(for preferred communication address)

Aadhaar No.

PAN No.

☐ Form 60 ☐ Form 49A

CKYC ID

☐ As per provisions of section 206AB of the Income-Tax Act, I declare that I do not have any Permanent Establishment (Place of Business) in India. I undertake to inform the Bank any changes therein, immediately upon such change.

Please paste photograph of 1st Applicant

Place:

Date:

Signature of 1st Applicant

(2nd Applicant)

 Others (please specify)

 Student Visa Residence Permit CDC Work Visa

☐ Form 60 ☐ Form 49A

☐ As per provisions of section 206AB of the Income-Tax Act, I declare that I do not have any Permanent Establishment (Place of Business) in India. I undertake to inform the Bank any changes therein, immediately upon such change.

Please paste photograph of 2nd Applicant

Place:

Date:

Signature of 2nd Applicant

Services Offered

☐ Please tick if SMS Alerts are required for Savings Account

Type of Kit ☐ Insta-Kit ☐ Personalised Kit (if selected, please fill the below details)

Cheque book* ☐ Yes ☐ No

Are you a politically exposed person (PEP) or related to one?* ☐ Yes ☐ No

Debit Card

NRE Savings

NRO Savings

Name on Debit Card

First Applicant

☐
☐

Second Applicant

☐
☐

Declarations

Declaration for Minor Account (If Applicable)

Type of Guardian: ☐ Father ☐ Mother ☐ Court Appointed

I hereby declare that the date of birth of the minor who is my is and I'm her natural or lawful guardian/Guardian appointed by court order dated (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I declare that the amounts withdrawn from this account by me will be used for the benefit of the minor. I shall indemnify and keep the Bank indemnified against the claim of the above minor for any withdrawal/transactions.

Declaration for Person of Indian Origin (PIO) (If Applicable)

I hereby declare that I am a Person of Indian Origin. I satisfy one of the following conditions and am attaching herewith, supporting documents to satisfy the below declaration. (Please select from the below mentioned choices as applicable to you)

☐ I held an Indian Passport My father/mother/grandfather/grandmother is/was a citizen of India

☐ I am the spouse of an Indian citizen

☐ I am the spouse of a PIO/OCI

☐ I hold PIO/OCI card I belonged to a territory that became part of India after the 15th day of August, 1947

Declaration of Mariner Account (If Applicable)

I hereby declare and confirm that I am a Non-Resident Indian and I am presently on contract with company registered in (address of the principal). I request you to open a NRE/NRO Savings Account in my name on the basis of the submitted documents. I also confirm that I will inform the Bank, in case I do not renew my contract or choose to go on a new contract or I am unable to proceed on a new contract or in any case in the event that my status of Non-Resident Indian is altered. Accordingly, I will have the Non-Resident accounts opened in my name re-designated to Resident accounts.

Declaration for Non-Resident Indian*

I/We hereby declare that I/We am/are non-resident Indian(s) (the "NRI/s")/ Person(s) of Indian origin (the "PIO/s") as defined in Section 2(w) of Foreign Exchange Management Act, 1999 as amended from time to time (FEMA 1999). I/We understand that the above account will be opened on the basis of the statements/declarations made by me/us, and I/We also agree that if any of the statements/declarations made herein is found to be incorrect/misleading in material particulars, the Bank shall not be bound to accept and/or process my/our application for opening any account(s) with the Bank. I also understand that the Bank may at its sole discretion discontinue any of the services completely or partially without any notice to me. I shall abide by and be bound by all applicable rules, regulations, instructions and guidelines issued by Reserve Bank of India ("RBI"), the Common Reporting Standard ("CRS") and any other governmental or regulatory authority, in force from time to time.

Place:

Date:

D	D	M	M	Y	Y	Y	Y
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Signature of 1st ApplicantSignature of 2nd Applicant (if applicable)

Initial Payment & Mode of Operation Details

NRE Savings Account

Operating Instruction*:

Others(please specify)

Singly	Jointly	Either or Survivor	Former or Survivor	
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Payment Mode*: ☐ Cheque ☐ DD ☐ NEFT/RTGS ☐ Nil IP

Cheque/DD No.: drawn on branch

IP Amount:

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 in words

NRO Savings Account

Operating Instruction*:

Others(please specify)

Singly	Jointly	Either or Survivor	
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Payment Mode*: ☐ Cheque ☐ DD ☐ NEFT/RTGS ☐ Nil IP

Cheque/DD No.: drawn on branch

IP Amount:

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 in words

NRE Fixed Deposit

Operating Instruction*:

Others(please specify)

Singly	Jointly	Either or Survivor	Former or Survivor	
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Payment Mode*: ☐ Cheque ☐ DD ☐ NEFT/RTGS ☐ Debit My A/CJana Bank A/c No.

