SBI NRI SERVICES
SMART BANKING

NRO Account Opening Application

For Foreign Tourists Only

State Bank of India
THE BANKER TO EVERY INDIAN

For Office Use only: **Application type:** ☐ New ☐ Update

CIF _____ Account No: _____ Initials

C-KYC No. _____ Documents Received: ☐ Self-Certified ☐ Notary

NPWK Docket ID: _____ ATM Card PPK No: _____ ATM PIN PPK No: _____ Initials

INB Kit No: _____ ☐ Hand-delivered ☐ Dispatched ☐ Emailed INB Rights: ○ Transaction ○ View Initials

Account opened on: d d m m y y y y ATM Card data transmitted on: d d m m y y y y Initials

Nomination form entered on: d d m m y y y y Threshold (KYC) limit (₹): _____

In-Person Verification carried out: ☐ Yes ☐ No Date: d d m m y y y y Emp Name: _____ Signature:

Emp Code: _____ Emp Designation: _____ Br Code: _____

Whether self-certification & documents received as part of account opening process have been verified and found correct and reliable *(Branch to proceed with opening of account only when certification is Yes)*: ☐ Yes ☐ No Remarks (If any): _____

A/c opened by Computer Operator (Name): _____ Authorised Officer (Name & SS No) _____ AUTHORISED SIGNATORY

Important Note:

- Foreign tourist, who are minor, are not permitted to open the account
- Joint account is not permitted
- Mode of operation permitted to operate the account is 'Self' only
- Power of Attorney (POA) will not be allowed to operate the account
- All correspondences will be sent to current address (Indian address) only
- If the account has been maintained for a period of six months or less than that, repatriation of funds to abroad is allowed without RBI approval. In all other case, account holder has to make an application to the concerned Regional Office of RBI for repatriation of balance on plain paper and submit the RBI's approved copy to the concerned SBI branch.

Guidance for filling Account Opening Application:

- Please fill up in BLOCK letters only and use black ink for signature. Signature in capital letters are not acceptable. Please leave one box blank between two words.
- Name mentioned and signatures in application and all Identification Documents should be legible and same
- Please use uniform signatures across all places in application (at A1, A2 & A3) and in your all future banking transactions with us
- Please affix a passport size photograph. Please also enclose another photograph for affixing on the Passbook
- If any of the proof for identification being given for KYC is in foreign language, then certified translated copy of same has to be given
- You should authenticate corrections/alterations if any with full signature in the account opening application

Documents to be submitted along with Account Opening Application:

- One passport size photograph, which will be affixed on the Passbook
- Proofs for Status, Identity, Tax Residency and Current Address, as per Identification Documents table

Please open an account at your: _____ (Please specify your preferred Branch Name, District & State)

Applicant's Personal Details

Senior Citizen: ☐ Yes ☐ No

Name (as mentioned in the passport): ☐ Mr. ☐ Ms. ☐ Mrs. Other _____

First Name _____ Middle Name _____ Last Name / Surname _____

Maiden Name (If any): _____ First Name _____ Middle Name _____ Last Name / Surname _____

Father Name: _____ First Name _____ Middle Name _____ Last Name / Surname _____

Mother Maiden Name: _____

Date of Birth: d d m m y y y y **Place of Birth:** _____ **Country of Birth:** _____

Gender: ☐ Male ☐ Female ☐ Transgender **Nationality:** _____

Marital Status: ☐ Married ☐ Unmarried ☐ Others _____

Spouse Name: _____ First Name _____ Middle Name _____ Last Name / Surname _____ *(Required if Marital Status is Married)*

Current Address *(Indian Only)*

Address Type: ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

_____

_____

City/Town/District: _____ **State:** _____

PIN: _____ **Country:** _____

Permanent Address *(Overseas only)*

Address Type: ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

_____

_____

City/Town/District: _____ **State:** _____

PIN: _____ **Country:** _____

Please tick where you would like to recieve all correspondences - ☐ **Current Address** ☐ **Permanent Address**

Contact Details

Mob. No.* ISD NUMBER **Tel. No.**(Res) ISD STD NUMBER **Tel. No.**(Off) ISD STD NUMBER

Fax. No. ISD STD NUMBER **Email Address*:** *(*Mandatory if Internet Banking is required)*

