



CUSTOMER UPDATION FORM FOR RE KYC - NON-INDIVIDUALS

(PLEASE FILL ALL THE DETAILS IN CAPITAL LETTERS ONLY)

Bar code

NAME OF THE ENTITY																
CKYC NUMBER						CORPORATE CODE										
RELATIONSHIP NUMBER 1						RELATIONSHIP NUMBER 2										
RELATIONSHIP NUMBER 3						RELATIONSHIP NUMBER 4										
DATE OF INCORPORATION	D	D	M	M	Y	Y	Y	Y	PAN NUMBER							
TIN NUMBER						CIN NUMBER										
ANNUAL TURNOVER <small>(In ₹, in Nos. & in Crs.)</small>						GSTN										
LEI CODE								LEI EXPIRY DATE	D	D	M	M	Y	Y	Y	Y

BUSINESS TYPE

<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Distributor	<input type="checkbox"/> Wholesale	<input type="checkbox"/> Trading	<input type="checkbox"/> Broking
<input type="checkbox"/> Service Provider	<input type="checkbox"/> Importing	<input type="checkbox"/> Exporting	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Dealers
<input type="checkbox"/> Others _____				

INDUSTRY TYPE

<input type="checkbox"/> Automobile	<input type="checkbox"/> Retail Jewellery	<input type="checkbox"/> Cement Paint	<input type="checkbox"/> Media/Entertainment	<input type="checkbox"/> Marble/Granite	<input type="checkbox"/> Fertilizers/Chemicals/Seeds/Pesticides
<input type="checkbox"/> Petrol Pump	<input type="checkbox"/> Furniture Timber	<input type="checkbox"/> Engineering Goods	<input type="checkbox"/> Construction	<input type="checkbox"/> Agriculture Commodities	<input type="checkbox"/> Electronics/Computer Hardware
<input type="checkbox"/> Contractors	<input type="checkbox"/> Broking	<input type="checkbox"/> Pharmaceuticals	<input type="checkbox"/> Steel/Hardware	<input type="checkbox"/> Leasing & Hire Purchases	<input type="checkbox"/> Hospital/Nursing Home/Clinic
<input type="checkbox"/> Oil	<input type="checkbox"/> Advt Agencies	<input type="checkbox"/> Hotels/Resorts	<input type="checkbox"/> Dairy/Food Processing	<input type="checkbox"/> Housing Finance	<input type="checkbox"/> Fast Moving Consumer Goods (FMCG)
<input type="checkbox"/> Consultancy	<input type="checkbox"/> Restaurants	<input type="checkbox"/> Consumer/Durables	<input type="checkbox"/> Textiles/Garments	<input type="checkbox"/> Auto Finance	<input type="checkbox"/> Term Lending Institutions
<input type="checkbox"/> Education	<input type="checkbox"/> Forex Dealer/Bullion	<input type="checkbox"/> Transportation/ Logistics	<input type="checkbox"/> Printing/Publishing	<input type="checkbox"/> Issue & Portfolio Management	
<input type="checkbox"/> NBFC	<input type="checkbox"/> Fisheries/Poultry	<input type="checkbox"/> IT/Software/BPO	<input type="checkbox"/> Travel/Tour Agency	<input type="checkbox"/> Others _____	

ENTITY CONSTITUTION TYPE

<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Public Limited Company	<input type="checkbox"/> Government	<input type="checkbox"/> Bank	<input type="checkbox"/> Societies
<input type="checkbox"/> Insurance	<input type="checkbox"/> Registered Partnership	<input type="checkbox"/> Self Help Group	<input type="checkbox"/> HUF	<input type="checkbox"/> Non Govt. Organization	<input type="checkbox"/> Section 25/8 Company	<input type="checkbox"/> Mutual Fund
<input type="checkbox"/> Association	<input type="checkbox"/> Clubs	<input type="checkbox"/> Trust	<input type="checkbox"/> Private limited Company			

BUSINESS CATEGORY MSME SME Micro Small Medium Large Others _____

CLASS OF ACTIVITY

HDFC BANK ACCOUNT NO.