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Cheque/DD No.: drawn on branch

IP Amount:

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 in wordsTenure*:

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 DaysInterest Payable*:

Monthly	Quarterly	Half Yearly	Yearly	Cumulative
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Maturity Instruction*:

Renew Principal with Interest	Renew Principal Only	Do not Renew
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Interest/Maturity Amt. to be Credited in*:

☐ Jana Bank Account ☐ Other Bank Account (please specify below)A/c No.

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IFSC

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Bank: Branch:

NRO Fixed Deposit

Operating Instruction*:

Others(please specify)

Singly	Jointly	Either or Survivor	
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Payment Mode*: ☐ Cheque ☐ DD ☐ NEFT/RTGS ☐ Debit My A/CJana Bank A/c No.

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Cheque/DD No.: drawn on branch

IP Amount:

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 in wordsTenure*:

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 DaysInterest Payable*:

Monthly	Quarterly	Half Yearly	Yearly	Cumulative
---------	-----------	-------------	--------	------------

Maturity Instruction*:

Renew Principal with Interest	Renew Principal Only	Do not Renew
-------------------------------	----------------------	--------------

Interest/Maturity Amt. to be Credited in*:

☐ Jana Bank Account ☐ Other Bank Account (please specify below)A/c No.

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IFSC

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Bank: Branch:

Would You Like To Choose A Nominee For The Account?*

☐ Yes, I wish to Nominate ☐ No, I do not wish to Nominate

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 nominate the following person to whom in the event of my/our/minor's death, the amount of deposit in the above account may be returned by Jana Small Finance Bank Limited.

First Name	Middle Name	Surname																																																												
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Nominee Address ☐ Same as primary account holder communication address ☐ Update address as below

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Relationship with Depositor

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Nominee Date of Birth

D	D	M	M	Y	Y	Y	Y
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If the nominee is a minor**, please complete this section. As the nominee is a minor on this date, I/We appoint:

First Name	Middle Name	Surname																																																												
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Guardian Address

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I/We hereby give my/our express consent to Jana Small Finance Bank to share my / our Aadhaar / KYC or any other details with Central KYC Registry / Credit Bureaus / any agencies as required by law, and receive information from these agencies. Any agencies so authorised may furnish for consideration, the processed information and data or products thereof prepared by them, to banks / financial institutions and other credit grantors or registered users, as may be specified by the regulators.

I/We hereby authorize the bank to share my personal KYC documents which are in foreign language to its third-party service provider who shall send it further to their sub-contractors for the purpose of translation thereof in English language. I/We understand and agree that the translation process is required to be conducted by the Bank in order to ascertain the details and validity mentioned in my/our personal KYC documents in foreign language which is a part of the KYC updation for the purpose of Account Opening/Re-KYC Updation/ or for any service request processing.

Internet Banking:

Jana SFB is authorized to issue/enable Internet Banking Services on NRE/NRO accounts. The account holder on usage of the Jana Small Finance Bank Internet banking facility will be bound by the terms and conditions in force from time to time as set forth on the website www.janabank.com. It is the duty of the account holder to protect and keep the User Id and password protected, safe and secured. The account holder shall be fully responsible for any of the linked accounts getting debited based on the instructions given through the Jana Small Finance Bank Ltd. Internet Banking User ID and password. The Bank will not be held responsible. The fees, duties or other charges associated with these services will be as applicable. All the linked accounts (including any new account that will be opened) will be covered under the Funds Transfer facility as per rules in force from time to time. Internet Banking access can be given to all individual customers except to account with joint operations. At present Internet Banking facility is not available to anyone.

Mobile Banking:

The account holders are responsible for the correctness of the Mobile Number provided for registration in the form. Transactional Alerts and One-Time Passwords will be sent on this registered mobile number. The account holder shall be fully responsible for the account being debited on instruction from the registered mobile Number/s directly or indirectly. The fees, duties or other charges associated with these services will be as applicable. In case of mistake on part of the account holder or that of the mobile service provider in respect of these services, the Bank will not be responsible and the account holder agrees that no claim will be made against the Bank. The Bank shall at its own discretion at any time may discontinue/alter/modify the facility and the terms and conditions as specified herein and the same shall be updated from time to time at www.janabank.com. Mobile Banking access can be given to all individual customers except to account with joint operations.

