CUSTOMER INFORMATION & ACCOUNT OPENING FORM





(Please fill the form in BLOCK LETTERS and SAME INK only. THIS IS A MACHINE READABLE FORM AND WILL PASS THROUGH A SCANNER). Tick						
pplication Date D M M Y Y Y Y CKYC Number D (For Existing Customer) Entity Customer ID (For Existing Customer) Branch Code D Den my/our Account at your (Branch Name) Dranch Case Type R-Kit Non-R-KIT						
Existing CIF ID : Update	ing CIF as per the details prvided in this Customer Information Fo	orm				
1. *ENTITY DETAILS						
*Name						
*Date of Incorporation D D M M Y Y Y Y *City of Iu	Incorporation *Country of Incorporation	_				
*PAN No.	GSTN No. *Registered Yes No					
OR Form 60 - Form 60 is a declaration to be filed by an individual Income Tax Act	al or a person/entity who does not have a PAN and who enters into any transaction specified in rule 114B of th	пе				
	Listed Public Ltd Unlisted Public Ltd Public Sector HUF Public T Association Statutory Body LLP Others If 'Others' fill as per Bank's KYC pr					
*Industry Type Manufacturing NBFC C	Construction Non Profit Organization Micro Enterprises Others If 'Others' fill Industry code as per Bank's KYC po					
*Annual Turnover 0-5 Lakh 5-10 Lakh 10-25 Lal	akh 🔃 25-50 Lakh 🗌 50 Lakh - 1 Cr 🧻 1 - 5 Cr 🦲 5 - 25 Cr 🔲 25 - 50 Cr 🦳 50 - 100 Cr 🔃 > 10	00 Cr				
(Avg. income for corp.) Legal Entity Identifier Number	Legal Entity Identifier Expiry Date	<u> Y</u>				
Document Identification Number						
*Darpan Unique ID for NPO/NGO						
RERA Registration Number	Company website URL					
2. *ADDRESS DETAILS PREFERRED MAILING ADDRESS (Proof is mandatory)	Registered Office Address Principal Place Of Business					
Shop/Office No. &	The grade of the Address Trine partition of Business					
Building Name/No. Road/Street Name/No.						
	*City					
*Landmark						
*State	*Country *Pin Code *Pin Code					
CONTACT DETAILS						
Country Code	Phone No. Extension					
Email ID	(For receiving SMS Alerts)					
(F-statements & F-alerts)	endly e-statements by furnishing your correct email ID, for physical statement visit nearest RBL branch in future.					
*REGISTERED OFFICE ADDRESS (Proof is mandatory)	Same as Preferred Mailing Add	ress				
Shop/Office No. &						
Building Name/No.						
Road/Street Name/No.						
*Landmark	*City					
*State	*Country *Pin Code *Pin Code					
PRINCIPAL PLACE OF BUSINESS (A. To be filled below if diff	fferent from registered address B. Proof is mandatory)					
Shop/Office No. &						
	*City					
*Landmark						
3. *DETAILS OF AUTHORISED SIGNATORY/IES Name of Authorised Signatory/ies	Designation Director ID number Customer ID No. (If existing customer	r)				
	(only if applicable)	"				
2						
3						
4						

0
`-
ā
~
<
í
Ξí.
`. `
÷
$\overline{}$
$\overline{}$
\sim
_
\Box
$\overline{}$
=
7
=
\circ
Z
_

SMS Banking Corporate Internet Banking including Biz Bank Debit Card (Provided only for account where mode of operation is singly / anyone)
(Tick if applicable)
5. *NATURE OF ACCOUNT(S) TO BE OPENED
Current Account Scheme Name Savings Account Scheme Name Fixed Deposit Scheme Name *AMB / AQB / QTP ₹ Average Monthly Balance / Average Quarterly Balance / Quarterly Throughput - for Savings & Current Account
6. *MODE OF OPERATION
singly **As per Board Resolution (BR) /MOP Letter Severally Others No Debit Card will be issued)
7. *WHAT WOULD YOU NEED TO MAKE YOUR BANKING EASIER
Cheque Book
4th Applicant Yes No Card Variant: Enterprise Signature+ Insignia Pinnacle Crest Others Insignia Pinnacle Crest Others Pinnacle Pinnacle Crest Others Pinnacle Crest Others Pinnacle Pinn
Preferred Language of Communication: English Hindi Marathi Assamese Bengali Gujarati Kannada Malayalam Oriya Punjabi Tamil Telugu Others:
8. *MODE OF FUNDING
Initial Amount ₹
9. DEPOSIT DETAILS I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date D M M Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date D M M Y Y Y Y (*Value date will be given subject to availability of clear funds) Amount in words
I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date D M M Y Y Y Y (*Value date will be given subject to availability of clear funds) Amount in words
I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date Value Date Value Date value be given subject to availability of clear funds) Amount in words Cash^ Cheque No. @ Date Date Date Date Value Date Date Date Date Date Date Date Dat
I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date Value Date Value Date value be given subject to availability of clear funds) Amount in words Cash^ Cheque No. @ Date Date Date Date Date Date Date Date
I/We wish to book a Callable FD *Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ Value Date D D M M Y Y Y Y (*Value date will be given subject to availability of clear funds) Amount in words Cash^ Cheque No. @ Date D D M M Y Y Y Y Drawn on Bank Branch Debit my RBL Bank Account Number Rate of Interest % (p.a.)
I/We wish to book a Callable FD
I/We wish to book a ☐ Callable FD ☐ *Non-Callable fixed Deposit ☐ NRO Tax saver FD: (Tenure- 5 years lock-in) Amount ₹ ☐ Value Date ☐ ☐ M M Y Y Y Y Y ☐ Value date will be given subject to availability of clear funds) Amount in words ☐ Cash^☐ Cheque No. @ ☐ ☐ Date ☐ ☐ M M Y Y Y Y ☐ Drawn on ☐ ☐ Bank ☐ Branch ☐ Debit my RBL Bank Account Number ☐ Days ☐ Rate of Interest ☐ % (p.a.) Interest Pay out Option ☐ At Maturity ☐ Monthly (Discounted rate will be applicable for monthly payout) ☐ Quarterly ☐ Yearly Interest Pay Out as per: ☐ Calendar days ☐ Deposit Anniversary Maturity Instructions: ☐ Renew Principal & Interest ☐ Do not renew - Repay principal & Interest ☐ Interest ☐ IFSC code ☐ ☐ IFSC
I/We wish to book a Callable FD
I/We wish to book a Callable FD
I/We wish to book a Callable FD *Non-Callable fixed Deposit NR0 Tax saver FD: (Tenure- 5 years lock-in) Amount ₹
I/We wish to book a Callable FD Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount \(\) \(
I/We wish to book a Callable FD Non-Callable fixed Deposit NR0 Tax saver FD: (Tenure- 5 years lock-in) Amount
I/We wish to book a Callable FD Non-Callable fixed Deposit NRO Tax saver FD: (Tenure- 5 years lock-in) Amount \(\) \(

