



575 Fifth Avenue  
Suite 2600  
New York, NY 10017

ACCOUNT OPENING FORM (FOR EXISTING CUSTOMERS)

Business Name : \_\_\_\_\_

Address : \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Country \_\_\_\_\_ Postal Code / ZIP \_\_\_\_\_

Tax Identification No. : \_\_\_\_\_

Existing Relationship with New York Branch:

- Checking Account       Certificate of Deposit

Account Number: \_\_\_\_\_

Current Request

I would like to open the following additional accounts with the ICICI Bank Limited, New York Branch.

Checking Account

Certificate of Deposit

- \_\_\_\_\_ Days / Months
- Interest Payment frequency :  Cumulative on Maturity  Monthly  Quarterly  Semi-annually  Annually
- On maturity please credit the proceeds to my Account No \_\_\_\_\_ with \_\_\_\_\_ Bank having Routing Number \_\_\_\_\_
- Others \_\_\_\_\_ (please specify)
- Pre Mature closure required  Yes  No

Mode of funding      Amount: US\$ \_\_\_\_\_

Check of US\$ \_\_\_\_\_ attached herewith

Debit my account no. \_\_\_\_\_ with \_\_\_\_\_ ( Name of the Bank in United States) having Routing Number \_\_\_\_\_

Remittance from India/Other country

Debit existing ICICI Bank account: A/c number \_\_\_\_\_

Source of funds

- Business income
- Savings / Investments
- Sale of assets
- Others (please specify) \_\_\_\_\_

#### Disclosure Statement

To help the government fight the funding of terrorist and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person or business that opens an account.

**What this means to you:** When you open an account, we will ask for your name, address, date of birth, identification numbers like Social Security or ITIN and identification documents like driver's license, passport or any other document that will help us identify you.

If entity qualifies as non-resident alien, please attach appropriate W8 form.

If entity qualifies as resident alien, please attach W9 form.

#### Acknowledgement

1. We consent to:
  - a) the usual terms and conditions governing Checking Accounts/CD Accounts in the U.S. as well as the terms and conditions contained in the Customer Account Agreement, receipt of which is hereby acknowledged; and
  - b) advise you promptly of changes, if any, in the mode of operation of the account, and/or the names of authorized signatories for the account.
2. We understand that the Branch will not act upon our funds transfer instructions conveyed through a letter, unless I/we execute a Funds Transfer Agreement or attach a check to the instruction letter.
3. We understand that on no occasion will our account be permitted by the Branch to go into overdraft.
4. The information provided in this application is correct to the best of our knowledge and belief.
5. We authorize the Branch to obtain information about our ownership structure or identity, credit history and other banking history from one or more credit reporting/ rating agency, other banks or any other source. We understand that this information will be used in conjunction with the request to open or modify the terms of a deposit account being submitted by the Company for which we will be authorized signers. We further understand if information in the credit report results in decision to either disallow our signing authority on the account or disallow opening the account, the Branch will communicate these facts to us.

6. We understand that any savings, checking or other deposit account that we establish with the Branch is not covered by deposit insurance from the Federal Deposit Insurance Corporation ("FDIC").
7. We understand that we may be required to provide certain information to ensure that the Branch is able to meet its regulatory obligations under the USA PATRIOT ACT. Such information includes our name, address, taxpayer or other government identification number and copies of such organization documents and proof of good standing as the Branch may require in accordance with the requirements of 31 C.F.R. § 103.122(g).
8. For deposits which require Pre Mature closure option.
  - If the deposit sought to be broken is held for a period equivalent to a tenure for which deposits are offered by the Bank, the interest on early withdrawal of the that deposit would be the lower of the rate applicable to such tenure and the rate applicable for its original tenure (as existing at the time of value date of opening/renewal of the deposit sought to be broken), less 1%*
  - If the interest rate applicable to the deposit is less than 1%, no interest is payable on such deposit in the event of early withdrawal. However, the principal will be protected. In certain scenarios, the amount returned to the customer on premature withdrawal could be less than the principal to the extent of interest already paid out to the customer.*

Account Signatory 1\* \_\_\_\_\_ (Name \_\_\_\_\_)

Account Signatory 2\* \_\_\_\_\_ (Name \_\_\_\_\_)

Account Signatory 3\* \_\_\_\_\_ (Name \_\_\_\_\_)

Account Signatory 4 \* \_\_\_\_\_ (Name \_\_\_\_\_)

- Mandatory fields \* to be signed as per your existing delegations of powers provided to bank.