

SERVICE REQUEST FORM

Name		
Account No.	: Account Type : Current Acc	count Savings Account
Branch	: Date:	D D M M Y Y Y Y
A UPDAT	TE OF PERSONAL DETAILS (Please fill only required changes; Strike off the	section if not required)
E-mail address		
Mobile No.^	: (Update of Mobile Number requires the previous month's mobile as supporting proof or a signed declaration available in Anne	
PAN*		
Date of Birth*	: D D M M Y Y Y Y	
Passport*	:	
Residence Ad	dress ^{*#} :	
Line 1		
Line 2		
Landmark		
City	State	PIN
Landline No.	STD	
Office Addres	s*# :	
Line 1		
Line 2		
Landmark		
City	State	PIN
Landline No. (If any)	STD	
Permanent Ad	ddress ^{*#} :	
Line 1		
Line 2		
Landmark		
City	State	PIN
Landline No.		
	sto ss (applicable only to primary holder) : Residence Office Address	
I am submittir mailing addres	ng an address proof for my permanent residential address as i do not have an address proof in my name due to	of for the above mentioned

*Please carry original documents along with a self attested photo-copy as proof for verification by a Citibank representative.

*Officially valid address proofs - valid passport with address page / Aadhaar card / Voter ID card / Job card issued by NREGA duly signed by an officer of the State government.

Kindly note that updating an overseas contact number in a domestic account is not permitted. In case an overseas contact number is updated in a domestic account, we will be unable to service on the updated number.

Please note some of these services may be charged. Please refer to the latest schedule of charges applicable to your account on www.citibank.com/india.									
Cheque book : 10 Leaves 25 Leaves 50 Leaves									
Address for dispatch : Mailing Non - Mailing									
Debit Card PIN request : ATM PIN Telephone PIN Reason for Reissue	_								
Debit Card Number :									
Monthly E-Statement (SOE) Registration (Physical statements will be discontinued automatically. Please ensure E-mail ID of primary holder is updated)									
Issuance of Balance Confirmation Certificates as on : DDMMYYYYY									
Issuance of duplicate TDS Certificate for Financial Year: Y Y Y Y — Y Y Quarter Q Q1 (Apr-Jun), Q2 (Jul-Sep), Q3 (Oct-Dec), Q4(Jan-Mar)									
Issuance of Savings Account Interest Certificate for Financial Year:									
Duplicate Statement / Passbook: DDMMYYYYY to DDMMYYYYY									
Please link my Citi Credit Card to the account mentioned above.									
Bankers Verification Signature Photo Address Purpose									
Cancellation/ Demand draft / Banker's Cheque Drawn on DD/BC No									
(Please enclose original demand draft/banker's cheque) Dated Amount Favouring									
Confidential Report Paid Cheque Report Credit Confirmation for the period Purpose									
C ACCOUNT TRANSACTION RELATED									
I/We understand, agree and acknowledge that Citibank's schedule of charges, as amended from time to time as applicable tor service request	ts.								
☐ Erroneous credit / debit in account:									
Cheque No Date Amount									
Drawn on									
☐ Details of Debit / Credit:									
Date of Txn Amount									
Payee details required :									
Cheque No Date Amount									
Returned cheque not received:									
Cheque No Date Amount									
Deposited at									
Drawn on									
Any Other Request									
DECLARATION (MANDATORY)									
I/We hereby declare that all details provided in this form are true and correct and supported by valid documents enclosed with this form. I/We are									
and agree that this declaration shall be in addition to any other declaration provided by me/us with respect to the facility provided by Citiban									
agree to indemnify and keep Citibank indemnified from any loss, damage, claim, action, costs, charges and expenses which Citibank may suf	fer or								
incur as a result of any defect/misrepresentation made by me/us in the above declaration.									
I/We understand and agree that the mailing address can be changed only by the primary account holder of this account and the same shall									
apply for all linked accounts where he/she is the primary account holder.									
I/We also understand that address change requests are processed at an account holder level. Accordingly, my new address shall be updated across all linked accounts held with the bank where I am an account holder.									
I/We understand, agree and acknowledge that Citibank's schedule of charges, as amended from time to time, is applicable for service requests.									
Signature (1 st Account Holder) Signature (2 nd Account Holder) Signature (3 rd Account Holder	-)								

(Tick and fill only those that are necessary; Strike off the section if not required)

SERVICE REQUESTS

Note - To be signed by the holder making the request. However, address change request must be signed by the primary account holder. Other account holder signatures are required only if the signature rule is 'Joint'.

VER 1.4/BAN/IBA/SRF/WPC/01-23

ANNEXURE I: MOBILE NUMBER DECLARATION

I confirm that the said mobile number is held by me and is not in use by any other third party (including family members and close relatives) and if I change my mobile number, I undertake that I will duly and promptly inform the Bank and execute any document/process as required by Bank to change my mobile number on Bank's records. I understand that all transaction alerts, bank-initiated SMS communications and OTP will be sent on the mobile number submitted by me. I/We shall not, under any circumstances hold Citibank liable for any frauds, losses, damages or difficulties, whatsoever, I/we may be subjected to in case my mobile number as updated on Bank's records is incorrect or used by a third party.

Signature (1 st Account Holder)		Signature (2 nd A	ccount Holder)	Signature (3 rd Account Holder)
		(To be signed by the hold	der making the request)	
FOR BANK USE ONLY				
Instruction received by	:	☐ Mail/Representative	☐ In Person	
Complete set of originals receive	ed :	☐ Yes ☐ No		
IDs sighted (details)	:	ID Type:	ID Number:	
Customer met in person by	:	(1) Name:	Signature:	Emp. ID:
		(2) Name:	Signature:	Emp. ID:
Signature verified by	:	Name:	Signature:	Emp. ID:
Callback details (if applicable)	;	Customer spoken with:		
		Date & Time :		
		Acknowledgme		
We acknowledge the receipt of	Custom	ner Request / Complaint instru	uction from Mr /Mrs. / Ms.	
relating to account number			under service requ	est number
Date:			Bank Official (Sign & stamp)	
			E/	or Citihank N. A

Citibank India does not market any product or service to individuals resident in the European Union, European Economic Area, Switzerland, Guernsey, Jersey, Monaco, San Marino, Vatican, UK and The Isle of Man.

This form is not, and should not be construed as, an offer, invitation or solicitation to buy or sell any of the products and services mentioned herein to individuals resident in the European Union, European Economic Area, Switzerland, Guernsey, Jersey, Monaco, San Marino, Vatican, UK and The Isle of Man