10. *C	REDIT FACILITY DETAILS						
Client	: Undertaking (please tick any one option	n)					
I/We have not availed any credit facilities from any bank in the banking system. In future, if I/we avail any credit facility from any other bank, I/we shall inform RBL Bank within 7 working days of availing such credit facilities with all the details as per Table A.							
	/We are availing less than ₹ 5 crores of within the banking system reaches ₹ 5 c		0 ,	•	BL Bank as and when the credit facilities availed		
	/We declare that I/we fall under the exc rom time to time.	ception category	as	per the RBI Circular* (re	fer Table C for Exception list) as maybe amended		
I	/We are availing credit facilities with oth	ner Banks / RBL Bank a	s per the details di	sclosed in Table A and co	nfirm the accuracy of the details provided herein.		
Reference to the RBI circular, I/We understand that CC/OD borrower where overall exposure in Banking system is more than ₹ 5 crore, the borrower can only have Current account in 'One Bank' provided the bank has more than 10% of the lending exposure (CC/OD should be a part of it). I/We confirm that I have no other current account and will keep RBL Bank's current account as my only and exclusive current account.							
TABL	E A – BANK WISE CREDIT EXPOSURE						
SR No	Bank Name	Exposure	e Tyne	% Exposure	Amount₹		
		(CC or OD or Other		70 EXPOSOIC			
1.							
2.							
3.							
4.							
5.							
Total							
For expo	 osure from more than 5 Banks, add separate sh	l neet in the above format. (I	Exposure means the s	um of sanctioned fund based	d and non-fund-based credit facilities in Banking System		
•	E B - DEBIT AUTHORIZATION (Please colle						
	C/OD accounts having less than 10% of			or Collection accounts			
	authorize RBL Bank to debit the account ar						
Benef	iciary account Name (in other Bank):						
Name of Bank : Branch Name : IFSC code:							
☐ I would like to set standing instructions in my account provided as per this declaration							
*SI Start Date : Date of account opening / conversion D D M M Y Y Y Y SI end date : Dec 2099. *Default SI frequency will be set as next day morning.							
I/We authorize RBL Bank to verify the exposure details from CRILC, Credit Information Companies (CICs) and National E-Governance Services Ltd (NeSL).							
which	ever is earlier.	ŕ	,	· ·	in the composition of the lending exposure		
I/We a	aware that I/We need to reapply for nece	essary facility when OD	OCC/Collection acc	ount is converted in to R	egular Current account/OD-CC Account.		
	• • • • • • • • • • • • • • • • • • • •			to the Collection accoun	t (s)/OD- CC account (s) with debit freeze:		
	Fransaction access will be deactivated o	•	and CIB)				
	All the cards will be permanently blocke	a					
	Cheque(s) issued if any will be stopped ECS, SI, Auto Sweep-out facility will be s	tonnod					
	Digital transaction access like UPI, POS	• •					
	Signat transaction access tike of 1,1 oo	ctc. witt be stopped					
TABL	E C - EXCEPTION LIST						
1. Ac	counts for real estate projects (RERA)						
	odal or escrow accounts of payment agg			·	es as permitted by RBI		
	counts for settlement of dues related to	o debit card/ATM card/	credit card issuers	/acquirers			
	counts permitted under FEMA, 1999						
	counts for the purpose of IPO/NFO/FPC	•			• •		
6. Accounts for payment of taxes, duties, statutory dues, etc. opened with banks authorized to collect the same, for borrowers of such banks which are not authorized to collect such taxes, duties, statutory dues							
7: Accounts opened by a bank funding a specific project for receiving/monitoring cash flows of that specific project, provided the borrower has not availed any CC/OD facility for that project							
8. Accounts of White Label ATM Operators and their agents, Cash-in-Transit (CIT) Companies/ Cash Replenishment Agencies (CRAs) for sourcing of currency							
9. Int	9. Inter-bank accounts						
10. Accounts of All India Financial Institutions (AIFIs), viz., EXIM Bank, NABARD, NHB, and SIDBI							
11. Accounts opened under specific instructions of Central Government and State Governments							
12. Accounts attached by orders of Central or State governments/regulatory body/Courts/investigating agencies etc. wherein the customer cannot undertake any discretionary debits							
	Name of Authorised Person/s Signature with seal of Authorised Person/s (to be signed as per Mode of Operation)						
			. 5				

