



Bank of Baroda

NRE
A/C No

For Branch Use

**NRE/FCNR ACCOUNT OPENING FORM
(FOR NON-RESIDENT INDIANS)**

The Branch Manager
Bank of Baroda

_____ Branch

Date : _____

NAME & ADDRESSES :

Please open an account as per details below : (in block letters)

1. First Applicant _____

2. Second Applicant _____

3. Third Applicant _____

Overseas Address _____ Indian Address _____

(if available) _____

Pin _____
Phone No _____

Pin _____
Phone No _____

Please Tick in the Box (✓) for address to which mail to be sent

Date of Birth (in case of minor) _____

PASSPORT DETAILS :

	Passport No.	Date & Place of Issue	Nationality	Present Occupation
First Applicant				
Second Applicant				
Third Applicant				

TYPE OF ACCOUNT TO BE OPENED :

TYPES OF ACCOUNTS	Amount (Specify Currency)	Period
1. Foreign Currency (Non-Resident) Term Deposit A/c		
2. F.C.N.R.(Bank Scheme) Deposit A/c		
3. Non-Resident (External) Rupee Term Deposit A/c		
4. Non-Resident (External) Reinvestment Plan Deposit A/c		
5. N.R.E. Recurring Deposit/Cash Certificate etc.		
6. Non-Resident (External) Savings Bank A/c		
7. Non-Resident (External) Current A/c		
8. Non-Resident Non-Repatriable Rupee Deposit A/c		

MODE OF OPERATION :

1. Single 2. Either or Survivor of us 3. Former or Survivor of us
 4. Latter or Survivor of us 5. Both or Survivor of us 6. _____
 (Please specify)

DETAILS OF REMITTANCE :

1. Demand Draft No. _____ dt. _____ amount _____ (enclosed)
 2. Mail Transfer/Telegraphic Transfer No. _____ dt _____ amount _____
 3. Name and Address of the Remitting Bank _____

INSTRUCTIONS REGARDING INTEREST PAYMENT etc :

1. Please keep Term Deposit in Safe Custody and renew for similar period on maturity
 2. Please remit Interest by Draft
 3. Credit Interest to my NRE SB/CA No _____ with you
 4. _____

(Please specify other instructions)

DECLARATIONS :

I/We hereby declare that I am/We are non-resident Indian(s)/ of Indian Origin. I/We understand that the above account will be opened on the basis of the statements/declaration made by me/us. I/We also agree that if any of the statements/declarations made herein is found to be not correct in material particulars, you are not bound to pay interest on the deposit made by me/us.

I/We agree that no claim will be made by me/us for any interest on the deposits for any period after the date's of maturity of the deposit/s. I/We agree to abide by the provision of Foreign Currency (Non-Resident) Account/Non-Resident (External) Account Scheme. I/We hereby undertake to intimate you about my/us return to India for Permanent residence immediately on arrival.

I/We agree that if the permanent withdrawal is permitted at my/your request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by Reserve Bank of India.

I/We authorise the bank to automatically renew the deposit on the due date for identical period unless the instruction to the contrary from me/us is/are received by the bank before maturity. I/We understand that the renewal will be accordance with the provisions of the Reserve Bank of India scheme in force at the time of renewal.

I/We further understand that the interest applicable on renewals will be at the applicable ruling rates on the date of maturity and that the renewal will be noted on the deposit receipt on my/our presenting the same on the maturity date or later for renewal/payment.

★ _____
Signature of 1st applicant

★ _____
Signature of 2nd applicant

★ _____
Signature of 3rd applicant

SPECIMEN SIGNATURES :

Name (please indicate Mr./Mrs./Miss)

Specimen Signature

For verification by Branch Officials

1. _____
2. _____
3. _____

★ _____
★ _____
★ _____

VERIFICATION OF SIGNATURES :

- Authentication of signatures to be made by a Bank / Indian Embassy / High Commission / Consultant / Notary Public / Person known to the Bank.
- Verification is not necessary if you have an account with this branch _____ (give Account No.).

Above Signatures verified

Name / Signature of Person verifying with rubber stamp (where applicable)

Place : _____ Date : _____

NOMINATION FORM DA1

Nomination under Sec. 45ZA of the Banking Regulation Act 1949 and Rule 2 (1) of the Banking Companies (Nominations) Rules 1985 in respect of Bank deposits.

I/We _____
Name(s) & address (es)

nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the account, particulars whereof are given below, my be returned. (Name of branch where account is held Bank of Baroda, _____)

DEPOSIT

Nature of Deposit	Distinguishing Number	Additional details, if any

NOMINEE

Name & Address	Relationship with Depositors, if any	Age	If nominee is a minor his date of birth

@ As the nominee is a minor on this date, I/We appoint _____ to
(Name, Address & Age)

receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

★ _____ ★ _____
Name and Signature of witness & Address

Signature(s) of depositor(s)

Place _____

@ (where deposit is made in the name of minor, the nomination should be signed by person lawfully entitled to act on behalf of the minor)

Date _____

@ Strike out if nominee is not a minor**FOR BRANCH ONLY**

Particulars of Form DA1 (if received) entered in Nomination Register Sr. No. _____ Dt. _____

Customer advised on _____ Acknowledgement received on _____

Open _____ Account _____ Opened _____ Date _____ 20 _____ No of Cheque Book / TDR issued.

From _____ To _____

BRANCH MANAGER**LEDGER KEEPER****OFFICER**