



**ICICI BANK LIMITED SHANGHAI BRANCH
APPLICATION FOR ACCOUNT OPENING
(INSTITUTION CUSTOMER)**

印度爱西爱西爱银行上海分行账户开户申请表(单位客户)

Date(DD/MM/YYYY)日期(日/月/年): ____/____/____

NOTE: 1. Please tick (☑) where applicable and complete this form in BLOCK. Please do not use [x] or any other mark. LETTERS. Please ensure that all fields are filled and no field is left blank (please strike off or mark N/A if not applicable). Please note that incomplete forms may not be processed or may lead to delays.

2. All accounts herein are subject to Chinese laws and regulations (including but not limited to laws and regulations on Foreign Exchange Control).

注意: 1. 请在适当的方框内勾选(☑), 并用正楷填写。请不要勾选[x]或做任何其他记号。请确保所有信息均填入(如不适用, 请划掉或标为N/A)。如有未完整填写信息, 本申请表可能无法通过审核或导致业务延迟。
2. 此处所有的账户均受中国法律法规(包括但不限于关于外汇管理的法律法规)的监管。

For Bank Use Only 银行专用	
CIF Number 客户号	Bank authorized Signature and Stamp 银行授权签字和印鉴

Reference 编号: _____

Details of the Customer 客户资料	
Customer's Names in Chinese(if any) 客户中文名称(如有):	Customer's Names in English (if any) 客户英文名称(如有):
Jurisdiction of Incorporation 注册地: _____	
Nature of Business/Industry 商业/产业性质 _____	
Business License No./Registered No. 营业执照号码/登记号码: _____	
Legal Representative/Responsible Person 法定代表人/负责人: _____	
ID type and No. of the Legal Representative/Responsible Person: 法定代表人/负责人身份证件类型和号码: _____	
Registration/Incorporation/Establishment Date 成立日期: _____	
Type of the Customer 客户类型	
<input type="checkbox"/> Company, Enterprise 公司、企业	
<input type="checkbox"/> State-owned Enterprise 国有企业	<input type="checkbox"/> Collective Enterprise 集体企业
<input type="checkbox"/> Limited Company 有限责任公司	<input type="checkbox"/> Partnership 合伙
<input type="checkbox"/> Joint-stock Limited Company 股份有限公司	<input type="checkbox"/> Public Listed Company 上市公司
<input type="checkbox"/> Wholly Foreign Owned 外商独资	<input type="checkbox"/> Equity Joint Venture 中外合资企业
<input type="checkbox"/> Co-operative Joint Venture 中外合作企业	



- | | |
|--|---|
| <input type="checkbox"/> Representative of Foreign Entity
外国企业驻华代表处 | <input type="checkbox"/> Non Government Organization
非政府组织 |
| <input type="checkbox"/> Government Sponsored Institution
事业单位 | <input type="checkbox"/> Club/ Society
社团组织 |
| <input type="checkbox"/> Non-bank Financial Institution
非银行金融机构 | <input type="checkbox"/> Trust
信托计划 |
| <input type="checkbox"/> Non resident Enterprise
非居民机构 | |
| <input type="checkbox"/> Others (Please specify)
其他 (请说明) _____ | |

Correspondence Address

邮寄地址:

Contact 联系人: _____

Designation 职位: _____

ID No 证件号: _____

Tel 电话: _____

Fax 传真: _____

Email 电子邮件: _____

Registered Address (please fill in if different from Correspondence Address) 注册地址(如与邮寄地址有别请填写):

Country 国家: _____ City 城市: _____

P.O. Code 邮政编码: _____

Tel 电话: _____

Type(s) of Account(s) and Service(s) 账户和服务种类 ("Account(s)")

Please choose below the type(s) of account(s) you want to open 请在以下选择你希望开立的账户和服务种类:

Foreign Exchange Current Account 外汇经常项目账户 as a settlement account 结算账户 or 或 to-be-inspected acc 核查账户 or 或 others (please specify) 其他(请说明) _____

Foreign Exchange Capital Account 外汇资本项目账户 as a foreign exchange capital account 外汇资本金账户 or 或 special account for external debt 外债专户 or 或 others (please specify) 其他(请说明) _____

Foreign Exchange Non-Resident Account 外汇非居民账户

Others (please specify) 其他(请说明) _____

Currency 币种: _____

Mode of Funding (If applicable) 存款方法 (如适用)

Debit our account No _____ with the Bank 从我们在银行的账户 (账号: _____) 转账



Funding by Cheque No. _____ of (Provide Name of Bank) _____ 从我们在 _____ 银行的支票（票号： _____）支付_

Remittance from remitting bank _____ and remittance reference No. _____ of currency _____ 从汇出行 _____ 汇出，汇款编码 _____，币种 _____

Revision to the Statements Instruction 就对账单指示进行变更

Statement Frequency 结单周期：

Monthly 每月 Others (Please specify) 其他(请注明) _____

Statement to be 对账单送达方式：

Sent by mail 邮寄 Collected from the bank 留银行自取

Customer Declaration 客户声明

1. We hereby confirm that the information provided above is correct, complete and updated.
我们在此确认以上提供的信息是正确、完整和最新的。
2. We have received, read and understood the ICICI Bank Limited, Shanghai Branch's ("Bank") Terms and Conditions for Bank Accounts and Services, as may be amended from time to time and such other terms and conditions that may apply to the Account(s) we hereby open, and agree to abide by and be bound by the same .
我们已经阅读并理解了印度爱西爱西爱银行上海分行（“银行”）的《银行账户服务条款及细则》以及其他适用于我们在此开立的账户的其他条款和条件，并同意遵守该等条款和条件。
3. We understand that our submission of this application form and its receipt by Bank does not mean that this application has been approved. We understand and agree that the approval of this application is at Bank's discretion and Bank is entitled to decline our application without furnishing any reason. 我们理解，我们提交本申请书以及银行收到本申请书并不意味着本申请已被批准。我们理解并同意，本申请书中的申请由银行自主决定是否批准，银行有权拒绝我们的申请且无需提供任何解释。
4. We understand and agree that Bank may contact us or our related companies and request for further information or documents for the purpose of this application and for verification. 我们理解银行可以联系我们或我们相关的公司，以便为本申请及后续的批准工作收集进一步信息或资料。
5. We understand that the English translation of this application has been provided for reference only, and the Chinese version shall prevail wherever there is any discrepancy between the Chinese version and English version. 我们理解本申请书的英文翻译仅作参考使用，当中英文版本出现不一致时，应以中文版本为准。

Date(DD/MM/YYYY)日期(日/月/年): ____/____/____

Authorized Signature
授权签名

Stamp/Seal (if applicable)
公章/印章（如适用）

Checked and Verified By RM/Bank Official 由银行客户经理/银行职员填写	To be filled by Operations team 由运营岗填写
Name 姓名: _____ Employee ID 员工编号: _____ Date 日期: _____ Sign 签名: _____	Approver 批准者: _____ Employee ID 员工编号: _____ Date 日期: _____ Sign 签名: _____