Passport Details

Passport No.	Issue Date	Place of Issue	Nationality	Valid upto

Visa Details

Visa No.	Issue Date	Place of Issue	Valid upto

Taxation Details *(Please fill following details, if you are tax payer in any of the country or multiple countries)*

S. No.	Country of residence for tax	Tax Identification Number (TIN) or functional equivalent	TIN issuing Country
1			
2			
3			

Please provide address, if S.No. 1 is filled in Taxation Details

☐ Same as Current Address ☐ Same as Permanent Address

Other Address: _____

_____ City: _____

State: _____ PIN: _____ Country: _____

Identification Documents *(Please give certified translated copy of proof wherever it is in foreign language)*

Proof of Identity	Proof of Status	Proof of Tax Residency	Proof of Current Address (For Indian address only)
☐ Relevant pages of Passport	☐ Valid Visa	Any one of the following: ○ Document mentioning Tax Identification Number (TIN) or functional equivalent ○ Certificate of residence or any valid identification issued by an authorized Government body, including a Government agency or a municipality, of the country or territory of residence ○ Any financial statement, third-party credit report, bankruptcy filing, or a report of the Government agency regulating the securities market	Self-declaration of address with positive confirmation by submitting a copy of anyone of the following. Standard format can be downloaded from 'Download Forms' page of our website or please sign and write "Self declaration of Indian address for Foreign Tourist NRO account opening purpose" on the document itself. ○ Utility Bill (Electricity, Telephone, Gas) ○ Rent receipt ○ Acknowledgment of correspondence at the address

Details of Related Person (If any): ☐ Addition of Related Person ☐ Deletion of Related Person

Related Person Type: ☐ Nominee (Please fill Form DA-1 on page no 3)

Related Person Name: ☐ Mr. ☐ Ms. ☐ Mrs. ☐ Other _____

First Name Middle Name Last Name / Surname

Additional Details *(Please tick (✓) whichever applicable)*

Income (In USD equivalent): _____ ☐ Monthly ☐ Annually **Assets** (In USD equivalent): _____

Religion: ☐ Hindu ☐ Muslim ☐ Christian ☐ Sikh ☐ Others _____ **Category:** ☐ General ☐ OBC ☐ SC ☐ ST

Qualification: ☐ Non-Graduate ☐ Graduate ☐ Post-Graduate ☐ Others _____ **Designation / Profession:** _____

Occupation Type: ☐ Service (○ Private Sector ○ Public Sector ○ Government Sector) ☐ Business

☐ Others (○ Professional ○ Self Employed ○ Retired ○ Housewife ○ Student) ☐ Not Categorized

Specimen Signature and Photograph

Paste a Passport size Photograph of Applicant

Photograph should be signed across by the applicant

A1 Signature / Thumb impression of Applicant

Signature & SS No of Verifying Officer

Date: d d m m y y y y

Place: _____

Please Open *(Tick (✓) the account type you wish to open)*

Account	Type	Amount & Currency
Non Resident Ordinary (NRO) Account	◯ Savings ◯ Current	