FATCA-CRS Declaration Please tick the applicable tax resident declaration (Any one) (MANDATORY)

☐ 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 the country/ies in which the entity is a resident for tax purposes and the associated Tax ID Number below:

*City of Birth *Country of Birth

Address Type for Tax Purpose ☐ Residential ☐ Business ☐ Registered Office

Country#	Tax Identification Number	Identification Type (TIN or Other, please specify)	Address For Tax Purpose		
			<input type="checkbox"/> Communication Address	<input type="checkbox"/> Permanent Address	<input type="checkbox"/> Please note the address below
			Landmark		
			PIN <input type="text"/>	State	Country

If you do not have Tax Payer Identification Number/functional equivalent, please tick the reason for the same as given below

☐ I am a person resident out of India with (choose only if applicable):

Country not issuing TIN/Functional equivalent: _____ (mention: <input type="checkbox"/> Visa <input type="checkbox"/> Residence <input type="checkbox"/> Work permit number)	Seafarer: (mention CDC ⁴ /visa number)
Dependent visa number:	Student visa number:
Going to the country of residence for first time (mention visa number):	

(TIN/functional equivalent to be communicated to the bank within 90 days, else account will get closed).

OR

I am a person resident in India as well as resident for tax purposes in India (Please also fill Self-Certification)

D. In case you are declaring US person status as 'No' but your Country of Birth is US, please provide document evidencing Relinquishment of Citizenship. If not available provide reason/s for not having relinquishment certificate _____

_____. Please also fill Self-Certification.

Customer Declaration (Applicable for all customers)

- Under penalty of perjury, I certify that:
 - 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**
 - 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)**
- I understand that the Bank is relying on this information for the purpose of determining my status in compliance with FATCA/CRS. The Bank is not able to offer any tax advice on FATCA/CRS or its impact. I shall seek advice from professional tax advisor for any tax questions.
- I agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

- I agree that as may be required by domestic regulators/tax authorities the Bank may also be required to inform reportable details to Central Board of Direct Taxes or close or suspend my account.
- I shall indemnify the Bank for any loss that may arise to the Bank on account of incorrect/incomplete information provided by me.
- I certify that I/We provide the information on this form and to the best of my knowledge and belief the certification is true, correct, and complete including the tax payer identification number/functional equivalent number of the applicant and that I have understood the information requirements of the Form (read along with the FATCA-CRS terms and rules Notified by the Central Board of Direct Taxes vide notification No.S.O.2155(E) dated 7th August 2015).

Signature of Primary Applicant: _____ Date: _____ Place: _____

Self-Certification: (Not Applicable for NRI customers except for point (b) below)

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"

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 following document as proof of my citizenship and / or residency.	Signature of Primary Applicant:
Document Proof submitted (Please tick document being submitted and mention the document number): _____	
<input type="checkbox"/> Passport <input type="checkbox"/> Election Id Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Letter <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Govt. Issued ID Card	

Note:

The term United States person means:

- An individual, being a citizen or resident of the United States of America;
- Partnership or corporation organized in the United States of America or under the laws of the United States of America or any State thereof;
- A trust if:
 - (i). a court within the United States of America would have authority under applicable law to render orders or judgements 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;
- An estate of a decedent who was a citizen or resident of the United States of America.

Functional Equivalent of TIN includes the following:

A social security/insurance number, citizen/personal identification/services code/national identification number, a resident / population registration number, Alien card number, etc.

Declaration: I-Choose My Account

I/We _____, hereby declare that I/we have opted for the I-Choose My Account ("ICMA") proposition offered by the Jana Small Finance Bank Ltd. (the "Bank") and wish to avail the account number _____. I/We understand that the Bank has the right to provide me this account number subject to availability of the same and fulfillment of all the required criteria provided by the Bank for account opening.

I/We also acknowledge that the sourcing officer has explained to me/us all the benefits, eligible product variants and other details associated with the ICMA. I/We declare that I/we will maintain the required AQB/AMB as prescribed by the Bank for this feature.

I/We further acknowledge that the Bank has the right to downgrade or close the account, if the product specific requirement provided on the Bank's website is not met.

