

# **Relationship & Account Opening Form (Main & Joint Applicants)**

1. Please ensure that all fields are filled and no field is left blank (please strike off or mark N/A if not applicable). Any overwriting/change in the form must be authenticated by the main applicant's signature beside it; else the form will be rejected.

2. For	, please tick (	/) where	appropriate.	Do not use (	x) or an	v other mark
2.101	, picase der (	v) which c	appropriate.	Do not use (	<i>x</i> , or an	y ounce mank

Relationship and	d Account Details							
Customer type:								
New Existing Customer ID:								
Relationship type:								
Customer ID and Account (please select account type)	Customer ID only							
Account type:								
Savings (BHD only)*	only)* Call Account (select currency)							
Currency:								
BHD USD GBP A	ED Others							
Purpose of opening the account:								
Savings Loan Against Deposit R	emittance Others							
Mode of operation:								
Singly Any one to sign	Others							
* Available only for Bahrain residents/ non-resident of Bahrain, travelling to Bahrain for per	rsonal of business purposes							
Main applicant's p	personal information							
Salutation: Mr. Mrs. N	laster Miss							
Full Name: F	IRST NAME							
(as in Passport and	DDLE NAME							
aliases)								
	AST NAME							
CPR/ National ID Number :	Nationality :							
CPR/ ID expiry date : D D / M M / Y Y Y Y	Passport Number :							
Country of residence :	— Place of issue :							
If you are living in country other than country of your Nationality	— Place of birth :							
(please provide VISA details)								
Visa issue date         :         D         D         /         M         /         Y         Y         Y         Y	— Date of issue : D D / M M / Y Y Y Y							
Visa expiry date : D D / M M / Y Y Y Y	— Date of expiry : D D / M M / Y Y Y Y							
Mobile* : +	Male Female							
Landline : +	Single Married							
Fax : + -	Date of birth : D D / M M / Y Y Y Y							
* Transaction alerts/ SMS/ OTP shall be sent on the Mobile number of Main/ First Applicant	Mother's maiden name :							
E-mail : (Mandatory)								
Current residential address (please mention geographical address only, PO Box is not accepted)								
Current residential daaress (please mention geographical daares	ss only, PO Box is not accepted)							
City:	Country:							
	·							
To be used as my communication address								



Γ

# Bahrain

<b>Permanent address</b> (please mention geographical address only, PO Bo	x is not accepted) Same as current residential address
City: To be used as my communication address	Country:
City: To be used as my mailing/ communication address (please p Number of years in present business/ with employer:	Country:
Occupation:         Employed       Self-employed         Others (please specify)	Employer/ Company/ Business details         Proprietorship       Partnership         Private Ltd. Company       Public Company         Government/ Ministry       Trust/ Society         Charitable organisation       Others (please specify)
Personal monthly gross salary or income or profit from business/ profession         USD / USD Equivalent         Expected total value/ volume of annual credits in account         USD / USD Equivalent         USD / USD Equivalent	Cash intensive business (Restaurant/Convenience store)         Agent/Broker Jewelry dealer       Real estate         Money changer/remitter       Building & Construction         Manufacturing       Commerce         Financial Institution       Consultancy         Services (other than financial)       Others (please specify)
Estimated Net Worth, including inheritance USD / USD Equivalent	Product and services offered/ dealt in:
Major source of income/ wealth/ funding the account:         Income from business       Salary         Gift received       Rental         Retirement/ Pension Benefits       Inheritance         Investments (non-business)       Others (please specify)	Permanent account number (PAN) declaration:         Whether Permanent account number (PAN) issued by Indian taxation authorities in my name / name of the entity or in the name of any branch or any other office located in India         Yes         If Yes, PAN number:



Joint Applica	ant 1's personal information
Relationship with the Main Applicant:	
Spouse Son Daughter	Friend Relative (specify)
Galutation: Mr. Mrs.	Master Miss
	FIRST NAME
as in Passport and	MIDDLE NAME
please include any aliases)	
CPR/ National ID Number :	Nationality :
CPR/ ID expiry date         :         D         D         /         M         /         Y         Y	Y Y Passport Number :
Country of residence :	— Place of issue :
If you are living in country other than country of your Natio (please provide VISA details)	- Place of pirth :
Visa issue date : D D / M M / Y Y Y	- Date of issue : D D / M M / Y Y Y Y
Visa expiry date : D D / M M / Y Y Y	— Date of expiry : D D / M M / Y Y Y
·	
Landline : +	
Fax : +* Transaction alerts/ SMS/ OTP shall be sent on the Mobile number of Ma	in/ First
Applicant	Mother's maiden name :
E-mail : (Mandatory)	
Current residential address (please mention geographical	l address only, PO Box is not accepted)
City:	Country:
To be used as my communication address	
Permanent address (please mention geographical address only,	, PO Box is not accepted) Same as current residential address
City:	Country:
To be used as my communication address	