Services Required

1. ATM-CUM-DEBIT Card: (International card will not be issued for NRO Account) ☐ Required ☐ Not Required

2. INTERNET BANKING: ☐ Viewing rights ☐ Transaction rights **3. SMS ALERTS:** ☐ Required ☐ Not Required

4. EMAIL ALERTS: ☐ Required ☐ Not Required **5. CHEQUE BOOK:** ☐ Required ☐ Not Required

Declarations Cum Undertakings

1. I hereby certify that I have declared my status as per the rules applicable under section 285BA of the Income tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No. S.O. 2155(E) dated 7 August 2015 and RBI Circular No. RBI/2015-16/165 DBR.AML.BC.No.36/14.01.001/2015-16 dated 28 August 2015 in this regard.
2. I understand and acknowledge that as per the provisions Income tax Act, Rules made thereunder and guidelines issued by the RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements (IGA) and Common Reporting Standards (CRS) and or any other similar arrangements.
3. I certify that the information provided by me above as applicable to me and signed by me as well as in the documentary evidence provided by me is, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of my account as a U.S. Reportable Account or other reportable Account or otherwise.
4. I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided above, as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh and valid self- certification along with documentary evidence.
5. I also agree that my failure to disclose any material fact known to me, now or in future, may invalidate me from transacting in the account and State Bank of India would be within its right to put restrictions in the operations of my account or close it or report to any regulator and/or any authority designated by the Government of India (GOI) /RBI for the purpose or take any other action as may be deemed appropriate by State Bank of India, under the guidelines issued by CBDT/RBI from time to time, if the deficiency is not remedied by me within the stipulated period.
6. I also agree to furnish and intimate to State Bank of India any other particulars that are called upon me to provide on account of any change in law either in India or abroad in the subject matter herein.
7. I shall indemnify State Bank of India for any loss that may be caused to the State Bank of India on account of providing incorrect or incomplete information by me.
8. I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
9. My personal / KYC details may be shared with Central KYC Registry. I hereby consent to receiving information from Central KYC Registry through SMS / Email on my registered number / email address.
10. At my request, you have opened 'Foreign Tourist NRO Account' in my name, under the rules framed by RBI. I understand that as per the account features and RBI guidelines, operations in my account will be stopped on the expiry of my VISA. I further understand that in case I have to maintain account beyond VISA expiry date, I will obtain approval from the Reserve Bank of India (RBI) and submit it to the Bank for making my account operative again. I also understand that I will require RBI's specific approval for repatriation of funds abroad from this account if such a request is made six months after the opening of account.
11. Account will not be credited with any local funds other than interest accrued on it i.e. source of funding will only be from foreign or interest earned in the account itself.
12. I hereby declare that the transaction(s) to be routed through my account does not involve and is not designed for the purpose of any contravention or evasion of the provisions of the PMLA or FEMA, 1999 or of any rule regulation, notification, direction or order made thereunder. I also hereby agree and undertake to give such information/documents before the Bank undertakes the transaction(s) and as may be required from time to time as will reasonably satisfy you about the transaction(s) in terms of the declaration. I also understand that if I refuse to comply with any such requirement or make unsatisfactory compliance therewith, the Bank shall refuse in writing to undertake the transaction and shall if it has reason to believe that any contravention/evasion is contemplated by me and report the matter to Regulator / or otherwise also, as and when demanded by them.
13. I hereby declare that I am not resident of India and not residents of any country where opening or maintaining of the account is prohibited by the law and regulatory requirement of such country or by the applicable laws in India or by the Reserve Bank of India. I understand that the above account will be opened on the basis of the statements/declarations made by me and I agree that if any of the statements/declarations made herein is found to be incorrect in material particulars, I am not eligible for any interest on the deposit made by me and the account may be closed.
14. I have read and understood the rules and regulations of the product(s) / service(s) / facilities (internet banking, ATM etc.) opted for and agree to abide by the terms and conditions relating to the conduct thereof and also any change brought about therein from time to time.
15. I hereby agree that the transactions in the above account will be governed by the applicable laws in India and all disputes or differences arising out of or related to or connected with transaction or matters in relation to the above account shall be subject to exclusive 'Jurisdiction of Indian Courts'.
16. I undertake that the usage of the ATM cum Debit Card will be in accordance with the local regulations in force. I accept full responsibility for my ATM/Debit Card transactions and agree not to make any counter claims against the Bank in respect of these transactions.

A2 Signature/Thumb impression of applicant

Date: d d m m y y y y

Place: _____

Form DA-1 (Nomination Form) ☐ Required (Please fill following details) ☐ Not Required

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 the deposit, particulars whereof are given below, may be returned by State Bank of India, _____

_____ (Name and address of branch / office in which the deposit is held)

Details of Deposit: Type of deposit: _____ Account number: _____ Additional Details _____

Details of the Nominee: Name: _____ First Name _____ Middle Name _____ Last Name / Surname

Relationship with the depositor: _____ Age: _____ Date of birth of nominee: d d m m y y y y

Address: _____ City: _____

PIN: _____ State: _____ Country: _____ **CIF No. of Nominee (to be filled by Bank):** _____

As the nominee is a minor on this date, I/We appoint Shri/Smt./Kum. _____ age: _____ years

Residing at _____

_____ to recieve the amount of the deposit on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

Date: d d m m y y y y

Place: _____

A3 Signature/Thumb impression of applicant

Nomination Serial No. _____ (to be filled by Bank)

Signature/Thumb impression of 1st Witness**	Name: _____ Address: _____
Signature/Thumb impression of 2nd Witness**	Name: _____ Address: _____

* Where deposit is made in the name of a 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 persons.