PROOF OF IDENTITY (POI)*

<input type="checkbox"/> Certificate of Incorporation / Formation _____	<input type="checkbox"/> Registration Certificate _____
<input type="checkbox"/> Memorandum and Articles for Association	<input type="checkbox"/> Partnership Deed
<input type="checkbox"/> Trust Deed	<input type="checkbox"/> Other _____
<input type="checkbox"/> Resolution of Board / Managing Committee	



ADDRESS There is no change in my/our Registered / Correspondence address/ contact details I/ We wish to change my/our Registered / Correspondence address/ contact details as below:**REGISTERED OFFICE ADDRESS / PLACE OF BUSINESS**Proof of Address Certificate of Incorporation / Formation Registration Certificate Other Document Contact Name C/o Line 1 Line 2 Landmark City/Town/Village District PIN/Post Code State/U.T Code Country Alpha Code **CORRESPONDENCE ADDRESS IN INDIA**Address same as above YES NO (In case no, please submit the correspondence address proof)Contact Name C/o Line 1 Line 2 Landmark City/Town/Village District PIN/Post Code State/U.T Code Country Alpha Code **REGISTERED ADDRESS TYPE** Owned Rented/Leased**CONTACT DETAILS** (All communications will be sent to Mobile number/Email-ID)Tel. (Off) - Mobile - Email ID Company Website **RELATED PERSON**Number of Related Person **Politically Exposed Person (PEP) Status*** PEP Related to PEP Not Applicable*PEP are defined as individuals who are or have been entrusted with prominent public functions e.g., Heads of States or of Governments, senior politicians, senior Government/Judiciary/Military officers, senior executives of state-owned corporations, important political party officials etc. Any of the authorized signatories/Promoters/Karta/Trustee/Directors Beneficial owners of the company are related to PEP segment**OWNERSHIP AND CONTROL STRUCTURE INFORMATION SHEET**

KYC documents are not mandatory in case of existing HDFC Bank Customers (Customer ID is mandatory)

1. Related Person Type Director Promoter Karta Trustee Partner
 Beneficiary Owner Authorised Signatory Proprietor Other (Please Specify) _____**Name** **DIN (Director Identification Number)** (Mandatory if Related Person Type is Director)**Beneficiary Owner Share Holding Percentage** (Mandatory if Related Person Type is Beneficiary Owner)Date of Birth Pan number Customer ID (Existing HDFC Bank customer) Mother/Father /Spouse Name Gender Male Female Other Nationality Address PIN Code State Country E-mail ID Mobile No. RP CKYC number please affix your recent
passport size photo &
sign across it

ID Proof Name

ID Proof Number

Address Proof Name

Address Proof Number

KYC documents are not mandatory in case of existing HDFC Bank Customers (Customer ID is mandatory)

2. Related Person Type Director Promoter Karta Trustee Partner
 Beneficiary Owner Authorised Signatory Proprietor Other (Please Specify) _____

Name

DIN (Director Identification Number) (Mandatory if Related Person Type is Director)

Beneficiary Owner Share Holding Percentage (Mandatory if Related Person Type is Beneficiary Owner)

Date of Birth Pan number

Customer ID (Existing HDFC Bank customer)

Mother/Father /Spouse Name

Gender Male Female Other Nationality

Address

 PIN Code

State Country

E-mail ID Mobile No.

RP CKYC number

ID Proof Name

ID Proof Number

Address Proof Name

Address Proof Number

please affix your recent
 passport size photo &
 sign across it

KYC documents are not mandatory in case of existing HDFC Bank Customers (Customer ID is mandatory)

3. Related Person Type Director Promoter Karta Trustee Partner
 Beneficiary Owner Authorised Signatory Proprietor Other (Please Specify) _____

Name

DIN (Director Identification Number) (Mandatory if Related Person Type is Director)

Beneficiary Owner Share Holding Percentage (Mandatory if Related Person Type is Beneficiary Owner)

Date of Birth Pan number

Customer ID (Existing HDFC Bank customer)

Mother/Father /Spouse Name

Gender Male Female Other Nationality

Address

 PIN Code

State Country

E-mail ID Mobile No.