*Signature

	_
5	
	٠.
	2
- 2	>
-	
Ļ	9
c	`
	ı
- 7	=
- 4	=
-	
-	-
7	<
_	-
- 7	7
=	=
_	ı
- 2	2
-	_
	_
-	2

Name o	f Authorised Person/s	Signa	ture with seal of Authorised Perso	n/s (to be signed as per Mode of Operation)			
2			*Signa	ture			
3			*Signa	ture			
4			*Signa	ture			
5			*Signa	ture			
11 CORDODATE INTERNET	T DANKING ENDOLMENT	(including Piz Pank)					
11. CORPORATE INTERNET *Username	*User Signature	*Contact Details		*#CIB Rights (Select as applicable)			
Username 1	(in Black ink with stamp)	Email ID		View access Transaction Access - Initiator (Maker) Transaction Access - Authorizer (Check Transaction Access - Dual (Maker & Che	. ,		
Username 2		Email ID		View access Transaction Access - Dual (Maker & Che Transaction Access - Initiator (Maker) Transaction Access - Authorizer (Check Transaction Access - Dual (Maker & Che	(er)		
Username 3		Email ID		View access Transaction Access - Initiator (Maker) Transaction Access - Authorizer (Check Transaction Access - Dual (Maker & Che			
Username 4		Email ID		☐ View access ☐ Transaction Access - Initiator (Maker) ☐ Transaction Access - Authorizer (Check ☐ Transaction Access - Dual (Maker & Che			
Mode of Operation for CIB			er Board Resolution (Please provide Bo	pard Resolution (BR) /Partnership Letter as applic	cable)		
Bulk debit type		Others Debit Multiple On	edit Single Debit-Multiple Cred				
operating & carrying out tra through its website/corpora Please note: • #All rights are provided at	ansactions including fur ate internet banking from t CIF level. ghts are to be provided, pl	nd transfers in all its account(s	Corporate User ID will be sent o Transactions initiated by Sole Du and debit will be processed inst		bank ation,		
o In case the Mode of Op	peration is singly, default lim	its are applicable mentioned below	Non-Financial transactions right: Certificate are provided by defau	s, such as Statement, Balance Certificate, Inte ult to the users.	erest		
Transactions		Limit	Financial transactions include Sc	reen Transfer, Bulk Upload, Cheque Book Req	uest,		
RBL to RBL own acco	ount transfers within RBL/NEFT/RTGS	Unlimited INR 5 Cr	Stop Cheque, Tax Payment, Bill Payments and DD request. • Loans and Term Deposits linked to respective users can be viewed by them. If any				
IMPS per day and per		INR 5 CI	· ·	s are opened after CIB registration, please pro			
There should be at least of	one unique Initiator and Au	thorizer as user or one Dual User.	*Please fill annexure if access	has to be restricted for certain users to spe	ecific		
	available only to checkers	UII CIB	accounts only.				
12 *FATCA/CRS DECLARA Details of ultimate benefic		litional FATCA & CRS information	n (please include other references	for completeness sake)			
Name of the Entity:	oor motouring aut		2. Customer ID:	completeness sure/			
3. Address of tax residence (including city, state, country and pin code):							
Country of Incorporation	on·		5. City of Incorporation:				
Country of incorporation: S. City of incorporation: S. City of incorporation: S. City of incorporation: S. City of incorporation:							
7. Issuing country for Ide	7. Issuing country for Identification document:						
8. *Entity Type for Reporting purpose: (Please Tick Any							
a) Financial Institution1 (If yes please fill PART A)							
b) Direct Reporting NFE (If yes please fill PART A) (A direct reporting NFE means a NFE that elects to report information about its direct or indirect substantial U.S. owners to the IRS)							
		ity3 (If yes please fill PART B.4					
e) Is the Entity an Ac	ctive Non-Financial Entit	:y4 (All Entity other than point N	ıo a,p,c & d)				

