



**APPLICATION FOR OPENING INDIVIDUAL ACCOUNT  
(Current/Savings/Term Deposit)**

The Branch Manager

Branch: AUCKLAND

Dear Sir/Madam,  
I/We request you to open an account in my/our name(s)  
styled as (Tick type of A/c)

Current	<input type="checkbox"/>	Savings	<input type="checkbox"/>
Term Deposit	<input type="checkbox"/>		
Period of Term Deposit :		Months	
Currency-SB/Term Deposit	1. NZD	2. USD	

**For Office Use**

Customer ID: \_\_\_\_\_

Account No: \_\_\_\_\_

I have verified the documents submitted and confirm that  
KYC norms are fully complied with.

Date of all formalities  
Completed: \_\_\_\_\_

Officer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PERSONAL DETAILS IN BLOCK LETTERS**

	FIRST APPLICANT	SECOND APPLICANT
TITLE (Mr/Mrs/Ms )		
FIRST NAME		
MIDDLE NAME		
SURNAME /FAMILY NAME		
DATE OF BIRTH		
PLACE OF BIRTH		
PASSPORT No		
DATE OF ISSUE		
PLACE OF ISSUE		
EXPIRY DATE		
DRIVING LICENSE No.		
EXPIRY DATE		
IRD No.		
WITHHOLDING TAX RATE ON INTEREST EARNED ON THIS A/C	A 12.5% B 21% C 33% D 38%	A 12.5% B 21% C 33% D 38%
ARE YOU A NEW ZEALAND RESIDENT		
IF NO, COUNTRY OF RESIDENCE		
EMPLOYMENT STATUS		
NAME OF EMPLOYER		



	FIRST APPLICANT	SECOND APPLICANT
IF SELF EMPLOYED –NAME OF THE BUSSINESS		
ANNUAL INCOME (BEFORE TAX)		
PERMANENT ADDRESS:		
HOUSE/BLDG. No		
STREET/ROAD		
CITY/AREA		
COUNTRY		
POST CODE		
TELEPHONE	LANDLINE	
	MOBILE	
E MAIL ADDRESS		
CORRESPONDENCE ADDRESS:		
HOUSE/BLDG. No		
STREET/ROAD		
CITY/AREA		
COUNTRY		
POST CODE		
TELEPHONE	LANDLINE	
	MOBILE	
E MAIL ADDRESS		
RELATIONSHIP WITH THE JOINT APPLICANT		
OPERATING INSTRUCTIONS	1. SELF 2. EITHER OR SURVIVOR 3. JOINTLY 4. OTHER	1. SELF 2. EITHER OR SURVIVOR 3. JOINTLY 4. OTHER
IN CASE APPLICANT IS MINOR:		
NAME OF GUARDIAN		
RELATIONSHIP WITH MINOR		
FACILITIES REQUIRED :		
1 CHEQUE BOOK	1. YES 2. NO	1. YES 2. NO
2 STATEMENT OF ACCOUNT	1. YES 2. NO	1. YES 2. NO
*POST /E-MAIL	MONTHLY /QUARTERLY	MONTHLY /QUARTERLY
3 INTERNET BANKING #	1. YES 2. NO	1. YES 2. NO
4 DEBITCARD CUM ATM CARD#	1. YES 2. NO	1. YES 2. NO
*NAME TO APPEAR ON DEBIT CUM ATM CARD		

#Please fill up separate application for internet banking –Baroda connect

## KYC DOCUMENT TO BE SUBMITTED BY APPLICANT

(Any one document from each of the following two lists subject to bank's satisfaction)

LIST-I (Latest/recent photo Identification documents)	LIST-II (Latest/recent documents showing address proof)
<ol style="list-style-type: none"> <li>1. Passport (Must for NRI).</li> <li>2. NZ Driving License with photograph.</li> <li>3. NZ Student Photo ID</li> <li>4. NZ Bank Credit card with Photo</li> <li>5. Government ID Card.</li> <li>6. Letter from recognized public authority or public servant verifying the identity (photo) of customer.</li> <li>7. Confirmation Letter from employer/other bank verifying therein photograph of the customer along with other things.</li> <li>8. Any other document with photograph evidencing identity of the applicant/s acceptable to the Bank.</li> <li>9. Hospitality association of NZ 18+Card and community services card.</li> </ol>	<ol style="list-style-type: none"> <li>1. Passport</li> <li>2. Driving License with address, Voter's ID Card.</li> <li>3. Telephone Bill, Electricity Bill.</li> <li>4. Bank Account statement (with address)</li> <li>5. Income Tax assessment order (with address)</li> <li>6. Letter from employer/Any document of communication issued by any local authority or government body showing residential address.</li> <li>7. Any documentary evidence in support of residential address acceptable to the bank.</li> <li>8. In case of married women proof of address of husband together with certified copy of marriage certificate is acceptable.</li> </ol>

