

**PERSONAL INFORMATION
CHANGE REQUEST**

FOR OFFICE USE	CIF No: _____
	Prepared by: _____
	Verified by: _____
	Notes (if any): _____

* Mandatory field

APPLICANT INFORMATION

Title	First Name *	Middle Name	Last Name *
Customer Identification Number *: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Don't have your Customer Identification Number? We would be pleased to help at 1-888-424-2422			

UPDATE MY INFORMATION (Please select all that apply)
 HOME ADDRESS (Canadian Addresses Only) Please fill the address where you presently live. This address cannot be a postal installation i.e. PO Box, RR, Site, Comp or GD/General Delivery address.

Street Number and Name			Apt. / Unit No.	
City	Province	Postal Code	Country CANADA	

 COMMUNICATION ADDRESS (if different from home address)

Communication Address			Apt. / Unit No.	
City	Province	Postal Code	Country	

 EMPLOYMENT INFORMATION

Name of Profession ⇅	Industry ⇅	Title ⇅
Primary Business Function ⇅ ⇅ Click here to select, copy and paste the Primary Business Function in the field below; if not in the list, please enter below.		

⇅ *Required only if there are any changes or addition of information*
 MOBILE NUMBER *:

001

Area Code	Telephone Number
<input type="text"/>	<input type="text"/>

* Canadian Mobile Numbers only. You must be the sole owner of this number.

 HOME PHONE NUMBER:

Area Code	Telephone Number
<input type="text"/>	<input type="text"/>

 BUSINESS PHONE NUMBER:

Area Code	Telephone Number
<input type="text"/>	<input type="text"/>

 EMAIL ADDRESS: _____
AUTHORIZATION *

I/We hereby confirm that the information provided is true and correct.

I hereby consent to the Bank collecting, using and disclosing my personal information for the purposes identified in the Bank's Privacy Policy, which I have received, read and understood. I understand that ICICI Bank Canada reserves the right to carry out any other additional checks for verification purpose on me.

APPLICANT SIGNATURE_____
DATE (dd-mm-yyyy)**Question?**Contact us any time at **1-888-424-2422** or customercare.ca@icicibank.com.
Thank you for helping us serve you better!**Mailing
Instructions**

Once completed, please print, sign and mail the "Personal Information Change Request Authorization Form" to:

ICICI Bank Canada
P.O. Box 396, Don Mills, ON M3C 2S7
Canada

INSTRUCTIONS:

1. Locate the Primary Business Function below and place the cursor at the beginning of the Primary Business Function
2. Highlight and copy the Primary Business Function
3. Click on the button "Return to Application" on the right side of this page
4. Once back in the Application, place the cursor on the Primary Business Function field and paste it

LIST OF PRIMARY BUSINESS FUNCTIONS FOR EACH INDUSTRY**Auto Dealer**

Boat Dealer
Car/Truck Dealer
Rental Companies

Brokerage

Brokerage (Regulated)
Insurance Brokerage
Mortgage Brokerage
Real Estate Brokerage

Casino

Casino
Casino, Online

Charity, Registered

Charity, Registered

Charity, Unregistered

Charity, Unregistered

Civil Aviation

Airline

Consulting Firm

Consulting Firm
Engineering Consulting
Financial Intermediary Structures
Immigration Consulting
Import/Export Consulting
IT Consulting
Management Consultancy
Manpower Provider

Education

College
School
University

Financial Institutions (Regulated)

Bank
Cooperative Credit Association
Cooperative Retail Association
Credit Union
Insurance Company

Financial Services

Cheque Casher
Currency Exchange Houses
Loan Arranging Business
Merchants of stored valued cards
Money Remittance Business
Money Service Business (MSB)
Small Loans Provider
Trusts
White label ATMs

Government Services

City Counselor
City Employee
Community and Social Service Worker
Fire Fighter
Member of Parliament
Police Officer

Health Care

Clinics
Hospitals
Laboratories, Diagnostic centers

Holding and Trust Companies

Accounting Firm holding accounts for clients
Holding Company
Intermediary structures
Investment Company
Law Firm holding accounts for clients
Trust Company

Hospitality and Tourism

Hotels
Travel Agency

Information Technology

IT Consulting Firm

Legal, Accounting, Tax

Accounting Company
Tax Company

Not-for-Profit Organizations

Not-for-profit Organization

Off-Shore Company

Off-shore Companies

Other

Accountant
Auto Sales person
Cab Driver
Homemaker
Immigration Consultant
IT Consultant
Real Estate Agent
Retired
Salesperson working on commission
Tax Consultant
Taxi Driver
Truck Driver
Unemployed

Personal Services

Beauty salons
Landscaping
Private Health Care Provider

Precious Metals and Stones

Jewellery Dealer
Precious Metals Dealer

Retail Store

Convenience Store
Electronics, Retail
Food and entertainment
Grocery Store
High-end or Luxury products business
Lotto Shops
Pawnbrokers
Restaurant
Retail / Wholesale shops
Retail shops/outlets

Small/Medium Enterprise

Accounting Firm
Antiques Dealer
Art Dealer Auction House
Construction
Courier Service
Delivery Service
Family Owned Holding Company
Import/Export
Investment company
(Personal/family)
Oil and Gas (stations and providers)
Pharmaceutical
Real Estate Agencies
Renovations
Transportation Company
Travel Agency
Trust Company (Personal/family)