Bahrain



Employer Name :	
Employer address :	
City:	Country:
To be used as my mailing/ communication address (please p	
Number of years in present business/ with employer:	1 Year > 1 year: (No. of years)
Occupation:	Employer/ Company/ Business details
Employed Self-employed	Proprietorship Partnership
Others (please specify)	Private Ltd. Company Public Company
(e.g. Housewife, student, retired, unemployed)	Government/Ministry
Please select if you fall under Special customer category:	Charitable organisation Others (please specify)
Orphan Widow Pensioner	
Student Bahraini national/ resident earning less than BD 250 per month	
Person receiving social subsidy from Ministry of Social	Does the customer's business/activity involve any of these
Development	businesses? Please specify
Personal monthly gross salary or income or profit from	Cash intensive business (Restaurant/Convenience store)
business/ profession	Agent/Broker Jewelry dealer Real estate
USD / USD Equivalent	Money changer/remitter Building & Construction
	Manufacturing Commerce
Expected total value/ volume of annual credits in account	Financial Institution Consultancy
- USD / USD Equivalent	Services (other than financial) Others (please specify)
Estimated Net Worth, including inheritance	Product and services offered/ dealt in:
USD / USD Equivalent	
Major source of income/ wealth/ funding the account:	Permanent account number (PAN) declaration:
Income from business Salary	Whether Permanent account number (PAN) issued by Indian
Gift received Rental	taxation authorities in my name / name of the entity or in the name of any branch or any other office located in India
Retirement/ Pension Benefits Inheritance	Yes No
Investments (non-business)	
Others (please specify)	If Yes, PAN number:



Joint Applicant 2's	personal information
elationship with the Main Applicant:       Spouse     Son     Daughter	Friend Relative (specify)
ulutation: Mr. Mrs. N	Master Miss
Il Name: F	IRST NAME
	IDDLE NAME
ases)	LAST NAME
CPR/ National ID Number :	Nationality :
CPR/ ID expiry date : D D / M M / Y Y Y	Passport Number :
Country of residence :	— Place of issue :
If you are living in country other than country of your Nationality (please provide VISA details)	- Place of birth :
Visa issue date : D D / M M / Y Y Y	— Date of issue : D D / M M / Y Y Y Y
Visa expiry date : D D / M M / Y Y Y Y	— Date of expiry : D D / M M / Y Y Y Y
Mobile* : +	Male Female
Landline : +	Single Married
Fax : +	Date of birth         :         D         D         /         M         /         Y         Y         Y
<ul> <li>Transaction alerts/ SMS/ OTP shall be sent on the Mobile number of Main/ First Applicant</li> </ul>	Mother's maiden name :
E-mail :	
, , , , ,	
Current residential address (please mention geographical addre	ess only, PO Box is not accepted)
City:	Country:
To be used as my communication address	
Permanent address (please mention geographical address only, PO Bo	x is not accepted) Same as current residential address
City:	Country:
To be used as my communication address	

Bahrain



Employer Name :	
Employer address :	
City:	Country:
To be used as my mailing/ communication address (please p	provide the proof/ letter from employer)
Number of years in present business/ with employer:	Sear > 1 Year (No. of years)
0	Fundariar ( Communic / Business dataile
Occupation:	Employer/ Company/ Business details
	Proprietorship Partnership
Others (please specify) (e.g. Housewife, student, retired, unemployed)	Private Ltd. Company Dublic Company
	Government/ Ministry Trust/ Society
Please select if you fall under Special customer category:         Orphan       Widow       Pensioner	Charitable organisation Others (please specify)
Student Bahraini national/ resident earning less than BD 250 per month	
Person receiving social subsidy from Ministry of Social Development	Does the customer's business/activity involve any of these businesses? Please specify
Personal monthly gross salary or income or profit from business/ profession	Cash intensive business (Restaurant/Convenience store)
USD / USD Equivalent	Agent/Broker Jewelry dealer Real estate
	Money changer/remitter Building & Construction Manufacturing Commerce
	Financial Institution
Expected total value/ volume of annual credits in account	Services (other than financial) Others (please specify)
USD / USD Equivalent	
Estimated Net Worth, including inheritance	Product and services offered/ dealt in:
USD / USD Equivalent	
Major source of income/ wealth/ funding the account:	Permanent account number (PAN) declaration:
Income from business Salary	Whether Permanent account number (PAN) issued by Indian
Gift received Rental	taxation authorities in my name / name of the entity or in the name of any branch or any other office located in India
Retirement/ Pension Benefits Inheritance	Yes No
Investments (non-business)	
Others (please specify)	If Yes, PAN number:

Please note: For more than 3 Applicants, please use "Annexure for adding Joint Applicant"



## **Customer Declaration**

#### For Non-Residents of Bahrain only

We hereby declare that call account will be used only for transactions with regard to loan availed from ICICI Bank Limited, Bahrain Branch (the "Bank")/ Remittance to India/ Insurance linked investments or other products/ services approved by the

#### For both Residents and Non-Residents of Bahrain

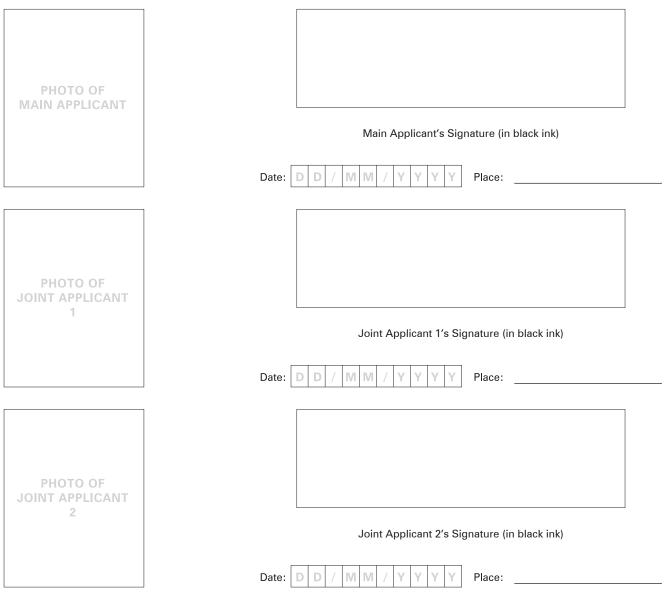
We are acting and would, in future will also be acting on our behalf for the purpose of transaction, new accounts or providing furtherinformation required by ICICI Bank Limited, Bahrain Branch. We also declare the relationship/account with the Bank is for the placement of our income/ funds received from source of funds as mentioned in this form.

We confirm that we have read and understood the General Terms & Conditions Governing Account(s) as well as terms and conditions relevant to the products being availed by us (**"Terms and Conditions"**) of ICICI Bank Limited, Bahrain Branch (the **"Bank"**) available on www.icicibank.bh. We also agree to be bound by the Terms and Conditions, including as may be amended from time to time on the website, for our relationship with the Bank. We hereby specifically agree and confirm that the Bank shall be entitled to disclose and/or procure information pertaining to us as provided in the Terms and Conditions.

#### Opt Out for Postal Mail, Email, SMS, WhatsApp or any other communication for promotional or advertisement material

We DO NOT AGREE to receive from ICICI Bank Limited, Bahrain Branch (the **"Bank"**) or my relationship manager, marketing, advertising and promotional information, materials and/or documents relating to products and/or services (including products and/or services of third party merchants whom the Bank and/ or ICICI Entities may collaborate or tie up with) via postal mail and/ or electronic transmission to my registered email address(es)/ mobile(s).

Please indicate your non-agreement by inserting a [ $\sqrt{1}$ ] in the box to the left. If you do not insert a tick in the said box, it means the Bank (including your designated relationship manager) will be able to send you marketing, advertising and promotional information, materials and/or documents.





### Wathiq (eKYC Consent)

I/ We, the undersigned, hereby understand that "Wathiq" is an Electronic Know-Your-Client (eKYC) platform developed by The BENE-FIT Company (BENEFIT) designed to digitally authenticate, receive, and verify my identity and information from the Information & eGovernment Authority (IGA) and others (CBB licensees) periodically to ICICI Bank Ltd., Bahrain Branch.

I/We agree that "Wathiq" will collect the following information as per CBB requirements when I/we request a financial service from ICICI Bank Ltd., Bahrain Branch:

- 1. Personal and ID Information
- 2. Contact Information
- 3. Account Details
- 4. Employment Details
- 5. Residency Information

I/We am/are aware that my/our information will be retained by ICICI Bank Ltd., Bahrain Branch for 10 years and might be shared with third parties within and outside Bahrain for the purposes of regulatory requirement, cloud storage, statistics, and other reasons in line with applicable laws and regulations.

I/We have the right at any time to withdraw the consent provided. I/We understand that withdrawal of consent will be applicable to future use of the personal data and will not in any way impact legitimate use of the personal information prior to the withdrawal of the consent.