RP CKYC number

please affix your recent
 passport size photo &
 sign across it

ID Proof Name	
ID Proof Number	
Address Proof Name	
Address Proof Number	

In case there are additional Related Parties, Please use a copy of this form to add the details.

FATCA DETAILS

A) Is the entity or related person a tax resident of any country/ies outside India.

YES NO

B) Is the entity incorporated or organized in the United States

(Including a Trust, if the trustee is a U.S. citizen or resident)

YES NO

If answer for above two questions is 'Yes', please submit FATCA form along with the REKYC form

DECLARATION

I/We declare to the Bank as follows:

(a) at the date hereof (1): where the Borrower is an individual /proprietor(s)) none of the Directors of the Bank or their Relatives is his / her business partner or guarantor or relative; (2): where the Borrower is a partnership firm or limited liability partnership none of the Directors of the Bank or their Relatives is interested in the firm as partner, manager, employee or guarantor; (3): where the Borrower is a company or a corporation none of the Directors of the Bank or their Relatives, is interested in the company/ corporation or in its Subsidiary or holding Company as director, managing agent, manager, employee, major shareholder or guarantor or holder of Substantial Interest or is in control;

(b) at the date hereof (1): where the Borrower is an individual/(proprietor(s)) he / she is not a Director of Other Banks* or Relative of a Director of the Bank or of Director of Other Banks*; (2): where the Borrower is a partnership firm or limited liability partnership) none of the Directors of Other Banks* or Relative of a Director of Other Banks* is interested in the firm as partner or guarantor; and (3): where the Borrower is a company or a corporation, none of the Directors of Other Banks* or Relative of a Director of Other Banks* , is interested in the company / corporation or its subsidiary or holding company as director or guarantor or major shareholder or holder of Substantial Interest or is in control;

* The term Director of Other Banks includes directors of Scheduled Co-operative Banks, directors of subsidiaries/trustees of mutual funds/venture capital funds.

(c) at the date hereof: (1); where the Borrower is an individual/(proprietor(s)) the Borrower is not a Relative of any senior officer of the Bank; (2): where the Borrower is a partnership or limited liability partnership or HUF firm, none of its partners or none of the members of the HUF is a Relative of any senior officer of the Bank and none of the senior officers of the Bank or their Relatives is interested in the firm or HUF as partner or member or guarantor or holder of Substantial Interest; and (3): where the Borrower is a company or a corporation, none of its directors, is a Relative of any senior officer of the Bank and none of the senior officers of the Bank or their Relatives, is interested in the company/ corporation as director or guarantor or holder of Substantial Interest;

In case where the above negative confirmations are not true, then I/We shall provide a written declaration with details of such relationship to the Bank. If the details of such declaration change during the term of the relationship, then I/We shall promptly provide a written declaration to the Bank of any such change.

Bank reserves the right to cancel the card issued to the cardmember, in case, the above declaration is found to be untrue and demand payment of all outstanding on the Card Account immediately. The terms Director of the Bank, Director of Other Bank, senior officer, Relatives, substantial interest, major shareholder, control shall have the meaning as defined in Companies Act, 2013, Banking Regulation Act, 1949, Reserve Bank of India guidelines and/or any of its amendments/modifications, as applicable and as specified by Reserve Bank of India.

We declare that the above updated information is correct and the documents submitted is/are valid as of this date.

Signed for and on behalf of the above-named company (authorised signatory of company)

Place

Date

Sign and Stamp

Sign and Stamp

Sign and Stamp

BANK USE SECTION

Date: _____

Place: _____

SM Name _____

SM Designation: _____

LG code _____

LC Code _____

SM Signature

Please send the completed form with documents through Ordinary Post or through Courier to :

HDFC Bank Cards Division,
PO BOX # 8654,
Thiruvanmiyur PO, Chennai - 600 041.