### TERMS & CONDITIONS & DECLARATION (Please mark in appropriate boxes):

I/We have read, understood and agree to abide by the Bank's rules relating to the conduct of the above account/services/products/Fee & charges which are displayed on the website [www.barodanzld.co.nz](http://www.barodanzld.co.nz) / contained in the brochures of the Bank from time to time.

- I/We wish to be informed about various features/products and promotional offers made by the bank from time to time.  
 Please do not call/contact me/us for various features/products and promotional offers made by the bank from time to time.

- Account will be operated and balance along with interest payable as per operational instructions given above.
- I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority.
- I will indemnify the bank against the claim of the above minor of any withdrawals/transactions made by me in his/her account.
- I/We understand that in the event of death of the depositor(s), premature termination of term deposit would be allowed without any penal charges to the claimant(s) after following the due procedure.
- I/We also agree to maintain the minimum/quarterly average balance which the Bank may prescribe as the minimum/quarterly average balance to be maintained to avail facilities and agree to pay charges if the minimum/quarterly average balance is not maintained and any other charges stipulated by the bank. I/We understand that any change in this respect will be notified by the bank on its website [www.barodanzld.co.nz](http://www.barodanzld.co.nz) and also will be displayed on the notice board of the branches one month in advance.
- I/We shall fill up separate pay-in-slips prescribed by the bank for various time deposit schemes. I/We understand that the Term deposit shall be under auto renewal scheme of the Bank unless otherwise specified by me/us.
- I/We authorise Bank of Baroda (New Zealand) Ltd/its group Companies or its/their agents to make references and enquiries as may be deemed necessary in their discretion with regard to the information furnished in this application. Bank of Baroda (New Zealand) Ltd and its Group entities/Companies are empowered to exchange, share or part with all the information, data or documents relating to my/our application inter se among themselves or to other Banks/Financial Institutions/Credit Bureaus/Agencies/Statutory Bodies/such other entities/persons as may be deemed necessary or appropriate or as may be required for processing of such information/data by such person/s or for furnishing of the processed information/data/products thereof to other Banks/Financial Institutions/Credit Bureaus/Agencies/users registered with such agencies. I/We further agree that such disclosures do not constitute a breach of privacy principles specified in the privacy Act 1993.
- I/We also authorise you to use this base account opening form for the purpose of opening any other ancillary account(s) with your bank.
- I/We declare that I/We am/are the beneficiary/owner of the funds that are being and/or will be deposited from time to time /in my/our account and these funds in all or any part of it are in no way linked in any manner whatsoever with terrorist financing or are proceeds of any illegal activities/criminal conduct and do not constitute tainted property (as that term is defined under the Criminal Proceeds (Recovery) Act 2009) or a money laundering offence under the Anti-Money Laundering and Counter Terrorism Act 2009.
- I/We am/are aware of my/our obligation and undertake to inform the Bank promptly of any change in my/our circumstances and provide the missing or updated information as appropriate relating to this account.
- The information in this application forms the basis of the agreement between me/us and Bank of Baroda (New Zealand) Ltd.
- I/We certify that the information on this application is true and correct.
- I/We certify that I/We am/are not (an) undischarged bankrupt(s) and am/are not liable under any proceedings under the Insolvency Act 2006 and its amendments.

#### For Term Deposit:

- I/We certify that I/We have been provided with a copy of Bank of Baroda (New Zealand) Limited's current Investment Statement for Term Deposits, that I have read and understood the same, and that I/We make this application with full knowledge of my / our risks and obligations.

#### For Debit cum ATM Card to be issued in the operative deposit account:

- I/We have read and understood the terms & conditions governing the usage of the Debit card. I/We accept to be bound by the said terms & conditions and to any changes made therein from time to time by the Bank at its sole discretion. I/We authorise Bank of Baroda (New Zealand) Ltd to issue a Debit cum ATM Card to the person/s as name mentioned in the application of account opening form. I confirm that I am sole account holder or have the required mandate to operate the account singly linked to the Debit Card. I/We further unconditionally and irrevocably authorise you to debit my/our account annually for Debit Card fees/charges if any stipulated by the bank.
- I/We accept full responsibility for my/our Debit Card & agree not to make any claims against Bank of Baroda (New Zealand) Ltd in respect thereto.