For more details, please refer to the privacy policy available on https://www.benefit.bh/privacypolicy/

I/We confirm with my/our full legal capacity that I/we have read the above and understood the purposes in which ICICI Bank Ltd., Bahrain Branch collects and retains my/our information and provide consent to "Wathiq" to process and transfer this information for eKYC purposes.

#### Main Applicant

CLIENT

Applicant's Signature	:				
Applicant's Name	:				
Applicant's CPR or CR Number	:				
Date	:	D D / M M / Y Y Y			

#### Joint Applicant 1

Applicant's Signature	:	
Applicant's Name	:	
Applicant's CPR or CR Number	:	
Date	:	D D / M M / Y Y Y

#### Joint Applicant 2

Applicant's Signature	:	
Applicant's Name	:	
Applicant's CPR or CR Number	:	
Date	:	D D / M M / Y Y Y

#### WITNESS

Witness Signature	:	
Witness Name	:	
Witness CPR Number	:	
Date	:	D D / M M / Y Y Y





# Indemnity relating to instructions given by Fax, e-mail, telephone and other forms of electronic communication:

To, ICICI Bank Limited, Bahrain Branch

Notwithstanding anything to the contrary contained in any other document/agreement, the undersigned, hereby request, agree, consent and authorise ICICI Bank Limited (the "Bank" or "you" or "your"), to act and rely on any instructions or communications for any purpose (including but not limited to the instructions/communications pertaining to the operation of all our accounts or to any other services/ facilities that may be provided by you to us from time to time) whether they be or purport to be given by e-mail, telephone, facsimile, untested telexes and faxes, telegraph, cable or any other form of electronic communication by us (including such instructions/ communications as may be or purported to be given by those authorised to operate our account(s) with the Bank) ("Instructions").

We understand and acknowledge that there are risks involved in sending the Instructions to you through e-mail, telephone, facsimile, untested telexes, telegraph, cable or any other form of electronic communication and hereby agree that all risks shall be fully borne by us and we assume full responsibility for the same, and you will not be liable for any losses or damages or costs or expenses arising upon your acting, or your failure to act, wholly or in part in accordance with such instructions. We undertake to confirm our telephonic instructions by e-mail/fax immediately after having given such instructions and in any event within 24 hours, failing which the Bank shall be entitled (but not obliged) to reverse or not to act on our telephonic instructions.

In consideration of you agreeing, subject to the terms and conditions hereunder, to act upon the above Instructions, we hereby irrevocably agree and undertake:

- a. That you shall be entitled to act or refuse to act as you see fit, without incurring any liability whatsoever to us or to any other person, upon any Instructions for any purpose which may from time to time be or be purported to be given by e-mail, telephone, facsimile, untested telexes, telegraph, cable or any other form of electronic communication by us (including such Instructions as may be or be purported to be given by those authorised to operate our account(s) with the Bank), even if such Instructions or communications are not followed up by written confirmation to you;
- b. That you are not required to verify the identity of the person giving Instructions or make any independent investigation of the authority given to such person, or to verify the genuineness of any signature(s) which in your opinion appears to be that of any person authorised by us to operate our account(s) with you;
- c. Not to make any claim against you by reason of or on account of you having so acted or you having acted wrongly or mistakenly or of your failure to act wholly or in part in accordance with the Instructions;
- d. That you shall be entitled (but not obliged) to keep records of our Instructions given or made by e-mail, telephone, facsimile, untested telexes faxes, telegraph, cable or any other form of electronic communication in such form, physical or electronic, as you may deem fit, and your records shall be conclusive and binding on us. You shall be entitled to dispose of or destroy any such records at any time as determined by you in accordance with your standard procedures and policies;
- e. That you shall be entitled to require any Instruction in any form to be authenticated by use of any password, identification code or test as may be specified by you from time to time and we shall ensure the secrecy and security of such password, code or test and we shall be solely responsible for any improper use of the same;
- f. That, notwithstanding the above, you may, under circumstances determined by you in your discretion, require from us confirmation of any Instructions in such form as you may specify before acting on the same; and
- g. We shall indemnify you and keep you indemnified from and against all claims, either by us or any other, actions, demands, liabilities, costs, charges, damages, losses, expenses and consequences of whatever nature (including legal fees on a full indemnity basis) which may be brought or preferred against you or that you may suffer, incur or sustain by reason of or on account of your having so acted whether wrongly or mistakenly or not, or of you failing to act wholly or in part in accordance with the Instructions and terms of this letter.
- h. That this letter shall be governed and construed in accordance with the laws of Kingdom of Bahrain and we hereby irrevocably submit to the non-exclusive jurisdiction of the courts of the Kingdom of Bahrain in case of any dispute hereunder.