12	12 *FATCA/CRS DECLARATION (Contd)								
*Kindly seek advice from your Tax Consultant for selecting entity type.									
Please tick the applicable tax resident declaration: (Any one)									
_	Entity is a tax resident of India and not tax resident of any other country OR								
	Entity is a tax resident of the country/ies mentioned in the table below								
Plea	Please indicate all the country/ies in which the entity is a resident for tax purposes and the associated Tax ID Number below:								
	Country	Tax Identification Number	er% Ident	tification Type (TIN or (Other%, please specify)				
% In	% In case Tax Identification Number ("TIN") is not available, kindly provide functional equivalent.								
	mandatory to supply a TIN or functional equivalent in and attention	-	resident issues such i	dentifiers. If no TIN is y	et available or has not yet				
	n issued, please provide an explanation and attac use the Entity's Country of Incorporation/Tax res		fied IIS Person menti	on Entity's exemption	code here (Refer Table				
	tioned below):		1104 0.0.1 010011, 11101111	on Entry o oxomption	oodo noro (noror rabio				
The	Central Board of Direct Taxes has notified Rules	: 114F to 114H, as part of the Income-ta	ax Rules, 1962, which R	Rules require Indian fin	ancial institutions such as				
	Bank to seek additional personal, tax and benefic								
	es, information will have to be reported to tax at tutions such as withholding agents for the purp								
	ld there be any change in any information provi		-	* *	ion mereto.				
	u have any questions about your tax residency, p	• • • •		-	der, please include United				
	es in the foreign country information field along			•					
Cert	ification								
I hav	re understood the information requirements of t	his Form (read along with the FATCA/	CRS Instructions) and	hereby confirm that th	е				
infor	mation provided by me on this Form is true, cor	rect, and complete. I also confirm that	I have read and under	rstood the FATCA CRS					
Term	ns and Conditions and hereby accept the same.								
Nam	ne:	Designation:							
Date	<u>.</u> D D M M Y Y Y Y	Place:		Sig	nature				
	Exemption code for U.S. persons:			0.19	Hatoro				
	<u> </u>								
Cod		Sub-categor							
A	An organization exempt from tax under section		plan as defined in sec	tion 7701(a)(37)					
В	The United States or any of its agencies or in								
С	A state, the District of Columbia, a possession	·			- 11/70 1/- \/1\/:\				
D E	A corporation the stock of which is regularly		•						
F	A corporation that is a member of the same A dealer in securities, commodities, or deriv								
'	registered as such under the laws of the Uni		g notional principal c	ontracts, rotorcs, rorw	arus, and options/ that is				
G	A real estate investment trust	·							
Н	A regulated investment company as defined i	n section 851 or an entity registered at	all times during the ta	x year under the Investi	ment Company Act of 1940				
I	A common trust fund as defined in section 5	84(a)							
J	A bank as defined in section 581								
K	A broker								
L	A trust exempt from tax under section 664 or	described in section 4947(a)(1)							
М	A tax exempt trust under a section 403(b) pla	an or section 457(g) plan							
10	42 LICT OF DIDECTOR (NADTHERS / OFNIGR MANAGENENT REPOSSITE AUTHORS OF THE OR PROTECTOR REPORTS OF TRUE								
13. LIST OF DIRECTOR/PARTNERS/ SENIOR MANAGEMENT PERSON*/ TRUSTEE, AUTHORS, SETTLORS, PROTECTOR, BENEFICIARIES OF TRUST.									
Dota									
	Date: D D M M Y Y Y Y								
To Propeh Manager									
Bran	Branch Manager, Branch								
RBL Bank Limited									
Re: Opening ofaccount with Branch of RBL Bank Limited									
Dear	Dear Sir,								
This	This is with regards to opening an account of M/s having constitution as . Kindly find the List of directors/								
Part	ners/ Senior management* /trustees/ authors/s	settlors/protector (if any) /beneficiari	es for the above-ment	ioned account as belo	w:				
Sr#	Name		Relation (i.e. Director/Do		Designation (if any)				
			Senior management Per Settlors, protector (if an	son*/ Trustee, Authors, y), beneficiaries of Trust)					
			,						
H					[

