

Request for Updating new Mandate Details

(To be submitted in Branch only, alongwith the photocopies of all documents as documentary proof. The Mandate Holder should also carry documents in original for verification purposes.)

Date: _____

To,
The Branch Manager,
ICICI Bank Ltd.

_____ Branch.

Dear Manager,

Sub: Request for Updating new Mandate Details

Photo of
Mandate Holder
35x40 mm

I wish to cancel the existing mandate and appoint a new mandate in my account. Mentioned below are my details -

Name of Account Holder _____ Account Number _____

My Email Address _____ Contact Number/s _____ (*refer point 1 in notes)

Please cancel my existing Mandate, Mr/Mrs/Ms. _____

Address _____

_____ E mail address _____

I, (Mandate Holder to be deleted) Mr/Mrs/Ms _____, confirm that I have destroyed all unused

cheque leaves _____ (cheque numbers) and ATM/Debit card associated with this account. (*refer point 2 in notes.)

I wish to add (new mandate holder) Mr/Mrs/Ms _____ as my mandate holder.

Permanent address _____

_____ E mail address _____ Contact Number _____

Signature of Mandate Holder (to be deleted)

Signature of Mandate Holder (to be added)

Declaration by the account holder-

1) I/We hereby authorize the mandate holder-

a) to draw cheques on the account for local payments

b) to deposit the cheques eligible to be deposited in the NRE account on behalf of the the account holder(s) names under the same customer ID and renew such deposits.

c) to make NRE fixed deposits from balance available in the account in account holder(s) under the same customer ID and renew such deposits for such periods as may be given in writing by the mandate holder.

d) to operate the account to facilitate making investments in India, applicable wherein the the account holder(s) or a bank designated by the account holder(s) is eligible to make investments in India.

e) to use the ATM Card issued in respect of the mentioned account.

2) I/We authorize ICICI Bank Ltd. to issue an ICICI Bank ATM card and a cheque book to the mandate holder. I/We and the mandate holder acknowledge that the issue and usage of the card is governed by the terms and conditions as in force from time to time and agree to be bound by the same. I/We and the mandate holder acknowledge that it is my/our responsibility to obtain a copy of the terms and conditions and read the same. I/We and the mandate holder accept that the terms and conditions are liable to be amended by ICICI Bank Ltd. from time to time. I/We further unconditionally and irrevocably authorize ICICI Bank Ltd. to debit my/our account annually with an amount equivalent to the fee and charges for the use of the said ATM card if any.

3) I/We declare that as per Exchange Control guidelines issued by RBI

a) the mandate holder can exercise the authority conferred by this letter to withdraw for local payments only, and make investment in India where I/we hold general permission or have obtained specific permission from RBI.

b) the mandate facility permits the mandate holder to remit funds in foreign currency to the account holder(s).

4) I/We hereby undertake that I/we and our/my mandate holder shall comply with the provisions of the Exchange Control Guidelines issued by the RBI and the Foreign Exchange Management Act, 1999 and all regulations thereof, including the Foreign Exchange Management (Deposit) Regulations, 2000. I/We hereby undertake that I/we made known to the mandate holder the specific uses of the ATM Card as per the said regulations and guidelines. I/We hereby undertake to indemnify ICICI Bank against any loss, damage, claim, action, proceedings, cost, charges and expenses that may be suffered or incurred by ICICI Bank on account of any activity undertaken by the mandate holder by the use of the ATM Card.

5) The specimen signature of the mandate holder who has been authorized to operate upon the account is given below. The signature has been duly attested and verified by me/us.

Yours truly,

Signature of Primary Holder

Signature of Second Holder

Signature of Third Holder

Notes:-

1. In the absence of e mail address /contact number in our records, please note we will update the same as mentioned above.
2. You are required to immediately destroyed all unused cheque leaves and the ATM/Debit card associated to this account to avoid misuse of the same.
3. Signatures of all the account holders are mandatory for mandate addition.
4. Once the mandate is registered, a cheque book and an ATM card will be sent to the mandate holder at his / her communication address.
5. An email alert would be sent at your registered email id confirming the status of your request.
6. Refer to 'Important Things to know' for list of valid address /identity proofs.
7. In case you are submitting address proof in the name of Blood Relative, please fill the declaration below.

Request for Submitting Address Proofs in the name of Blood Relatives

Date: _____

To,
ICICI Bank Ltd.
NRI Services Center (CPCNRI)
2nd Floor, Trade World, "B" Wing Kamala Mills Compound
Lower Parel, Mumbai 400013

Dear Manager,

Sub: Request for submitting Address Proofs in the name of Blood Relatives

Name of Mandate Holder _____

My Email Address _____ Contact Number/s _____ ***(refer point 1 in notes)**

I, wish to declare that the address proof document for my current/permanent address is in the name of my

blood relative Spouse/Father/Mother/Son/Daughter/Brother/Sister., Mr/Mrs/Ms _____
***(Any Other Relative address proof not accepted)**

I enclose any one of the following proof of relationship ***(refer point 3 of notes)**

☐ Passport ☐ Birth certificate ☐ Marriage certificate ☐ Ration card ☐ Matriculation certificate

☐ Court affidavit ☐ School leaving certificate ☐ Driving License ☐ Life Insurance Policy ☐ PAN Card

I, _____ **(Mandate Holder)**, affirm that: My current/permanent address is

as _____

The information given above is correct and I have not concealed anything. I am aware it is illegal and a criminal offense to deliberately furnish false information or to suppress information. I undertake to be entirely responsible for any loss/expenses incurred by the Bank because of relying on my declaration.

Signature of Mandate Holder: _____

Declaration by the Blood Relative: I, Mr/Mrs/ Ms _____ (address proof holder), affirm that I have no objection to allow the mandate holder to use my address for bank communication.

The mandate holder resides with me at my residential address for which I have provided a valid proof as the bank requires. The information given above is correct and I have not concealed anything. I am aware it is illegal and a criminal offense to deliberately furnish false information or to suppress information.

Signature of Blood Relative: _____

Notes:-

1. In the absence of e mail address /contact number in our records, please note we will update the same as mentioned above.
2. This form needs to be accompanied each time an Address proof is submitted in the name of a Blood relative.
3. Please note that you may provide more than one document to establish the relationship.
4. An email alert would be sent at your registered email id confirming the status of your request.