Main Applicant

Joint Applicant 1

Joint Applicant 2



		FATCA/ CRS Decl	arati	ion F	orm			
Customer ID Salutation:	: Mr	Mrs. Mas	ter		Main Applicant			
Full Name: (as in Passport and pl	ease include any aliases)							
Date of Birth : Nationality :	D D / M M /		ace of l	Birth : ial Cour				
Please answe	r ALL the below Que	estions	Yes	No	Requirements if t	he answer is 'Yes'		
1a) Are you a US	•				W-			
1b) Are you a US	tax resident (e.g. Gree	n Card Holder)?			W	-9		
					you are a US citizen	W-9		
2) Were you born	in the US?				you are not a US Citizen	Renunciation of US citizenship issued by US Government + W-8BEN		
Please tick (√)		on-US Person US	Person		TIN:			
more than one co tax identification more than three c	It the tax residency in the below table. If resident in the country, please provide all countries and associated tion numbers. (If the Account Holder is tax resident in the countries / jurisdictions, please use a separate sheet)       If a TIN is unavailable please provide the appropriate reason A, B C where indicated below: (Provide if TIN not available for any of the aforementioned countries).         Intry of Tax Residence       TIN/         Functional Equivalent (FE)       A. The country/jurisdiction where the Account Holder resident does not issue TINs to its residents.         B. The Account Holder is otherwise unable to obtain a TIN equivalent number.       (Please explain)         (Please explain)       C. No TIN is required. (Only select this reason if the domess)							
3.				aw of th	e relevant jurisdiction does Nissued by such jurisdiction	not require the collection		
partnership or corp applicable law to re	oration organised in the U ender orders or judgments	ax resident in the United States inc IS or under the laws of the US or a concerning substantially all issues f the trust, or an estate of a decede	ny State regardin	thereof, a g adminis	trust if (i) a court within the US stration of the trust, and (ii) one	6 would have authority under		
	and Signature	vided above is true, accurate c	and com	plete.				
Subject to applicable local laws, I/we hereby consent for the bank or any of its affiliates (including branches) (collectively "the Bank") to share our information with domestic or overseas regulators or tax authorities where necessary to establish our tax liability in any jurisdiction.								
I/We agree and u Bank.	ndertake to notify the E	3ank within 30 calendar days it	f there is	a chang	ge in any information which	I/we have provided to the		
Name	:					_		
ID Number	:							
Signature								
Date	DD/MM/	Y Y Y Y						

## **BM/ BOM/ Bank official Authorization**

Name: .....

Employee ID: .....



FATCA/ CRS Declaration Form											
Customer ID       :											
(as in Passport and please incl	ude any aliases)										
Date of Birth :       D       /       M       /       Y       Y       Y       Place of Birth :											
Please answer ALL t	he below Que	estions		Yes	No	Requirements if t	he answer is 'Yes'				
1a) Are you a US citizen?	•					W					
1b) Are you a US tax res	dent (e.g. Gree	n Card Holder)?				w	-9				
						you are a US citizen	W-9				
2) Were you born in the l	JS?					you are not a US Citizen	Renunciation of US citizenship issued by US Government + W-8BEN				
Please tick (√)		on-US Person	] US F	Person	-	TIN:					
Please indicate the tax residency in the below table. If resident in more than one country, please provide all countries and associated tax identification numbers. (If the Account Holder is tax resident in more than three countries / jurisdictions, please use a separate sheet)         Country of Tax Residence       TIN/ Functional Equivalent (FE)         1.       2.         3.       Note: For purposes of this Self Certification, tax resident in the United States income					If a TIN is unavailable please provide the appropriate reason A, B or C where indicated below: (Provide if TIN not available for any of the aforementioned countries).  A. The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents.  B. The Account Holder is otherwise unable to obtain a TIN or equivalent number.  (Please explain)  C. No TIN is required. (Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)						
applicable law to render ord	ers or judgments		issues ı	regarding	g adminis	trust if (i) a court within the US tration of the trust, and (ii) one or resident of the US.					
<b>Declaration and Signature</b> I/We hereby confirm the information provided above is true, accurate and complete. Subject to applicable local laws, I/we hereby consent for the bank or any of its affiliates (including branches) (collectively "the Bank") to share											
		-				ry to establish our tax liabil ge in any information which					
Name :							_				
ID Number :											
Signature :											
Date : D	D / M M ,	YYYYY	_								

## **BM/ BOM/ Bank official Authorization**

Name: .....

Employee ID: .....