40	-					NE TRUCT (0)			
		LIST OF DIRECTOR/PARTNERS/ SENIOR MANAGEME	NT PERSON*/ TRUSTEE, AUTHOR	· · · · · · · · · · · · · · · · · · ·					
Sr	#	Name		Senior management	r/Designated Partners/ Person*/ Trustee, Authors, f any), beneficiaries of Trust)	Designation (if any)			
Re	gar	rds,				,			
(Sig No • • • * S	Customer Name and Seal (Signature as per MOP) Note: The Table above should contain the following details as per the constitution of the organisation Private/Public Limited Company / One Person Company (OPC): In case of Company, names of senior management* and directors are mandatory. Partnership firm/Limited Liability Partnership: Name of all partners are mandatory. Trust: Names of the beneficiaries, trustees, settlor, protector (if any) and authors of the trust is required. Senior management refers to topmost executive management/ upper management i.e. individuals at the highest level of management of an organization who have the day to-day tasks of managing that organization.								
14.	P	PARTNERSHIP DECLARATION							
We We dis On und In C We inc pas acc joir We chac cor	Date: Delta Mark In Jacob Declaration Date: Delta Mark In Jacob Declaration We, the undersigned hereby declare that we are partners of the firm carrying on business in the name & style of M/s. Company Name) We, request you, unless further intimated to you in writing to the contrary to regard us as partners of the said firm, and honor our respective signatures behalf of the firm. We, further declare that all partners will be liable to you: ANYONE (not withstanding any change in the firm and/or its successors and assigns by any cause whatsoever or dis solutions thereof.) On any obligations which may be outstanding in the firm name in your books and until all such obligations are liquidated, We hereby undertake to get ourselves registered under The Indian Partnership Act (IPA), 1932 In case the firm registered as a firm under The Indian Partnership Act (IPA), 1932 a certified copy of the certificate of registration is enclosed. We request and authorize you, to honor operations and instructions under the signature(s) of the said partners of the firm in respect of the operations of the said account including through channels by the firm with the bank and all cheques, guarantee or other orders, which may be drawn or bills accepted or notes or negotiable instruments passed on the firm's behalf or receipts money owned by you to the firm and debit such cheques, guarantees, orders, bills, notes or negotiable instruments to the firm's account with you whether such account or accounts be for the time being in credit or overdrawn or may become overdrawn debit, in consideration of which we agree to be jointly and severally responsible for payment of the overdraft and interest. We hereby undertake that, in case of change of the constitution of the firm or the dissolution of the firm, we shall give sufficient notice in writing to the Bank of any such change in the constitution or dissolution, supported by necessary documentation. The documents and its contents submitted at the time of Account opening are true and correc								
Na	me				_				
		Signature (with stamp of the firm)	Partner		Part	ner			
15.	D	DECLARATION							
and fut Fac Bar of i the age are	I/We am/are residents of India. I/We, declare that the information furnished by me/us is true and correct. I/We, the undersigned have read and understood and agree to abide and be bound by all the provisions of the Terms & Conditions published on the bank's website www.rblbank.com governing the opening of all my/our accounts, present and future with RBL Bank and those relating to various services including but not limited to ATMs/Debit Card/Mobile Banking/Internet Banking/Phone Banking/Bill Payment Facility etc. I/We understand that the Bank may at its sole discretion discontinue any of the services completely or partially without any notice to me/us. I agree that the Bank may debit my account for service charges as applicable from time to time. I/We agree that if the premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by the Bank/Reserve Bank of India from time to time. I/We authorise the Bank or its agents to make references/enquiries as may be necessary and to exchange/share/part with any/all information with credit bureaus/statutory bodies/other agencies as may be deemed necessary or appropriate. I / We hereby confirm that the mobile number and email ID provided by me/us to open an account with RBL Bank is/ are not already registered with any other account held with RBL Bank. If any such account is found to exist, the new account may not be opened or freeze may be marked on the new account.								
rep	res	undertake to inform you of any changes in the details f seting, I/We are aware that I/We may be held liable for	it.	-		· · · · · ·			
acc	ou	nereby undertake to inform RBL Bank on any change in ont from one branch to another branch.							
ma	int	confirm and declare that we are not prohibited/ prever aining the accounts or to transact with RBL Bank in an	ny other way.						
act	I/ We, hereby acknowledge and affirm that I/we am/ are not bound by any non-disclosure agreement with a third party/ client preventing me/ us from disclosing any transaction and client details to RBL Bank and further agree to provide any necessary client information required by RBL Bank in accordance with applicable legal and regulatory requirements.								
dod bar I/W	For Debit Cards: I/We hereby authorize and give consent to the Bank to disclose, without notice to me/us, information furnished by me/us in application form(s)/related documents executed in relation to Account related services and products availed from the Bank, to the Bank's branches/subsidiaries/affiliates, Services Providers, other banks/financial institution, governmental or regulatory authorities or third parties for KYC information verification, or for other related purposes that the Bank may deem fit. I/We hereby expressly waive the privilege of privacy and privity of contract								
We	sh	e of any update in the KYC documents / information suall submit to the Bank the update of such documents with the submit to the Bank the update of such documents with the submit of the	within thirty (30) days of the update	to the documents.	·				
pur	po	hereby consent to uploading the required information se of verification of my identity and address. I underst PAN number etc.		•	•				
a.	5	RBL Bank, would like to use your personal details in the services or promotional offers that are offered by RBL below you either allow or disallow RBL Bank to contact	bank, on its own and in collaboration tyou through SMS, phone calls and	on or through tie-ups		·			

