FOI	R BRANCH USE: Bra	anch Code:			OSBI		
Reco	eipt Date://	Action Taken on:	//	Signature			
	Request	for change of	Personal Deta	ils in NRE/NRO	account NRI-2.5		
Acco	unt No:	Account Holder	's Name:	Branch Name /	Code:		
1.	If new information for	field (s) wherever (*)	symbol is mentioned, p		ovided. ease fill Annexure compulsorily. hen please ignore the Annexure.		
	Change of Postal A	Address* (Please pro	vide relevant proof and	it should be attested as per A	ttestation Requirements [@])		
	Change address for (Address Type: Re			Permanent (Overse Business Regist	eas / Indian) Address ered Office Unspecified		
				own / District			
	State	Cou	ntry				
	Change of Mobile	Number*		for transa do it thro	change of mobile number & email address ctions done through internet banking, please ugh Internet Banking facility on your own. ange of mobile number, please		
	Change of Email A	Address		post/couri	er/submit in person the request letter to your home branch for approval.		
	Change of Telepho	one Number*			(In ISD – STD – Number format)		
	Change of Passpor	rt / VISA / Work I	Permit Details* (Plea	se enclose self-attested copy	of relevant pages [@])		
	Details to be changed	l for (Tick One):	Passport VI	SA / Work Permit			
	Number	Issue Date	Place of Issue	Nationality [#]	Valid Up to		
				([#] Not required, if VISA / Wo	ork Permit Details are to be changed)		
	Change of Record	led Signature					
	Old Signature ^ New Specime				Signature		
	^If you are <u>not able</u> to replicate your old signatures, then please submit copy of your Passport. Your new specimen signatures should be the same as on the Passport. Passport copy needs to be attested as per attestation requirement [®]						
	original copy of the proo	of for cross-verification.	In all other cases, proof	ch then no third party attesta should be duly attested by an ssy / High Commission 3.			
		ank to amend the in	formation provided		above and confirm that all		
	Date		Place	Signat	ure		
	Customer Acknowledgement Copy (To be returned to the customer, if submitting it in the person) A/c No:A/c Holder Name: Branch Seal & Stamp						
	o: of request: Change of p		ame:				
	of receipt://						

Signature of authorised official

lace of Bi	rth:	Country of Birth:		
		is married):		
adhaar N	Vo:	(Optional)		
Taxation	Details (Please fill following o	details, if you are tax payer in any of the cou	untry or multiple countries)	
S. No.	Country of residence for tax purpose	Tax Identification Number (TIN) number or functional equivalent	TIN issuing Country	
1				
2				
3				
a. Docub. Certiagend	ment mentioning Tax Identification ficate of residence or any validacy or a municipality, of the countries o	please give one of the following proofs for eation Number (TIN) or functional equivalent identification issued by an authorized Governmentry or territory of residence credit report, bankruptcy filing, or a report of t	ment body, including a Government	
Please pro	vide address, if S. No. 1 is filled as Current Address	<u></u>	Other Address:	
Please pro Same a	vide address, if S. No. 1 is filled as Current Address	Same as Permanent Address		
Please pro Same a	vide address, if S. No. 1 is filled as Current Address	<u></u>	Other Address:PIN	
Same a Same a City / Tow FATCA / Ci I. I hereby Taxes (C August 2 I. Underst residenti Central i Commor I. certify my know account a documer I. I underst well as documer I. I also ag would be of India time to ti I also ag abroad i I shall in I. I shall in I. I hereby immedia I. My perse I. My perse	vide address, if S. No. 1 is filled as Current Address Example 1	Country ation and Undertaking: er the rules applicable under section 285BA of the Income tax Adated 7 August 2015 and RBI Circular No. RBI/2015-16/165 Discions Income tax Act, Rules made thereunder and guidelines issuerein, the Bank may have to report the details in respect of my Government Agencies to comply with the obligations as per ner similar arrangements. The sa applicable to me and signed by me as well as in the docume ete and that I have not withheld any material information that ratable Account or otherwise. The within 30 days from the date of change, any changes that may be me or if any certification becomes incorrect and to provide fact known to me, now or in future, may invalidate me from the perations of my account or close it or report to any regulator and the reaction as may be deemed appropriate by State Bank of India,	PIN Act, 1961 as notified by Central Board of Direct BR.AML.BC.No.36/14.01.001/2015-16 dated 28 and by the RBI in the matter, depending upon the y account(s) as per the prescribed format to the the Inter-Governmental Agreements (IGA) and entary evidence provided by me is, to the best of may affect the assessment/categorization of my take place in the information provided above, as e fresh and valid self- certification along with ansacting in the account and State Bank of India d/or any authority designated by the Government under the guidelines issued by CBDT/RBI from on account of any change in law either in India or ding incorrect or incomplete information by me. undertake to inform you of any changes therein, am aware that I may be held liable for it.	