Date: _____ Place: _____

Signature of Primary Applicant

Signature of Secondary Applicant

For Office Use Only

Certification by Branch Official

I certify that the account opening form is complete in all respects and relevant documents have been obtained and verified.

In case of Face to Face account opening, I certify that customer has signed in my presence.

Emp. Code: _____ Emp. Name: _____

Date: _____ Sign: _____

Mandate Letter

Mandate Holder Name

Existing customer, if yes please mention CRN

New Customer, if yes please fill the mandate holder form additionally

Mandate to operate ☐ NRE SA ☐ NRO SA

Please tick if applicable

☐ NRE SA

Please tick if applicable

☐ NRO SA

Services required ☐ Debit card ☐ Mandate Cheque book

Mobile number of mandate holder

Terms and Conditions

- 1) I hereby authorise the mandate holder (a) To draw cheques on the account only for local payments. (b) To deposit cheques eligible to be deposited in the NRE/NRO account as permitted by RBI/FEMA regulations, on behalf of me. (c) To operate on the account to facilitate making investments in India, only if I am eligible to make investments in India. (d) To certify balance confirmation statement and statement of accounts issued by the Bank in respect of the account. (e) To give instructions in writing involving debits to the account. (f) To make deposits from balances available in the account in my names and to renew such deposits for such periods as may be given in writing by the above mandate holder.
- 2) The above mandate holder shall exercise his authority only to the extent permitted by the guidelines issued by the Reserve Bank of India ("RBI") and those under FEMA. Wherever specific permissions are required to be obtained from RBI, such transactions need be permitted by the Bank only upon me serving on the Bank requisite permission issued by RBI. I hereby undertake that I and my mandate holder shall comply with provisions of the Foreign Exchange Management Regulations issued by the RBI and also the Foreign Exchange Management Act, 1999, and all the regulations/rules framed thereunder, including the Foreign Exchange Management (Deposit) Regulations, 2000, the Foreign Management (Deposit) Regulations, 2016 and all amendments thereof.
- 3) The specimen signature of the mandate holder who is authorised by me to operate upon the account is given below. The signature has been duly attested and verified by me.
- 4) This authority and mandate shall continue in force until I expressly revoke it by notice in writing served upon the Bank.
- 5) I am aware that only domestic debit card shall be issued on request to the mandate holder, and the charges of which shall be debited to the account for which the mandate holder has been appointed.
- 6) All the acts and deeds done by the above said mandate holder based on this mandate shall be as effective and binding on me as if such acts and deeds are done by me in person, and I shall not dispute or cause to dispute any such instances at any point of time.

Signature of Mandate Holder

Name

Signature of 1st Applicant

Name

Signature of 2nd Applicant

Name

Acknowledgement of Initial Payment and Nomination

☐ We acknowledge receipt of nomination made by you in favour of:

Name of nominee Age years with respect to your application number

☐ No nominee for the account since nomination facility not availed by the account holder.

According to RBI's nomination guidelines, it is necessary to register a nominee on account opened under a single name. Appointing a nominee is beneficial for the following reasons:

1. If the account holder dies, the bank will easily pass on the funds in the account to the nominee
2. Hassle-free formalities for the nominee while claiming benefits

Signature of Bank Official

Form 60

Form for declaration to be filled by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

If applied for PAN and it is not yet generated enter date of application _ _ / _ _ / _ _ _ _ (DD/MM/YYYY) and acknowledgement number _____

If PAN not applied, fill estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) for the financial year in which the above transaction is held

a Agricultural income (Rs.) _____

b Other than Agricultural income (Rs.) _____

Verification

I, _____ do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare that I do not have a Permanent Account Number and my/our estimated total income (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in accordance with the provisions of Income-tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

Verified today, the _____ day of _____ 20 _____

Signature of Applicant: _____

Date: _____ Place: _____

Note: 1. Before signing the declaration, the declarant should satisfy himself that the information furnished in this form is true, correct and complete in all respects. Any person making a false statement in the declaration shall be liable to prosecution under section 277 of the Income-tax Act, 1961 and on conviction be punishable, (i) in a case where tax sought to be evaded exceeds twenty-five lakh rupees, with rigorous imprisonment which shall not be less than six months but which may extend to seven years and with fine; (ii) in any other case, with rigorous imprisonment which shall not be less than three months but which may extend to two years and with fine. 2. The person accepting the declaration shall not accept the declaration where the amount of income of the nature referred to in item 22b exceeds the maximum amount which is not chargeable to tax, unless PAN is applied for and column 21 is duly filled.