15.	DECLARATION (Contd)						
b.	tion/data provided by/related to me/us to the Group companies/Associates/Sowhom the Bank has entered/propose to enter into an arrangement for provision services offered by Bank.	soever, without any further specific consent or authorisation from me/us, the informa- ervice providers/Subsidiaries/Affiliates/Joint Ventures of RBL Bank/ any person with on of 'services/products' for the purpose of marketing/offering/selling any product/					
	Yes No, I do not consent to share, disclose, exchange, or use my information	tion/data.					
	There is no change in KYC of Authorized Signatories/Beneficial Owner/POA.						
	There is no change in existing status of KYC Information of the entity.	-					
	e agree, undertake and declare the following for Auto Sweep Facility (Money Max	-					
1. 2.	PAN is mandatory to avail sweep out / in facility. Fixed deposits are formed for d Sweep-in facility will be enabled by default on the Fixed Deposit(s) booked throu	**					
2. 3.		gle Fixed Deposit will be booked for the excess fund available in linked account at end					
٥.	of the day.	gre i ixed Deposit witt be booked for the excess ford available in thiked account at end					
4.	count of payment through ATM, cheque received in clearing/collection or by an from Savings/Current Account. The FDs so withdrawn shall cease to earn intere shall be paid as per extant RBI's directives/Bank's policy. Any shortfall in minimum						
5.	tracted rate at the time of creation of FD for the period the deposit has remaine	,					
6.	Fixed Deposit Advice will not be provided for the term deposit booked through S	weep-Out Facility.					
7. 8.	Loan/Overdraft Facility shall not be granted against the said FD.	Savings/Current account for deposits backed through Manay May Essility					
9.	Nomination: I/We authorize the Bank to consider Nominee registered in my/our I/We understand that Sweep-out facility cannot be availed in self-operated Mini						
10.	·	or account. The of maturity and monthly or quarterly interest payment options will not be available.					
11.	Survivorship clause: In the case of Fixed Deposits, Recurring/Smart Deposits bottion as 'Either or Survivor' or 'Former or Survivor' or 'Anyone or Survivor/s' and fowith a survivorship clause, in the event of death of one of the depositors, the ban survivor/s on request.	ooked through all channels including Sweep out Fixed Deposits, with a mode of opera- or premature liquidation of such deposits, I/we agree that in case of joint fixed deposit liks liability will be discharged by paying the Fixed Deposit proceeds prematurely to the					
12.	not sufficient for recovering the applicable TDS, the amount of TDS can be dedu						
13.	I/We understand that upon disabling of Auto Sweep facility, no new deposit will						
14.	. I/We understand that the Bank may change/alter/modify the applicable terms & conditions and the Account terms and conditions are available on RBL Bank website, nearest branch.						
15.	I / we authorize the bank to open Fixed deposit with an auto-renewal facility and to renew interest and principal both at the time of maturity under same period wit prevailing applicable interest rates.						
16.	I/We accept the general terms and conditions hosted on RBL Bank website for	· · · · · · · · · · · · · · · · · · ·					
Dec	Declaration under 'Foreign contribution (Regulation) Act, 2010 and Foreign Contribution (Regulation) Rules, 2011'						
	inform the bank in advance with sufficient notice OR	gn contribution from abroad and if in future we will be receiving the same then we will					
	sought for crediting the foreign contributions with the FCRA Account with copened specifically for such FCRA credits and I/we confirm that in the account	oution from abroad. Separate approval from ministry of home affairs (MHA) has been Bank which has been with RBL Bank					
	For opening 'Another FCRA Account', we shall submit approval from Ministry of H	lome Affairs (MHA) for our 'FCRA Account' held with SBI New Delhi Main branch & for ount' held with SBI New Delhi Main branch and 'Another FCRA Account', if opened, in					
2.	We certify that this is the only 'Another FCRA Account' being opened and we do no	ot hold any other 'Another FCRA Account'.					
		nt' opened with RBL Bank and all credits will come from 'FCRA Account' held with SBI nk, all credits will be either from 'FCRA Account' held with SBI New Delhi Main branch					
	We shall inform the Bank in case the application for registration/prior permission	is rejected by MHA in stipulated time.					
	We shall comply with applicable regulatory guidelines, laws and regulation; in Contribution (Regulation) Rules, 2011 or as applicable from time to time.	cluding but not limited to Foreign Contribution (Regulation) Act, 2010 and Foreign					
16.	*SIGNATURE OF AUTHORISED SIGNATORY/IES						
(Ple	ease do not sign this form if it is BLANK. Please ensure all relevant sections ar	nd columns are completely filled to your satisfaction and only then sign the form)					
	Authorised Signatory 1	Authorised Signatory 2					
	Signature of Authorised Signatory with stamp	Signature of Authorised Signatory with stamp					
N1	Date D D M M Y Y Y Y	Name Date D D M M Y Y Y Y					
Nan							
	Authorised Signatory 3	Authorised Signatory 4					
	Signature of Authorised Signatory with stamp	Signature of Authorised Signatory with stamp					
N1	Deta I D I D I M I M I V I V I V I V I	Nome Date In In I M I M I V I V I V I V I					
Nan	Date D Date D DATE	Name Date Date Date Date Date Date Date Dat					

