

NDB WEALTH WILL FILL THESE IN

RM/Agent Name:

RM/Agent Code:

1 HOW CAN WE SERVE YOU?

* Please Fill in Form 1A ** Please Fill in Form 1B And Form 4 (List of Authorized Signatories)

Select Service

☐ My Wealth

☐ Private Wealth

☐ Asset Management

Select Type of Account

☐ Individual Account*

☐ Minor Account*

☐ Institutional Account**

☐ Joint Account*

(Operating Instructions)

☐ Any One

☐ Jointly

2 CREATE YOUR ACCOUNT

(Please fill by existing account holders who have CIN)

Primary Account Holder

Account Holder Name

Customer Identification No. (CIN)

Joint Account Holder

Account Holder Name

Customer Identification No. (CIN)

Your Account Label/
Nickname

Please select a name which you
can easily remember

3 CUSTODIAL SERVICES

(For Asset Management and Private Wealth Management clients only)

Do you wish to obtain
custodial services for
your NDB Wealth Account?

☐ YES, If yes

Custodian Bank Name

☐ NO

4 DO YOU PLAN ON REGULAR SAVINGS OR REGULAR WITHDRAWALS?

Choose Your Preferred Plan

I Wish to Make

☐ Regular Savings

☐ Regular Withdrawals

If you select any of the above please complete Form 3A (Regular Savings) and / or Form 3B (Regular Withdrawals)
DO YOU WISH TO NOMINATE - if yes please fill form 6

5 PLEASE SPECIFY WHICH BANK ACCOUNT YOU PREFER YOUR WITHDRAWALS TO BE CREDITED TO

Transfer all
Withdrawals to

☐ Bank Account of Primary Account Holder

☐ Bank Account of Secondary Account Holder

☐ Bank Account Below

Name of the Bank

Name of the Bank Branch

Bank Account No

Bank Account Name

SWIFT Code

Country of Bank

6 HOW CAN WE REACH YOU?

How do you wish to receive
your account statement/
transaction information?

☐ E-mail or ☐ Post

☐ Online - Do you need online access to your account ?

☐ YES

☐ NO

Alerts and Notifications

Do you wish to receive SMS and E-mail alerts and notifications?

☐ YES

☐ NO

7

NON-RESIDENTS ONLY

Instructions for deposit and repatriation of funds

☐ Securities Investment Account (SIA)

☐ Non-Resident Direct*

* For non-resident customers who wish to invest and repatriate money directly through the Managers Collection Account/ Fund Operation Account

8

PLEASE LET US KNOW IF THERE ARE ANY VALUE ADDED SERVICES YOU REQUIRE

Product	Institution	Account No.	Account Name	Remarks
1				
2				
3				
4				
5				
6				

9

ACCOUNT HOLDER DECLARATION

(Please read through and sign below)

It is important that you read and understand the General Terms & Conditions governing NDB Wealth Accounts. If you do not understand any of them, please feel free to contact us and we will be happy to assist you. By signing the Account Opening Application Form 1A/1B and Form 2 and/or using your NDB Wealth Account or any of its affiliated services you have agreed to be bound by the General Terms & Conditions governing the NDB Wealth Accounts.

I/We hereby confirm that a copy of the General Terms & Conditions was provided to me/us and I/we have read and understood the contents of the General Terms and Conditions to the Account, Offer Document, Information Memorandum of the Products, and the operational guidelines of the Account and agree to abide by the General Terms and Conditions, Rules and Regulations applicable to the NDB Wealth Products and Services.

☐

I/We here by further acknowledge that the said general terms and conditions together with the application constitute my/our contract with NDB Wealth Management Limited.

Primary Account holder or Authorised Signatory		Joint Account holder or Authorised Signatory	
Application Date	D D M M Y Y Y Y	Application Date	D D M M Y Y Y Y

FOR OFFICIAL USE ONLY

NDB Wealth Account No

Custodian Bank

Custodian Bank Account Number + Custodian Bank Account Name (if Application)

NOTES