



Investment Services Account (ISA) Form

I hereby request you to open ISA based on the following information:

For Individual Non Individual

Page: Down Myyyyy

(Please fill the form in BLOCK LETTERS only. Tick boxes as applicable. THIS IS A MACHINE READABLE FORM AND WILL PASS THROUGH A SCANNER)

* Mandatory Fields					
#CKYC Number					
*Application Type					
*Capacity of Customer 1 Individual 2 Auth. Signatory 3 Guardian 4 OthersPlease Specify # I confirm that address in Bank records will be updated as per CKYC records.					
(A). DETAILS OF APPLICANT(S):					
Name/s of Applicants and Relation/Authorized Signatory (Individual/Non Individual) Title Mr. Ms. Dr. Others					
1st Holder Name - - - - - - - - - - - - -					
(as on Account)					
*Father's Name/ Spouse Name					
Full Name F R S T					
2 nd Holder Name F I R S T					
*Father's Name/					
Spouse Name					
*Father's Name/					
Spouse Name (with 1st Holder)					
*PAN					
Aadhar No					
(1 st Holder) (2 nd Holder)					
Customer Id Customer Id Customer Id Customer Id Customer Id (2 rd Holder) Customer Id (3 rd Holder)					
*Religion 1 Hindu 2 Muslim 3 Christian 4 Sikh 5 Zoroastrian 6 Jain 7 Others					
*Category 1 SC 2 ST 3 OBC 4 Not Applicable 5 Others Minor 1 Yes 2 No					
Martial Status Married Unmarried Others					
Mother's Name F R S T					
Maiden Name (if any) F R S T					
*Date of Birth DDMMYYYY Gender Male Female Others Nationality Indian Others(specify)					
Place of Birth Country of birth					
(1st for primary Holder) Status: 1 Resident 2 NRE 3 NRO 4 Individual HUF / AOP 5 On Behalf Of Minor 8 Authorized signatory 7 Sole Proprietorship					
(For 1"Holder)					
■ Public Limited ■ Private Limited ■ Mandate holder/POA ■ Trust ■ Body Corporate ■ Registered Society ■ Others					
*Mode of Holding Singly Jointly Either or Survivor As per Board Resolution Others					
(No Debit Card will be issued) Account to be operated through Power of Attorney: Yes (If Yes, please provide copy of POA) No					
PEP Status Politically exposed person Related to politically exposed person Not applicable					
(Please tick) (Only for Non Individual)					
*Name of Organisation:					
Customer Id PAN/GIR No. PAN/GIR No.					
*Entity Detail					
*Entity Detail Date of Incorporation D D M M Y Y Y Y Place of Incorporation Country of Incorporation					
*Entity Detail Date of Incorporation D D M M Y Y Y Y Place of Incorporation Country of Incorporation *Constitution 1 Partnership 2 Private Ltd 3 Sole Proprietorship 4 Public Ltd 5 Public Sector 6 HUF 7 Religious Trust					
*Entity Detail Date of Incorporation D D M M Y Y Y Y Place of Incorporation Country of Incorporation *Constitution Partnership Private Ltd Sole Proprietorship Public Ltd Public Sector HUF Religious Trust Sole Proprietorship Statutory Body LLP Liquidator Artificial Juridicial Person Public Charitable Trust Private Trust/Trust Created by Will Others					
*Entity Detail Date of Incorporation D D M M Y Y Y Place of Incorporation Country of Incorporation *Constitution Partnership Private Ltd Sole Proprietorship Public Ltd Public Sector HUF Religious Trust Club Unlisted Company Society AOP/BOI Statutory Body LLP Liquidator Artificial Juridicial Person Public charitable Trust Private Trust/Trust Created by Will Others *Annual Turnover 0 - 5 Lakh 2 5 - 10 Lakh 10 - 25 Lakh 25 Lakh - 1 Cr. 1 - 5 Cr. 5 - 50 Cr. 5 - 50 Cr. 5 - 50 Cr. 5 - 100 Cr.					
*Entity Detail Date of Incorporation D D M M Y Y Y Place of Incorporation Country of Incorporation *Constitution Partnership Private Ltd Sole Proprietorship Public Ltd Public Sector HUF Religious Trust Club Unlisted Company Society AOP/BOI Statutory Body LLP Liquidator Artificial Juridicial Person Public charitable Trust Private Trust/Trust Created by Will Others *Annual Turnover 0 - 5 Lakh 5 - 10 Lakh 10 - 25 Lakh 25 Lakh - 1 Cr. 1 - 5 Cr. 5 - 50 Cr. 50 - 100 Cr. 50 - 100 Cr. (Avg. income for corp.)					
*Entity Detail Date of Incorporation D M M Y Y Y Place of Incorporation Country of Incorporation *Constitution Partnership Private Ltd Sole Proprietorship Public Ltd Public Sector HUF Religious Trust By Club Dynlisted Company Society AOP/BOI Statutory Body LLP Liquidator Artificial Juridicial Person Public Charitable Trust Private Trust/Trust Created by Will Solthers If "others" fill as per Bank's KYC policy *Annual Turnover O-5 Lakh Soletakh					
*Entity Detail Date of Incorporation D D M M Y Y Y Y Place of Incorporation Country of Incorporation *Constitution Partnership Private Ltd Sole Proprietorship Public Ltd Public Sector HUF Religious Trust By Club By Unlisted Company Society AOP/BOI Statutory Body LLP Liquidator Artificial Juridicial Person Public charitable Trust Private Trust/Trust Created by Will Solthers #Annual Turnover O-5 Lakh Soletakh So					
*Entity Detail Date of Incorporation D M M Y Y Y Place of Incorporation Country of Incorporation *Constitution 1 Partnership Private Ltd Sole Proprietorship Public Ltd Private Company Society APPRIVATE APPRIVATE Created by Will Others Quality Of Public Charitable Trust Private Trust/Trust Created by Will Others Tothers fill as per Bank's KYC policy					
*Entity Detail Date of Incorporation D D M M V V V Place of Incorporation Country of Incorporation *Constitution 1 Partnership 2 Private Ltd 3 Sole Proprietorship 4 Public Ltd 5 Public Sector 6 HUF 7 Religious Trust 8 Club 9 Unlisted Company 9 Society 1 AOP/BOI 1 Statutory Body 12 LLP 12 Liquidator 14 Artificial Juridicial Person 1 Public charitable Trust 1 Private Trust/Trust Created by Will 1 Others *Annual Turnover 1 0 - 5 Lakh 2 5 - 10 Lakh 3 10 - 25 Lakh 4 25 Lakh - 1 Cr. 5 1 - 5 Cr. 6 5 - 50 Cr. 7 50 - 100 Cr. *(Avg. Income for corp.) *(B). ADDRESS DETAILS Permanent Address Proof of Address - YES / NO (Strike off whichever is not applicable) *Address Type Residential Business Registered Office *Address Line 1					
*Entity Detail Date of Incorporation D D M W Y Y Y Place of Incorporation Country of Incorporation *Constitution 1 Partnership 2 Private Ltd 3 Sole Proprietorship 4 Public Ltd 5 Public Sector 6 HUF 7 Religious Trust © Club © Unlisted Company © Society 1 AOP/BOI 1 Statutory Body 1 LLP 1 Liquidator 4 Artificial Juridicial Person 1 Public charitable Trust 5 Private Trust/Trust Created by Will 6 Others *Annual Turnover 1 0 - 5 Lakh 2 5 - 10 Lakh 3 10 - 25 Lakh 4 25 Lakh - 1 Cr. 5 1 - 5 Cr. 6 5 - 50 Cr. 7 50 - 100 Cr. (Avg. income for corp.) *(B). ADDRESS DETAILS Permanent Address Proof of Address - YES / NO (Strike off whichever is not applicable) *Address Type Residential Business Registered Office					



	Proof of Address - YES / NO (Strike off whichever is not applicable)
*Address Type Residential	☐ Business ☐ Registered Office
*Address Line 1	
Address Line 2	
Address Line 3	
*State	*Country *Pin Code
Mailing Address	Proof of Address - YES / NO (Strike off whichever is not applicable)
*Address Type Residential	☐ Business ☐ Registered Office
*Address Line 1	
Address Line 2	
Address Line 3	
*State	*Country *Pin Code
	re Applicant is Resident Outside India for Tax purposes*
*Address Type Residential	☐ Business ☐ Registered Office
*Address Line 1	
Address Line 2	
Address Line 3	
*State	
All communications will be sent on mob	oile no / email id.
Contact Details	
Office Country Code	STD Code Phone No Mobile
Fax Country Code	STD Code Fax No.
Residence Country Code	STD Code Phone No
Email ID (For e-statement & e-alerts)	
*(C). OTHER DETAILS	
*Educational Qualification 1 Undergrad	
*Employment Type Salaried Sel	f-employed 3 Retired 4 Housewife 5 Politician 6 Student 7 Others
*Occupation	Public Sector 3 Govt. Service 4 Service 5 Doctor 6 Business 7 Professional
Agriculturist	Retired 10 Housewife 11 Student 10 Forey Dealer 13 Others
If Agriculturist	2 Below 2.5 Acres of Land 3 2.5 to 5 Acres of Land 4 Above 5 Acres of Land
Busines	ss Income 3 Gift 4 Ancestral property 5 Rental Income 6 Prize Money 7 Donation 8 Others. (Please specify)
Know Your Customer (KYC) Documents	
*Proof of Identity Passport Vo	eter ID Card
1 1001 of facility	REGA Job Card Others(Please specify)
Document Type	
*Document Identification	on Number
Document Issue Date	DDMMYYYY *Document Expiry Date DDMMYYYY
	Mandatory only for Passport and Driving Licence
*Proof of Address Passport Vo	eter ID Card Driving Licence
☐ UID (Aadhar) ☐ NF	REGA Job Card Others(Please specify)
Document Type	
*Document Identification	on Number
Document Issue Date	DDMMYYYY *Document Expiry Date DDMMYYYY
	Mandatory only for Passport and Driving Licence
Non Individual Investors involved/Providing	
Foreign Exchange/Money Changer Serv	
Type of Company Partnership 2 P (other then Salaried)	Private Ltd Proprietorship Public Ltd Public Sector Others If "others" fill as per Bank's KYC policy
(Self employed Businessmen)	onstruction 3 NBFC 4 Non Profit Organization 5 Micro Enterprises 6 Others If "others" fill as per Bank's KYC policy
In case of Business or Profession, indicate the details (in	cluding nature of goods and services dealt in)
*Gross Annual Income 📋 Below 1 Lakh 🔼 1 Or	-5 Lakh 3 5 - 10 Lakh 4 10 - 25 Lakh 5 25 Lakh - 1 Crore 6 1 - 5 Crore 7 5 - 10 Crore 8 > 10 Crore
Networth in Rs.	as on DDMMYYYY



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Are you / is tl	<mark>icable for All Holders</mark> he entity a resident in any co			Yes N		
	indicate all countries, in which					
Sr. No.	Country of Tax R	Residency	Tax Identifi	cation Number*	Identification	on Type
1.						
2.						
3.						
	dentification Number is not avai					
	ntity's country of incorporation/ to	ax residence is U.S. but ent	tity is not a specified l	J.S. person, mention the	entities exemption code in the	box L
*Identity Do	sident Individual) ocument					
Passport Nu		Expir	y Date DD	лмүүүү	Issue Date	MMYYYY
Place of Issu	ue L					
Visa type	Type of Visa	Temporary	Long Term	Work Stu	dent Immigrant	Dependent
Residence P	Permit Resident Pern	nit Yes	No Vis	sa/Residence permit		YYY
(Not applicable :	tor PiOs) etails For Minor (Mandatory o	nly if applicant is minor)	(in	case of temporary visa, fill in	declaration)	
Name of Pare	nt/Guardian			Customer ID		
I here by decla	are that the date of birth of the m	ninor, who is my RELAT	minor in all transaction	MMYYYY and I am his	/her natural or lawful guardian	appointed by the court
	mnify RBL Bank against all clain					
*Nomination	n I/We wish to make a nom	ination for above accor	unt Yes No.		Guar	dian's Signature
Name of the	Nominee	Relationship with the app	licant Date of Birth	· '	minee is a minor	
1.				Name an	d address of the Guardian	Relationship with the Guardian
2.				Name an	d address of the Guardian	Relationship with the Guardian
3.				Name an	d address of the Guardian	Relationship with
<u> </u>				100%		the Guardian
			L	10070		
1 st Holder/	/Signatory	2 nd Ho	older/Signatory	-	3 rd F	Holder/Signatory
Signature of	f witness		Si	gnature of witness		
Date:						
purchase, redemp the transactions of purchase of invest of debit / credit of I/We hereby state will not raise any deliver any units instructions / mar Account will not be Declaration: I/We mentioned herein have understood is alse and purchas schedule of charg Asset Manageme particulars Turnisi instruction given in pursuant to the tesponsibility. I/W terms and conditi Distributor for Murcredit bureaus / su mutual funds bein I/We may also be Disclaimers: Invel. Information Memiliability or responsi	orise RBL Bank to register me/us for awa otion, change from online to offline and bronducted online by me/us. I / We author them the products. I / We understand and a my / our account for the redemption, swe that all the acts, deeds and things done objections to the bank acting on such in purchased or delay of any company /endate authority is subject to the terms at closed till the time all my investment he enerby appoint RBL Bank Limited as and as updated on the website from the information requirements pertaining sea and all other acts done by the Bank else/fees. Any changes in the schedule of nt Company fees. I / We have read, unde hed above. I / We further agree that are to you to transact business on my/our erms and conditions would be as per the shall execute and deliver to the Bank cons of the Bank's Investment Services tual Funds and as a referral party for oth tatutory bodies / other agencies as marging sold by RBL Bank at the website of RB required to provide information to any in stment products are subject to market rorandum(s)/Scheme Investment Docur sibility to any person for any direct, indire	vice versa. I am / we are aware abo prize RBL Bank Ltd to link all my exi agree that the account mentioned ittch, receipt of dividends or any suce by the Bank based on such instrustructions. I / We agree that and to titles to make payment for any und conditions as specified on the Boldings are either redeemed or tran my/our agent to purchase and rene to time. I / We agree that the Bang in FATCA, CRS, UBO and addition, for me/us pursuant to the terms charges shall be intimated to me/rstood and agree the Terms and Cc y false/ misleading information go behalf shall be in due conformity be provisions of the Income Tax Account. I / We shall do an indeper products. I / We authorize the Bey be deemed necessary or appropuls attutions would sufficiently situational will stitutions would all stitutions used as well as the stitutions under the second content of the content of the second content of th	ut the risk associated with isting Bank account mainta at the time of creating the chacts for Mutual Fund unit citions shall be binding on understand not to hold the inits surrendered and shall asnk's Website (www.rblbar sefred to physical form medeem units of mutual fund k may at its sole discretion all KYC requirements and hand conditions shall be at us by email communication proditions as mentioned her with the applicable laws at the state of the and conditions as mentioned her in the septiment of the and conditions the septiment of the and conditions as pecified in endert assessment of the ank or its agents to make re raite. The term "RBL Bank" be available with soft ensuling the relations to the soft ensuling the septiment of the septiment	giving online instruction and heined by me / us to the Investme in line folio will be used to receive is in pursuance of the instruction he / us. I / We the second and the Bank liable for any loss or dam I keep the Bank harmless from the wearth of the wary the terms and conditions of ereby confirm that the information or or on the website. I / We agree: ein and as updated on the website. I we agree in an ein or of the them of any of the time of the or of the Bank for compliance or or the Bank for compliance or or the Bank and shall mean RBL in managers of the Bank and control or or or the Bank and control or or or or dependent of the Bank and control or or or or or or the Bank and control or or or or or or the Bank and control or	reby indemnify the Bank and / or its agint Services Account and to transfer fulle the funds in any form and manner inc ns given by me / us from time to time. If holders irrevocably constitute the fiage caused by reason of failure or del any claim in respect thereof. I/ We a ame. I/ We agree that the Bank A/c lin instructed by me/us from time to time withdraw any of the facilities provided in provided by me/us from time to time withdraw any of the facilities provided in provided by me/us on this form are sideration thereof. I/We agree to pay and understand that the Bank's Charge size I/We undertake to inform the Bank and the modernament of the carry tax implication arising out of decaying the control of the carry and understand that I are at any and all be to time strong of the control of the carry and to exchange / share/ pa Bank Limited. I agree that we will be did no be produced on demand.	ents from any loss arising out of nds in any form and manner for cluding but not limited to by way rst holder as my/our agent and ay of any company / entities to gree and understand that the ked to the Investment Services e, on the terms and conditions therein from time to time. I/ We a true, correct and complete. All charges/fees as per the Bank's s/ fees can be in addition to the charges fees as per the Bank's s/ fees can be in addition to the ination. I/ We declare that any any transactions entered in to tax liability will be my/our sole initiy and severally bound by the ffers Investment products as a rt with any / all information with sclosed all commissions on the on thereto.
(5).11101	OTIAL TIO.	ſ		7		
Sign across I Signature(s) Mentioned o		Seal wherever applicab	Sign across Photo			Sign across Photo
1 st Holder/	(Signatory		2 nd Holder/Signato	ry	3 rd F	Holder/Signatory
Name:		Name:			Name:	
					Date: Place:	
Place:		Place			Place	3



2.What is your total Investible Surplus

Risk Profiler

At RBL Bank, it is essential to have a clear understanding of your background & financial situation to provide you with Investment product in the most effective way. This may include understanding your personal data such as finances & wealth, family history as well as your investment horizon and appetite for risk. In order to assist you in this direction, please fill-in this risk-profiling questionnaire. By answering these questions, your investment risk profile can be developed. This profile forms the basis for us to provide suitable portfolios which matches with your background, risk profile and investment horizon.

investment horizon.
Please Note: Risk Profiler is optional for Non Individuals
Q 1: Which age range do you fall in? (Tick wherever is applicable)
a Above 60
b Between 50 and 59
© Between 40 and 49
d Between 30 and 39
e Below 30
Q 2: How would you describe your present income?
a More than sufficient to cover my living expenses
b Sufficient to cover my living expenses
© Not sufficient to cover my living expenses
Q 3: Your present job or business is:
a is not dependable
b is relatively secure
© is secure
d doesn't matter as you already have enough wealth
e doesn't matter as you can easily find an equally good new Job/Career
Q 4: Normally, what percentage of your monthly household income could be available for investment or savings?
a 0%
b Between > 0% and 10%
© Between > 10% and 25%
d Between > 25% and 50%
e Over 50%
Q 5: I plan to begin withdrawing money from my investments within:
a Less than 3 years
b 3-5 years
6-10 years
d More than 10 years
Q 6: What is the main reason for you investing in the financial market?
a I depend on my investments to supplement my cash flow
l depend on my investment to supplement my future income
I want to save for the "Emergency"
I want to protect the value of my capital
I want to grow my capital
Q 7: How good is your knowledge of finance & capital markets?
a I am an expert in the field of finance & markets
I am a proficient in finance & markets
I have average knowledge in finance & markets as I keep updated myself updated about the developments through newspapers, journals, media etc.
d Limited to knowing things like how the stock market or certain select scripts are moving
No knowledge
Q 8: How would a sharp drop in your investments affect you?
a Very much
b I would be disappointed
© Little bit as you are aware of market volatility
d it would not affect me
Net worth & Investment Details
1.What is your current Net worth (financial assets)



Asset Allocation Scoring

Scoring to the various questions as per the table given below:

Question & Options	Q1	Q2	Q3	Q4	Q5	Q6	Ω7	Q8
a)	10	25	10	10	40	10	40	5
b)	20	15	15	20	30	15	30	10
c)	25	10	25	25	20	25	20	20
d)	35		35	35	15	30	10	25
e)	45		45	45		40	5	

Scoring Results:	
Risk Profile	Points range
Conservative	80-150
Balanced	151-240
Aggressive	240+

I agree that though I have been profiled Conservative/Balanced/Aggressive but I would like to make investments as per the <u>Conservative/Balanced/Aggressive</u> profile. The Risk Profile, Asset allocation and scheme selection are purely done to assess my risk appetite and I agree that I will take independent decisions irrespective of the Risk Profile and the Bank will not be liable for allocating or maintaining allocation of funds as per Asset Allocation.

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With Company Seal Wherever applicable

Signature Verified BY (BCSM / BOM):

Customer Segment

1st Holder/Signatory 2nd Holder/Signatory 3rd Holder/Signatory
Suggested Asset Allocation (Depictive)

Asset Class	Conservative	Balanced	Aggressive
Equities	25%	45%	65%
Fixed Income	65%	40%	15%
Money Market/Liquid	5%	5%	5%
Alternative Investments	5%	10%	15%
Total	100%	100%	100%

For Bank Use Only Certified Copies **Document Received** Investment Account No KYC VERIFICATION CARRIED OUT BY Date: Emp. Name Emp. Code Emp. Designation Emp. Branch in person. I hereby confirm the identity and address. I have met Mr. / Ms. The form has been filled and signed in my presence. The original documents have been verified by me. Joint Holders Yes No Name of Joint Holders Branch Code: Checked By:

Emp. ID

Form Received Date:

Dispatch Date: D