17. BENEFICIAL OWNERSHIP DECLARATION									
Date: D D M M Y Y Y Y									
То									
	h Manager,								
		Branch							
RBL B	ank Limited								
Subjec	ct: Opening of	ассо	unt with			Branch of RE	BL Bank Limited		
Dear S									
	nereby confirm and declar				-	antralling avmora	hin interest i a he	dag avea	rabin/antitlamant
	The following natural persor of more than 10% (Compar								
	hrough voting rights, agre	· · · · · ·							
	There are no natural perso for partnership)/senior m								
t	pelow Table. Or		·	·		•			
	The following natural pers n the trust and individual							10 percei	nt or more interest
	*If you have ticked any o	-			-				
Sr#	Name of Benefici	al Owner*/s (BO)		of Birth/ M/YYYY)	-	on of BO (i.e. BO/1 r/Partners/ Senio			lding as per BO definition
				Y Y Y Y	Directo	i/raitileis/ Jeilic	ir reison etc./		definition
1.									
2.			D D M M	YYYY					
3.			D D M M	YYYY					
4.			D D M M	YYYY					
							Signature with Co	ompany st	amp
						Customer N	lame:		
	natory notes about Benef Jnlisted company: The be		e natural nerson(s) who whether	acting ald	nne or together o	r through one or r	more iurii	dical nerson has a
	controlling ownership inte	rest or who exercise	s control through	other means. Fo	or the purp	ose of this sub-cl	ause - Controlling	ownersh	nip interest" means
	ownership of or entitleme The directors or to control		•					•	
	or voting agreements.		•	0 ,		· ·			Ü
	Partnership firm: The ber ownership of/entitlement					one or together, o	or through one or	more ju	ridical person, has
	Jnincorporated association					son(s), who, wheth	ner acting alone or	togethe	r, or through one or
	nore juridical person, has	·							•
1	Senior Management Persolds the position of senior		•	fied under (a) or	(b) or (c) a	above, the benefic	cial owner is the r	elevant r	atural person who
	Frust: The identification o			entification of th	ne author o	of the trust, the t	rustee, the benefi	ciaries w	ith 10% percent or
	more interest in the trust	•	•	-			•		·
	One of the "officially valid	d documents" (OVD)	as per RBI guide	lines needs to b	e provided	as ID proof for th	ne beneficial own	ers (natu	ral persons)
	Aadhaar Drivii	ng License (non-expired) Passport (non-e	expired) Voter	ID Card	NREGA Job Ca	rd Letter from	National I	Population Register
18 *F	OR BANK USE ONLY								
	itution Partnership	HUF Societ	y Trust	PVT Ltd Pu	blic Ltd	LLP Othe	re		
	Details	*Document Name	*Doc ID No.	*Place of Issue					*locuing Authority
		Document Name	DUC ID NO.	Place of 1550		ate of Issue	Expiry Da	ie	*Issuing Authority
*Proof of preferred mailing address					DDN	M Y Y Y Y	D D M M Y	YYYY	
Proof of Registered Address				1 M Y Y Y Y	D D M M Y	YYY			
Proof of principal place of									
busine	ess								
*KYC I	 Details	*Document Name	*Doc ID No.	*Place of Issue	e *D	ate of Issue	Expiry Da	te	*Issuing Authority
	of Identity 1		-				D D M M Y	Y Y Y	<u> </u>
	of Identity 2					1 M Y Y Y Y Y	D D M M Y	Y Y Y	

О.
$\overline{}$
_
a
~
<
D.
2
`,`
÷
\neg
$\overline{}$
~
2
\Box
=
=
T
$\overline{}$
=
\circ
7
_

18. *FOR BANK USE ONLY (Contd)	
*Site Verification	
I confirm that I have visited the Preferred mailing/Communication address of the Entity and confirm that I have met Mr/ M . I hereby confirm the following details.	rs/Ms.
Identity Address Customer Business in line with the profile Fill up the form & Signature in my presence	
☐ Verification of copies with the original documents ☐ Lat & Long Location	
Date:	
Signature of Bank Official & bank seal Name of bank official: Emp ID *Lat: Mandatory	*Long: Mandatory
Sourcing Branch Code Sourcing Branch Code	
Savings Account 3 0 Current Account 4 0	
Prefix Preferred/R-KIT Account Number Prefix Preferred/R-KIT Account Number	ccount Number
Exports/Imports involved Yes No *Risk Categorization Should match with RRT checklist	□ L □ M □ H
Promo Code 1 *LC Code Sourcing Code *LG C	Code Lead Generator
Promo Code 2 Portfolio ID Portfolio ID	
*Primary Relationship Manager ID Secondary Relationship Manager ID PEP	CRPEP
*BSR Type of Organization	
*Funds Parked Branch code *Value Date Date Date Date Date Date Date Dat	
*Expected No. of Transactions Annually 1 <250 250 - 500 3 500 - 1000 4 1000 - 2500 5 >25	00
*Expected Transaction Amount - (in ₹)	
*Cash Deposits - Annual (in ₹) 1 0-5 Lakh 2 5-10 Lakh 3 10-25 Lakh 4 25-50 Lakh 5 50 Lakh-1 Cr. 6] 1-10 Cr. 8 >10 Cr.
*Cash Withdrawal - Annual (in ₹) 🚺 0-5 Lakh 🔃 5-10 Lakh 🔄 10-25 Lakh 👍 25-50 Lakh 📑 50 Lakh-1 Cr. 🖟	1-10 Cr. 8 >10 Cr.
FCY Inward - Annual (in USD) 1 0-5 Lakh 2 5-10 Lakh 3 10-25 Lakh 4 25-50 Lakh 5 50 Lakh-1 Cr.	1-5 Cr. 7 5-10 Cr. 8 >10 Cr.
FCY Outward - Annual (in USD) 🚺 0-5 Lakh 🙎 5-10 Lakh ᢃ 10-25 Lakh 4 25-50 Lakh 📑 50 Lakh-1 Cr. 🔞] 1-5 Cr.
(Mandatory in case Export/Import involved) *Domestic Inward (in ₹) 1 0-5 Lakh 2 5-10 Lakh 3 10-25 Lakh 4 25-50 Lakh 5 50 Lakh-1 Cr.	1-5 Cr. 7 5-10 Cr. 8 >10 Cr.
*Domestic Outward (in ₹)	
*Business Segment *Customer Se	
MIS Code.1 MIS Code.2 MIS Code.3 MIS Code.3 MIS Code.3	IS Code.4
MIS Code.5 MIS Code.6 MIS Code.7	
*Source of Income/Fund	ers Scheme Name
Checked by (Name of bank official) :	
Signature of Bank Official Emp ID	
- %	0 -
19. ACKNOWLEDGEMENT	
Received application for Saving Account Current Account Fixed Deposit	Ref No.
Initial Payment Details	
Initial Amount ₹	
Cash₹	
Cheque No Date D D M M Y Y Y Y Drawn on Ba	nk Branch
	: DD/PO/Cheque subject to clearance
Amount (Only for FD) Tenure Interest Rate	% p.a.
Name of Bank Official (Checked by) Please Quote your reference No. for any communication Signature of Bank Official & Bank Seal	Employee ID
	Date D D M M Y Y Y Y
Dedicated team of phone banking officers available 24X7 - Call us on: +91 22 6232 7777 Email us at : For Resident/Non Individual Customers: customercare@rblbank.com For Non Resident Customers: nribanking@rblbank.com	Website : www.rblbank.com

Login to Internet Banking:

www.rblbank.com and enjoy

easy access to your account

Debit Card :

the best

Best in class features & benefits

choose the one that suits you

Page 9 of 10

BizBank

Scan here to download the

- mobile banking app

latest version of RBL BizBank

SMS Banking: Type HELP & send to 9223366333 for all SMS Banking Enquiries





20. MOST IMPORTANT TERMS & CONDITIONS

Current & Savings Account

- On activation of the A/c customer may request for free personalised passbook and / or cheque book by visiting nearest branch. Customers will receive monthly E-Statements on registered Email ID. Physical statements are provided on customer's specific request. Cash withdrawals from Savings Account (subject to applicable limits) permitted using withdrawal slips accompanied by passbook and identification documents subject to applicable limits.
- Interest paid quarterly on daily closing balance at rates announced by the Bank from time to time. For current rates, please log on to www.rblbank.com
- All physical deliverables will be sent to 'Preferred Mailing Address' and digital deliverables on current registered Email ID or Mobile No.

 Bank provides Standing Instruction ('SI') facility for auto debit of accounts for payment to registered payees. Bank will not be held liable for failure to execute the SI for shortage of funds or for delays caused by third parties involved in performance of SI. Bank charges apply for below services at rates indicated in Schedule of Charges displayed on website and on Notice Board of Branches.
- Cash Deposits & withdrawals, Non-maintenance of minimum balance prescribed depending on category of accounts, SMS alerts, Remittances, A/c. closure charges etc. Debit Card is/will be, dispatched in an 'Inactive' status. To activate, you must first generate your PIN. ATM and POS transactions within India are activated by default. The transaction rights/limits of the Debit Card can be enabled/disabled/modified, through following options Internet banking/Mobile banking/IVR/Branch.
- Debit card Fee will be applicable as per schedule of charges on www.rblbank.com >> Service Charges & Fees.

 Accounts with no customer induced transactions (viz. financial, non-financial or KYC updation) for continuous period of 24 months will be categorised as 'Dormant/Inoperative Account'. No cash deposition or withdrawal through any mode will be permitted until the customer visits the branch and tenders required document for activation of the account.
- Deposits in bank accounts are insured with DICGC up to amounts stipulated by regulations from time to time. For details on deposit insurance, please log onto www.dicgc.org.in
 Bank has Grievance Redressal policy displayed under 'Customer Services on Banks website www.rlbank.com for redressal of customer grievances. To register your grievance, please visit your nearest branch or log on to Customer Services on Banks website www.rblbank.com or call +91 22 6232 7777
- Bank will contact the customer for important account related information irrespective of being registered for DNC. (eg. Unauthorized transactions, etc.)

- Interest at contracted rate is compounded quarterly. Year for the purpose of interest computation is taken as 365 days. On pre-mature closure of deposit including full or partial withdrawal, the interest will be paid at the rate applicable for the period for which the FD has actually remained with the bank, subject to a penalty of 1%. No interest payable if deposit remained with Bank for a duration less than minimum tenure, as per RBI guidelines.
- E-Fixed Deposit advices will be sent to the current registered email ID. Instructions for renewal, closure of deposits (fully or partial) may be given up to 2 days prior to maturity date. Upon auto renewal, the maturity value less TDS if any shall be renewed from maturity date. Submit fresh 15G/H in April for every financial year & for every new deposit booked thereafter. Form
- The tenure of Tax Saver Deposit is 5 Year (Lock-in). Premature withdrawal or loan or any other liens are not permitted.

 Interest paid will be subject to Tax Deduction at Source (TDS) at applicable rates. Applications without PAN No. will attract higher TDS as per Income Tax rules.
- Upon pre-mature closure of deposit, excess interest paid will be recovered from the principal amount. Tax deducted at source and deposited with the government will not be refunded. Customers can claim a refund from the Income Tax authorities.

For detailed terms and condition, please visit www.rblbank.com >> Others >> Most Important Terms and Condition