FATCA/ CRS Declaration Form											
Customer ID       :											
(as in Passport and please	include any aliases)										
Date of Birth :       D       /       M       /       Y       Y       Y       Place of Birth :											
Please answer AL	L the below Que	estions	Yes	No	Requirements if t	he answer is 'Yes'					
1a) Are you a US citiz	en?				W	-9					
1b) Are you a US tax	resident (e.g. Gree	n Card Holder)?			W	-9					
					you are a US citizen	W-9					
2) Were you born in t	he US?				you are not a US Citizen	Renunciation of US citizenship issued by US Government + W-8BEN					
Please tick (√)	No.	on-US Person	Person	•	TIN:						
more than one count tax identification num more than three coun <b>Country of T</b> <b>1.</b> <b>2.</b> <b>3.</b> Note: For purposes of th	ry, please provide nbers. (If the Acco tries / jurisdictions, <b>ax Residence</b> is Self Certification, to	e below table. If resident in all countries and associated unt Holder is tax resident in please use a separate sheet TIN/ Functional Equivalent (FE)	C who afore	If a TIN is unavailable please provide the appropriate reason A, B or C where indicated below: (Provide if TIN not available for any of the aforementioned countries).  A. The country/jurisdiction where the Account Holder is resident does not issue TINs to its residents.  B. The Account Holder is otherwise unable to obtain a TIN or equivalent number.  (Please explain)  C. No TIN is required. (Only select this reason if the domestic law of the relevant jurisdiction does not require the collection of the TIN issued by such jurisdiction)							
partnership or corporation applicable law to render	on organised in the U orders or judgments	S or under the laws of the US or concerning substantially all issue f the trust, or an estate of a decer	any State s regardir	thereof, a g adminis	I trust if (i) a court within the US stration of the trust, and (ii) one	S would have authority under					
<b>Declaration an</b> I/We hereby confirm t	•	vided above is true, accurate	and com	plete.							
		eby consent for the bank or a as regulators or tax authoritie									
Bank.	take to notify the E	3ank within 30 calendar days	if there i	s a chang	ge in any information which	I/we have provided to the					
Name :_						-					
ID Number :											
Signature :											
Date :	DD/MM/	Y Y Y Y Y									

## **BM/ BOM/ Bank official Authorization**

Name: .....

Employee ID: .....



## **Bahrain Personal Data Protection Law - Privacy Policy**

#### About ICICI Bank:

ICICI Bank Limited, Bahrain Branch ("**Bahrain Branch**") ('**ICICI**' or the '**Bank**') is an overseas branch of ICICI Bank Limited, India - a comprehensive financial services provider and one of the largest players in the Indian Financial Services industry. ICICI Bank, having achieved leadership in the domestic market, has now established a presence in the major global financial Centers including USA, Canada, UK, UAE, Bahrain, China, and Singapore. ICICI Bank Bahrain has been granted Retail Bank (Branch) License during May 2007 by Central Bank of Bahrain (the Regulator) for Retail and Full Commercial Banking Activities in the Kingdom of Bahrain. Such a license entitles the branch to act as hub for business in the Middle East and to deal with Resident and Non-Residents of Bahrain in any currency. ICICI Bank, Bahrain Branch offers its clients a wide range of customer friendly products like Bank accounts, Deposits, Loan Against Deposits, Remittance facilities through branch/ online/ Kiosk and attractive investment options.

For the purpose of processing the above-mentioned services, ICICI collects, processes, and retains the required personal data and sensitive personal data of its prospects, customers and third parties. Furthermore, to engage employees / contractors for providing these services, ICICI collects, processes and retains job candidates and employees personal data.

#### Origin of Personal Data & Sensitive Personal Data:

ICICI collects the prospects personal and sensitive data for sharing products and service details. The Bank also collects customers personal data directly through opening new customers accounts and during performing the core sales and distribution operations.

#### **Categories of Personal Data:**

ICICI processes the prospects and customers following personal data: Identity and Contact details such as Full name, postal addresses, email address, phone numbers, customer account established in ICICI, CPR copy, smart card data etc.

#### Purposes for Data Collection and Lawful Basis for Processing:

ICICI only processes your personal data based on one or more of following lawful basis under Bahrain Personal Data Protection Law ('**Bahrain PDPL**'):

Purpose	Lawful Basis
To open new accounts to potential customers	<ul> <li>Contractual Obligation</li> </ul>
To acknowledge collections from customers from all locations	<ul> <li>Contractual Obligation</li> </ul>
To offer credit to the customers	<ul> <li>Contractual Obligation</li> <li>Legitimate Interest</li> </ul>
To apply online backups, system support and maintenance activities	<ul> <li>Legal Obligation</li> <li>Legitimate Interest</li> </ul>
To provide your information to auditors during and after your contract to verify compliance with Bahrain Laws	<ul> <li>Legal Obligation</li> </ul>
To store your contact details electronically in our records for communication	<ul> <li>Legitimate Interest</li> <li>Data Subject Consent</li> </ul>
To comply with ICICI's internal policies and procedures	<ul><li>Contractual Obligations</li><li>Legitimate Interests</li></ul>
Any other purposes permitted by law	<ul> <li>Legal Obligation</li> </ul>
Purposes relating to any of the above	<ul> <li>Legal Obligation</li> <li>Legitimate Interests</li> <li>Contractual Obligations</li> </ul>
Any other purposes as detailed in respective product(s) or service(s) related forms and general terms and conditions as agreed	<ul> <li>Legal Obligation</li> <li>Legitimate Interests</li> <li>Contractual Obligations</li> </ul>

#### Categories of Recipients of your Data:

Your personal data will be processed by ICICI and may be shared with third parties within or outside the Kingdom of Bahrain including cloud providers for email communication and online and Disaster Recovery storage, when required by the law, or where it is necessary to administer the relationship with you or where we have one of the above-mentioned legitimate interests in doing so. This includes sharing your personal data with banks, auditors, system support vendors, and governmental bodies, with any other parties as detailed in respective product(s) or service(s) related forms and general terms and conditions applicable for availing such service(s) or product(s) from ICICI.

#### Your rights under Bahrain PDPL (Act No. 30 of 2018)

You have the rights to submit your request free of charge to ICICI:

- a. To be notified about the complete data concerning you and request its rectification.
- b. Remove, block, or restrict your personal data.
- c. Object if your personal data is being used for direct marketing.
- d. Object if processing may result in defamation or discrimination causing possible financial or moral damage.
- e. Object if your personal data is being used for decisions based on automated data processing and request that the processing be solely automated.



- f. Withdraw your consent to the processing of your personal data in cases where you have provided your consent for the processing and, as such, your consent is the lawful basis that ICICI is relying on for processing.
  - > ICICI shall process such request free of any charges within a period of 10 working days, otherwise as stipulated by the law.
  - A consent once given by the prospect and/or customer can be withdrawn at any time for any future actions.
  - > You have the right to lodge a complaint to Bahrain Personal Data Protection Authority (Bahrain PDPA) regarding any violation of Bahrain PDPL and its implementing Orders.

#### Decisions based on automated processing

ICICI will not take decisions for additional processing beyond the purpose of the collected personal sensitive data based on automated processing (i.e., loans and remittances) of your personal data and may inform you in case this condition is changed.

#### Security of your Personal Data

Prospects and customers' personal data is protected under Bahrain PDPL and ICICI ensures implementing selective security measures for protecting your privacy. ICICI shall implement technical and organisational security measures to keep your personal data secured and protected including when cross border transfer and storage.

#### **Retention Period of your Personal Data**

The personal data collected by ICICI is retained for as long as necessary to fulfil the purpose for which it was collected, and/or based on the validity of the contract, legal retention period requirements, and historical archiving. We securely destroy and erase or anonymize your personal data to ensure that it cannot be restored after exceeding the retention criteria. Hence, ICICI will not be able to support you with any further processing or information request on your personal data.

#### **Contact details**

If you have any questions or would like to obtain more details about how we use your personal data, you may contact ICICI at **pdplbahrain@icicibank.com**, or write to ICICI Bank Limited, P.O. Box 1494, Seef District, Kingdom of Bahrain.

#### Your Role to Keep your Personal Data Accurate

It is essential for ICICI to keep your personal data up to date and accurate. Therefore, kindly provide your updated information in case there is any change to your personal data during your business relationship with us.

#### **Update on Privacy Policy**

ICICI has the right to review and update the privacy policy. In case of any changes, we will inform you of any substantial change in how we process your personal data which will be updated on ICICI Bank's website **www.icicibank.bh**. ICICI reserves the right to alter, delete, modify or add any of the aforesaid terms, and such alterations, deletions or additions shall be deemed to be effective and binding on me/us.

## **Customer Declaration - Bahrain PDPL**

#### I/We hereby acknowledge that I/we have read and fully understood the privacy policy and I/we consent to have ICICI:

Processing and sharing my/our personal data for the purposes stated in this privacy policy. (Please tick)

Collecting information through other sources for processing and evaluating my application and managing the contractual relationship. (Please tick)

Applicant's Signature	:	
Applicant's Name	:	
Date	:	D D / M M / Y Y Y
1 <sup>st</sup> Joint Applicant's Signature	:	
Applicant's Name	:	
Date	:	D D / M M / Y Y Y
2 <sup>nd</sup> Joint Applicant's		
Signature		
Applicant's Name	:	
Date	:	D D / M M / Y Y Y

In case the prospect and/or customer does not provide any of the above-mentioned personal data, ICICI will not be able to perform further processing and comply with the legal and/or contractual requirements. Please note: You have the right to withdraw your consent at any time by contacting our DPG as long as withdrawal will not stop us from performing our legal and contractual obligations.



### **RM/Bank official confirmation**

(to be filled in by the bank)

#### For Bahrain resident customers

I have met Mr./Ms	, on	at	,
Mr./Ms	, on	at	&
Mr./Ms	, on	at	

in person and hereby confirm the identity filled in the relationship form in my presence. I have verified the information filled in with the original documents and certify that they convey compliance with bank's KYC guidelines.

#### For customers not resident in Bahrain

I have met Mr./Ms	, on	at	<b>;</b>
Mr./Ms	, on	at	&
Mr./Ms	, on	at	
and offered him/her the above-mentioned products and services	when he/she was in		(name

of the country outside the present country of residence). I confirm that I have not solicited the client in his country of residence in respect of any product that is not permitted in that country.

#### Mode of Contact (please tick as applicable)

Branch visitor/Walk-in Customer

Meeting outside when the customer was in \_\_\_\_\_ (place/ country of residence).

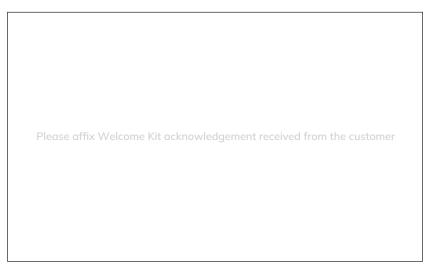
Non - Face to Face

#### Checked and verified by RM/Bank official

Name	:	
Employee No.	:	
RM Code	:	
Signature	:	
Date	:	

#### To be filled by Bahrain operations team.

Customer ID			Account No.						





## Documents required for commencing a relationship

#### For Bahraini nationals

Photocopies of the following:

#### Identity proof (any one of the following):

- Valid passport and valid CPR card with a clear photograph
- Valid CPR or Valid ID card with a clear photograph

#### Address proof (any one of the following):

- Recent utility bill (Electricity/Telephone bills not more than 3 months old from the date as mentioned in the ROF)
- Bank statement (not more than 3 months old from the date as mentioned in the ROF)
- Official document card such as CPR, from a public/government authority
- Tenancy agreement (expiring not less than 15 days from the date as mentioned in the ROF)

#### For residents of Bahrain (other than Bahraini nationals)

Photocopies of the following:

Identity proof (both required):

- Valid passport and valid visa
- Valid CPR card or Valid ID card with a clear photograph

#### Address proof (any one of the following):

- Recent utility bill (Electricity/Telephone bills not more than 3 months old from the date as mentioned in the ROF)
- Bank statement (not more than 3 months old from the date as mentioned in the ROF)
- Official document card such as CPR, from a public/government authority
- Tenancy agreement (expiring not less than 15 days from the date as mentioned in the ROF)

#### For persons living outside Bahrain

A. Visiting the Bahrain branch or meeting a Bahrain branch official or meeting an official of ICICI Bank, India or its branches/subsidiaries/representative offices overseas/correspondent banks.

#### Identity proof (both required):

- Valid Passport
- Valid Resident identity card with a clear photograph

#### Address proof (any one of the following):

- Recent utility bill (Electricity/Telephone bills not more than 3 months old from the date as mentioned in the ROF)
- Bank statement (not more than 3 months old from the date as mentioned in the ROF)
- Official document card such as CPR, from a public/government authority
- Tenancy agreement (expiring not less than 15 days from the date as mentioned in the ROF)

#### B. Sending the forms by post/courier

#### 1. Valid Passport

2. Valid Resident identity card with a clear photograph

#### Address proof (any one of the following):

- Recent utility bill (Electricity/Telephone bills not more than 3 months old from the date as mentioned in the ROF)
- Bank statement (not more than 3 months old from the date as mentioned in the ROF)
- Official document card such as CPR, from a public/government authority
- Tenancy agreement (expiring not less than 15 days from the date as mentioned in the ROF)

Any document copied for the purpose of identification verification must be certified by:

- an official of a government ministry; or
- an official of an embassy or consulate; or

• an official of another licensed financial institution or of an associate company of the licensee of a GCC member state or FATF member state. The individual making the certification must give clear contact details (e.g. by attaching a business card or company stamp).