**Full Signature:**

\_\_\_\_\_ (Sole/1<sup>st</sup> Applicant)

\_\_\_\_\_ (2<sup>nd</sup> Applicant)

\_\_\_\_\_ (3<sup>rd</sup> Applicant)

Branch	
Title of the Account	
Account No	
Operating Instructions	

Name	Specimen Signature	Photograph
Customer ID		
Customer ID		
Customer ID		
Customer ID		

Name: \_\_\_\_\_  
Bank official in whose presence signed

Signature: \_\_\_\_\_ (S.S. No : \_\_\_\_\_)



**Bank of Baroda (New Zealand) Ltd.**

**APPLICATION FORM FOR INTERNET /MOBILE BANKING  
(FOR INDIVIDUALS)**

I/We request you to register my/our application for internet banking facility & link my/our account with your branch/other branch/es with the following rights (Choose one).

Transaction Rights

ITRACK Application No .....  
(To be filled by Branch)

View Only

(If you are not aware of your Customer ID, please enquire from your base branch)

CUSTOMER ID:

ACCOUNT NO:

NAME OF ACCOUNT HOLDER:

DATE OF BIRTH:

MARITAL STATUS:

MARRIAGE ANNI. DATE:

DETAILS OF EXISTING ACCOUNTS TO BE LINKED FOR INTERNET BANKING (if space insufficient attach additional sheet)

Branch Name	Name of Jt. A/C Holder	Account No.	Mode of operation

I/We wish to avail Mobile Banking Facility   
(Whenever offered by Bank of Baroda)

Mobile Numbers for Mobile Banking	1.	2.
	3.	4.

**Declaration:**

I/We affirm, confirm and undertake that I/We have read and understood the Terms & Conditions for usage of the Bank of Baroda e-banking retail services and agree to them. I/We am/are aware that usage of Bank of Baroda e-Banking is governed by the terms and conditions which are displayed on

<https://www.bobibanking.com> the site maintained by Bank of Baroda and I/We have reviewed the contents of the same. I/We accept terms and conditions governing internet banking of Bank of Baroda applicable for bank accounts as displayed on bank's website. I/We accept and agree that I/We are aware of the contents of the terms and conditions and that all my/our rights and liabilities would be governed by said terms and conditions by my/our act of accessing on [www.bobibanking.com](https://www.bobibanking.com). I/We there by agree to be subject to and confirm with all the provisions of the terms and conditions which are incorporated by reference herein and deemed to be part of this application form the same extent as if such provisions had been set forth in full herein.

I/We do hereby indemnify and forever keep indemnified the Bank and its successors, assigns, from and against any and all claims, act, penalties that may be made, suffered or incurred by the Bank by reason of non compliance of any of the terms and conditions mentioned therein or any non compliance with any New Zealand statutes, including but not limited to sections 248 to 254 of the Crimes Act 1961.

Date : \_\_\_\_\_ (in dd/mm/yyyy format) Place: \_\_\_\_\_

Signature: \_\_\_\_\_

N.B.: Baroda e-Banking Retail services are provided only in those accounts where the mode of operation is one of the following- 1) Self, 2) Either or Survivor, 3) Anyone or Survivor/Survivors. Each signatory to an account requiring access to Baroda e-banking retail services must have a separate User ID and PIN and therefore a separate form must be used for applying for these services by each signatory to an access. For expeditious registration please ensure that all information given in the form is complete & correct.

### For Office Use

#### Branch Confirmation

We confirm that

1. The customer details given above are correct and the same are recorded in CBS also;
2. We have verified the signatures of the customer as appended above;
3. All the accounts of the above customer have been linked to one CustomerID as given above.
4. We have enabled the above Customer ID for ebanking in Finacle-FVTM/CFTM; and
5. We recommend granting ebanking facility to the above customer.

Signature of Branch Manager:

Name of Branch Manager:

Signature Number:

Branch Alpha:

SOLID:

#### For Baroda Connect Operations Team

User ID created on:

Signature:

Name:

User ID dispatched on:

Password dispatched on:

Signature:

Name: