AXIS BANK

Account Opening Form–Non-individual

Current/Savings (TASC/Govt.) /Cash Credit/Overdraft

Form Type CA002

Please fill the form in BLOCK LETTERS only. Fields marked * (star) are MANDATORY

*Application Date

☐ Current ☐ Savings ☐ Cash Credit ☐ Overdraft ☐ EEFC **Currency:** ☐ INR ☐ USD ☐ GBP ☐ JPY ☐ EURO ☐ Other_____

Applicant Details

*Existing CIF ID ☐☐ If Yes, CIF ID Existing CKYC

*Entity Name

Account Name: *Same as Entity Name ☐ Yes ☐ No *(if No, please fill the details)*

COMMUNICATION/LOCAL ADDRESS

*The property that is situated in the communication address registered with the Bank shall only considered for coverage under the Fire & Burglary insurance on **Business Supreme Debit Card**. For updating the communication address, the customer needs to apply for the same with the Bank with relevant address proof. The insurance shall be subject to the terms and conditions as prescribed by the insurance company from time to time.*

*Line1

*Line2

Landmark *City

*Pincode *State *Country

REGISTERED / RESIDENCE ADDRESS

Same as Communication / Local Address ☐ Yes ☐ No *(if no, please fill the detail below)*

*Line1

*Line2

Landmark *City

*Pincode *State *Country

*BUSINESS DETAILS (all details are mandatory)

Date of Incorporation Date of Commencement of Business Country of Incorporation

Registration No. /CIN Place/City of Incorporation

PAN OR ☐ Form 97 & Form 49A #Occupation Code

Copy of PAN card to be submitted within 30 days of account opening

UIN

Applicable for Liason/Branch Office

 # To be filled by branch

*Constitution and GST No. (If Available) of the Entity

☐ Proprietorship ☐ Partnership ☐ Limited Liability Partnership ☐ Public Limited Company ☐ Private Limited Company ☐ One Person Company ☐ Societies ☐ State Govt.

☐ Central Govt. ☐ Local Govt. ☐ Trust ☐ Govt. ☐ Charitable trust ☐ Section25 Companies ☐ Association ☐ University ☐ Others (specify)_____

GST No. *(This GST number will be updated for tax invoicing purpose. In case of multiple GST numbers, please get the same updated separately post account opening)*

CONTACT DETAILS

*Mobile No. *Tel No. - Tel No. mandatory if Mobile No. not provided

*Email Id

CHANNEL FACILITITES

Sole Proprietorship Accounts: ☑ Mobile Banking ☑ Phone Banking ☑ Retail Internet Banking [For Corporate Internet Banking (CIB), please fill separate form]

*Account Statement Option *(Monthly)*: E-Statement *(standard option if email id provided)* OR ☐ Printed Statement *Cheque-book facility ☐☐

☑ SMS Alert Facility *(Daily Balance Alerts & Transactional Alerts will be activated by default on the mobile number provided above for only eligible scheme codes. Bank Staff can refer the list of eligible scheme codes on WBP Academy portal)*

*Account Operating Instruction

Mode of Operation: ☐ Singly ☐ Any one ☐ Jointly by all ☐ Proprietor ☐ Any One Partner ☐ As Per board resolution ☐ Others _____

Initial Payment Details

Amount (in figures) Mode of payment: ☐ Cash *(Please deposit only at Axis Bank counters)*

☐ Cheque No. Date Account Type: Current ☐ Savings ☐ Cash Credit/Overdraft ☐

☐ Debit my/our/ A/C No. Tran ID_____ Date

*Bank Use

Insta ☐ Non-Insta ☐ *Scheme Code Account to be opened at_____ Sol ID AOF Sent by (Branch Sol ID)

Insta Sticker

Account No.

CASA Non-Individual AOF + FATCA + CIB/03-10-26/Ver-3.7/2728286

*Profile Sheet

1. *Type of request : ☐ New ☐ Update of existing Entity Profile
2. *Nature of Business : ☐ Manufacturing ☐ Service Provider ☐ Stock Broker ☐ Real Estate ☐ Trading (Retails/Wholesale) ☐ Transport
   ☐ Education ☐ Trust ☐ NGO ☐ Bullion ☐ Regulatory ☐ Other (specify)_____
3. *Annual Turnover of Entity (last FY) ☐ <5cr ☐ 5-25Cr ☐ 25-50Cr ☐ 50-100Cr ☐ 100-250Cr ☐ 250-500Cr ☐ 500-750Cr ☐ >750Cr
4. *Expected Turnover of Entity (current FY) ☐ <5cr ☐ 5-25Cr ☐ 25-50Cr ☐ 50-100Cr ☐ 100-250Cr ☐ 250-500Cr ☐ 500-750Cr ☐ >750Cr
5. *Networth ☐ <5cr ☐ 5-25Cr ☐ 25-50Cr ☐ 50-100Cr ☐ 100-250Cr ☐ 250-500Cr ☐ 500-750Cr ☐ >750Cr
6. *Net Profit (last FY) ☐ <5cr ☐ 5-25Cr ☐ 25-50Cr ☐ 50-100Cr ☐ 100-250Cr ☐ 250-500Cr ☐ 500-750Cr ☐ >750Cr
7. *Source of funds: ☐ Business Income ☐ Donation/Grant ☐ From Group Company ☐ Equity Investment ☐ Other (specify)_____
8. *Number of years in business ☐☐☐
9. *Principal Place of Operation: _____
10. Whether involved in ☐ Import ☐ Export
11. Import Export Code (IEC) No.: ☐☐☐☐☐☐☐☐☐☐
12 *End use of funds _____
13. Group Company (if applicable):
14. *Annual Turnover (in Rs.) ☐ (Please enter numeric values only)

Name of the Group Company (ies)	Location	Nature of Business	Bank Details

*Existing Banking Relationships (Credit Facility Details)

I/We hereby declare that I/We enjoy credit facility ☐☐

If yes, ☐ Axis Bank ☐ Any other Bank, please fill details below

Name of the Bank	Address	Borrowed Amount
1		
2		
3		
4		
5		

*KYC of the Entity

(Applicable for FCRA accounts only) : MHA License Issuance/Renewal Date ☐☐☐☐☐☐☐☐ MHA License Expiry Date ☐☐☐☐☐☐☐☐

MHA Regd. No. ☐☐☐☐☐☐☐☐☐☐☐☐ Existing FCRA A/c ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

*^Nomination Form (DA1) – Applicable only for Sole Proprietorship

☐ # I wish to nominate

Print Nominee Name ☐☐

☐ # I don't wish to nominate because :

- ☐ I wish to nominate later, since I do not have the details of nominee now
- ☐ I do not wish to nominate anyone
- ☐ Personal reasons (Others)

*Upload the Nomination DA1 form separately if option "I wish to Nominate" is selected.

*Purpose of Account opening

☐ Branch Expense Management ☐ Business Expansion/Unit Account ☐ Collection Account ☐ Escrow Arrangement/Internal/Non-Operative Account like (IPO/Warrant/CMS etc.)

☐ Multiple Projects at various locations ☐ Payment Account ☐ Real Estate Developers (RERA) ☐ EEFC Multiple Currency Account

**Strike out if nominee is not a minor. ## In case of thumb impression, nomination to be filled in as an annexure*
 # Signature of the Proprietor is mandatory ^Same ink to be used for filling nomination details

CASO2

Personal Details (Authorised Signatory/Partner/Proprietor/Director/POA/LOA/Trustee/Beneficiaries/Senior Management/Guarantor)

*Role Type (Tick any one) ☐ Authorized Signatory ☐ POA ☐ LOA CIB Role (Tick any one if CIB Role Required) { ☐ Initiator ☐ Viewer ☐ Approver ☐ Initiator & Approver

*Relation Person Type: (Tick any one) ☐ Proprietor ☐ Director ☐ Promoter ☐ Trustee ☐ Partner ☐ Guarantor ☐ None of these

☐ Beneficial Owner If yes, provide [ ] OR ☐ Senior Management

Beneficial Owner is the person holding more than 10% share capital in case of company or more than 15% in case of Association/BOI/Society or 10% and above in case of Trust or more than 10% in case of Partnership firm/LLP. Beneficial Ownership details need not be provided if the entity is a 'Listed Company' or a 'Majorly owned subsidiary of a listed company'.

Existing CIF ID ☐☐ If Yes, CIF ID [ ] Existing CKYC [ ]

*Name [ ] [ ] [ ] [ ]

Maiden name (if any) [ ] [ ] [ ] [ ]

*Mother's Name [ ] [ ] [ ] [ ]

*Father's Name [ ] [ ] [ ] [ ]

*DOB/DOI (DOI is for HUF only) [ ] *Gender ☐ Male ☐ Female ☐ Third Gender *Nationality [ ]

*Place/City of Birth [ ] *Country of Birth [ ]

*PAN [ ] OR ☐ FORM 97 & PAN Acknowledgment No. [ ]

PAN Acknowledgment Date [ ] (Mandatory if PAN Acknowledgment No. is provided) *Marital Status: ☐ Married ☐ Unmarried ☐ Others

*Designation [ ] #Occupation Code [ ] #To be filled by branch

*Resident Status ☐ Resident Indian(01) ☐ NRI(02) ☐ HUF(03) ☐ OCI(17) ☐ PIO(18) ☐ Foreign National - Non PIO(19)

*Occupation Type (Tick any one)
- ☐ S-Service^ [☐ Private Sector ☐ Public Sector ☐ Government Sector] ^Occupation sub-type to be selected for S-Service & O-Others
- ☐ O-Others^ [☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student] ☐ B-Business ☐ X-Not Categorised

*Mobile No [ ] *Email Id [ ]

ADDRESS

(The address mentioned below will be updated as Communication & Permanent address. Same will be applicable for existing savings and current account also. The address can be changed post account opening if the customer wish to do so.)

*Line1 [ ]

*Line2 [ ]

Landmark [ ]

*City [ ] *State [ ]

*Country [ ] *Pincode [ ]

KYC OF THE INDIVIDUAL

Identity Proof Document Type	ID No.	Issuing Authority	Place of Issue	Date of Issue	Expiry Date
Address Proof Document Type	ID no.	Issuing Authority	Place of Issue	Date of Issue	Expiry Date

DEBIT CARD ☐☐ If yes, ☐ Business Supreme ☐ Business Platinum ☐ Business Classic

*Desired Individual Name on the Card [ ] Entity Name to be printed on Card ☐☐ (First 14 characters of the name will be printed on the card)

FATCA-CRS Declaration

*Address Type for Tax Purpose ☐ Same as above ☐ As given below *Controlling Person Type Code [ ] *(refer description on page 8)*

*Line1 [ ]

*Line2 [ ]

Landmark [ ] *City [ ] *Pincode [ ]

*State [ ] *Country [ ]

*Please tick the applicable tax resident declaration: *(Any one)*

☐ I am a tax resident of india and not resident of any other country or ☐ I am a tax resident of the country/ies mentioned in the table below

Country#	Tax Identification Number%	Identification Type (TIN or Other%, please specify)

#To also include USA, where the individual is a citizen/green card holder of USA
%In case Tax Identification No. is not available, kindly provide functional equivalent

Photo

Name of Authorised Signatory

Signature of Authorised Signatory

CASO2

Personal Details (Authorised Signatory/Partner/Proprietor/Director/POA/LOA/Trustee/Beneficiaries/Senior Management/Guarantor)

*Role Type (Tick any one) ☐ Authorized Signatory ☐ POA ☐ LOA CIB Role *(Tick any one if CIB Role Required)* { ☐ Initiator ☐ Viewer ☐ Approver ☐ Initiator & Approver

*Relation Person Type: *(Tick any one)* ☐ Proprietor ☐ Director ☐ Promoter ☐ Trustee ☐ Partner ☐ Guarantor ☐ None of these

☐ Beneficial Owner If yes, provide [ ] OR ☐ Senior Management

Beneficial Owner is the person holding more than 10% share capital in case of company or more than 15% in case of Association/BOI/Society or 10% and above in case of Trust or more than 10% in case of Partnership firm/LLP. Beneficial Ownership details need not be provided if the entity is a 'Listed Company' or a 'Majorly owned subsidiary of a listed company'.

Existing CIF ID ☐☐ If Yes, CIF ID [ ] Existing CKYC [ ]

*Name [ ] [FIRST] [MIDDLE] [LAST]

Maiden name (if any) [ ] [FIRST] [MIDDLE] [LAST]

*Mother's Name [ ] [FIRST] [MIDDLE] [LAST]

*Father's Name [ ] [FIRST] [MIDDLE] [LAST]

*DOB/DOI *(DOI is for HUF only)* [ ] *Gender ☐ Male ☐ Female ☐ Third Gender *Nationality [ ]

*Place/City of Birth [ ] *Country of Birth [ ]

*PAN [ ] OR ☐ FORM 97 & PAN Acknowledgment No. [ ]

PAN Acknowledgment Date [ ] *(Mandatory if PAN Acknowledgment No. is provided)* *Marital Status: ☐ Married ☐ Unmarried ☐ Others

*Designation [ ] #Occupation Code [ ] #To be filled by branch

*Resident Status ☐ Resident Indian(01) ☐ NRI(02) ☐ HUF(03) ☐ OCI(17) ☐ PIO(18) ☐ Foreign National - Non PIO(19)

*Occupation Type (Tick any one)
- ☐ S-Service^ [☐ Private Sector ☐ Public Sector ☐ Government Sector]
- ☐ O-Others^ [☐ Professional ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student] ☐ B-Business ☐ X-Not Categorised

^Occupation sub-type to be selected for S-Service & O-Others

*Mobile No [ ] *Email Id [ ]

ADDRESS

(The address mentioned below will be updated as Communication & Permanent address. Same will be applicable for existing savings and current account also. The address can be changed post account opening if the customer wish to do so.)

*Line1 [ ]

*Line2 [ ]

Landmark [ ]

*City [ ] *State [ ]

*Country [ ] *Pincode [ ]

KYC OF THE INDIVIDUAL

Identity Proof Document Type	ID No.	Issuing Authority	Place of Issue	Date of Issue	Expiry Date
Address Proof Document Type	ID no.	Issuing Authority	Place of Issue	Date of Issue	Expiry Date

DEBIT CARD ☐☐ If yes, ☐ Business Supreme ☐ Business Platinum ☐ Business Classic

*Desired Individual Name on the Card [ ] Entity Name to be printed on Card ☐☐ (First 14 characters of the name will be printed on the card)

FATCA-CRS Declaration

*Address Type for Tax Purpose ☐ Same as above ☐ As given below *Controlling Person Type Code [ ] *(refer description on page 8)*

*Line1 [ ]

*Line2 [ ]

Landmark [ ] *City [ ] *Pincode [ ]

*State [ ] *Country [ ]

*Please tick the applicable tax resident declaration: *(Any one)*

☐ I am a tax resident of india and not resident of any other country or ☐ I am a tax resident of the country/ies mentioned in the table below

Country#	Tax Identification Number%	Identification Type (TIN or Other%, please specify)

#To also include USA, where the individual is a citizen/green card holder of USA
%In case Tax Identification No. is not available, kindly provide functional equivalent

Photo

Sign across photo

Name of Authorised Signatory

CASA Non-Individual AOF + FATCA + CIB/03-10-26/Ver-3.7/2728286

TNC01

Terms & Conditions

I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) have read and understood the below T&C and understand that any changes to the T&C will be available on the website www.axis.bank.in only. **Account opening/service provision:** All services, including opening of the account are subject to verification of information/documents provided by me. In the event this account is not opened, if I/we have initially funded the account in cash for ₹ 20,000 or more, it will be refunded to me in the form of a DD/Cheque or PO only. RBI approval is required for entity from Pakistan to open account for its Project Office Account Existing Customer ID: In case of existing customers, not declaring their customer id and applying as a new customer, the Bank in such instances reserves the right to consolidate the customer IDs as it may decide, without any prior notice to me **Services:** All services will be provided by Axis Bank on a best effort basis. The complete list of services available to me will be available on www.axis.bank.in **Fees & Charges:** Fees and Charges will be applicable on my account and for other services availed by me, as described in the schedule of charges and on the website www.axis.bank.in Goods & Services Tax and other statutory imposts as applicable from time to time will be levied on all fees. **Change in Fees & Charges & Services:** Any change/discontinuation of Fees & Charges, Services, or Interest Rate will be intimated to me at least 30 days in advance through letter/SMS/ website/email or other means. **Recovery:** If no funds are available in the account to pay fees/charges, I authorize Axis Bank to set off any available credit, including amounts flowing into the account from collection proceeds or any deposits. **Account Freeze:** We authorize the bank to freeze my account in the following circumstances, with intimation to me except where specified otherwise. a. If it is suspected by the bank that deposits pertaining to all cash, cheque, DDS and Other deposits / transactions by way of NEFT, RTGS etc in my account are not in accordance with or in violation of the Laws and Regulations applicable from time to time, the bank can freeze the account and we shall be responsible/accountable for such deposits/transactions. b. If it is suspected that our account is being misused as a money mule or as a channel for unauthorized money pooling or a conduit for any illegal activity. (We will not receive a notice in this case). We also authorize the Bank to put restrictions on credits and/debits in the account, if the account is found deficient in any Regulatory requirements including know your customer guidelines, as required by Bank from time to time. **Account Closure:** We authorize the Bank to close my account, with prior intimation to me, in case of: a. Balance in the account remains zero for 3 months or more. b. high occurrences of dishonoured payments from my account. c. if the account is found deficient in any Regulatory requirements including know your customer guidelines, as required by Bank from time to time. d. Such Other instance which the Bank may decide pursuant to any order, instructions, directions, guidelines issued/directed by any Court/Statutory/ Regulatory authorities from time to time.**Transactions:** Any instructions to Axis Bank regarding the account, both of a financial/non-financial nature (eg: Issuance of Cheque book/card, financial transactions, updation of personal details etc.) will be provided by me through the authorized channels only, which will be specified by the bank, based on regulatory guidelines prevailing at that time. Axis Bank is not expected to act on instructions that do not come in through the authorized channels, but reserv es the right to act upon its discretion to provide such facilities under extraordinary circumstances. **Channel Facility:** Non- authorised Signatory who wants channel service facility must fill the Channel Registration Form and submit it with supporting documents. **Cheque Book:** No fresh cheque book will be issued if cheques of ₹ 1 crore and above are returned on four occasions during a financial year for want of sufficient funds or 8 cheque of below 1 crore are returned during a quarter for want of sufficient funds. **Debit Card:** All facilities provided by Axis Bank are subject to specific guidelines that are provided on the website www.axis.bank.in Axis Bank is not liable for fraud in the event that I disclose sensitive information such as passwords, PINs, or IDs / TFConnect to anybody.

Declaration

I/We have read, understood and hereby agree to the terms stated in this Application Form as well as the Terms and Conditions governing the Curr ent Account/ EEFC account and the various facilities/services such as mobile banking, Corporate Internet Banking, debit cum ATM card and such other services available under Axis Bank current account / EEFC account and as displayed on www.axis.bank.in and agree to abide by the same. I/We understand that the said terms are subject to revision from time to time and I/we agree to keep ourselves updated of such changes and be bound by the terms as are in force from time to time.

I /We confirm that the authorised signatories as approved by me/our Board/all the partners of the firm/all members of the Managing Committee, are authorised to operate the account. I/We agree and understand that Axis Bank Ltd/ Affiliates reserve the right to reject any application without providing any reason. I/We agree and understand that Axis Bank Ltd. reserves the right to retain the Application, and the documents provided therewith, including photographs, and will not return the same to me/us.

I/We further agree that any false/misleading information given by me/ us, or suppression of any material fact will render my/our account liable for closure and further action. I/We also hereby agree to indemnify Axis Bank and their successors or assignees if any of the representations and declarations made he re under by me/us is incorrect, false or misleading in any of its particulars. I/We declare, confirm, and agree:

a) That all the particulars and information given in the Application form (and all documents referred or provided therewith) are true, correct, complete and upto date in all respects and I/we have not withheld any information. [/We agree and Undertake to provide any further information that Axis Bank Ltd./its Affil iates may require, b) that I/we have had no insolvency initiated against me/us nor have I/we ever been adjudicated insolvent, c) that I/we have not at any time defaulted under any loan taken by me/us from any other bank/institution, or been in non-compliance of the applicable rules/regulations/guidelines in force from time to time, as framed by the Reserve Bank of India, d) that I/we have read and agree to the charges applicable to Current account/EEFC account and all other facilities to be availed by me/us and hereby agree to bear the charges as revised from time to time by Axis Bank at its sole discretion. I/We have read and understood the facilities available under Axis Bank Current Account/ EEFC account as listed on the Axis Bank Website. I/We have also gone through the schedule of charges and understand that to be eligible for the concessions, I/we have to maintain the minimum Monthly average balance (MAB), as indicated in the Schedule of Charges and agreed upon by me/us on a Monthly/Quarterly basis and in the event I/we fail to do so, I/we shall be liable to pay a fee every Month/Quarter as indicated in the schedule of charges. I/We also understand that continuation of the account is at Axis Bank's sole discretion and in case Axis Bank is dissatisfied with the conduct of the account, Axis Bank has the right to close the account after giving me/us 15 days' notice or withdraw the concessions in all or any service charges granted to me/us and/or charge Axis Bank's applicable rates for services availed by me/ us.

I/We hereby declare that in case of being professional(s)" by occupation, the said account will be used exclusively for our own transactions and not on behalf of my /our clients. "(not applicable for regulated and supervised individuals and entities) I/We hereby further confir m having read and understood the applicable rules/regulations/instruction/guidelines as framed by the Reserve Bank of India, including the FEMA regulations 2000 governing EEFC Accounts, and the Foreign Exchange Management Act, 1999, In force from time to time and agree to abide by and to be bound by all such applicable Law, rules, regulations and guide lines in force from time to time.

I/We hereby authorize Axis Bank to exchange, share or part with all the information/data provided herein including personal and business information with financial institutions/credit bureaus/agencies/ statutory bodies/other such persons, in order to facilitate the Bank to comply with its obligations under various applicable laws, regulations, and standards. I/ We shall not hold Axis Bank Ltd. or its agents/ representatives liable for using/sharing information provided herein for the said purpose. I/We shall keep Axis Bank informed at all times, regarding any changes/alter ation in my/our communication address and authorize the Bank to update any such change/alter ation in my/our communication address that the Bank may be informed of by me and/or is brought to the notice of the Bank and hereby authorize Axis bank to contact me /us on such changed/alter ed address. I/ We shall be solely responsible to ensure that Axis bank has been informed of the correct address for communication within two weeks. I/We agree to indemnify Axis bank against any fraud or any loss of damages suffered by Axis Bank due to my/our providing of any incorrect communication address and/or failure on my/our part to communicate the change/alteration in my/our communication address change in authorised signatories / account details.

All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement with Axis Bank for account opening and servicing (like courier, Cheque book/Debit card printing vendor etc.) on need-to-know basis.

Insta A/C Declaration: " I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) have approached Axis Bank for opening a Current account. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) understand that the account should be operated by me only after it has been activated. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) further undertake that any violation of this will constitute as a default on I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) part & the Bank reserves the right to close the said account forthwith on the happening of such a default without assigning any reason whatsoever. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) am aware that delivery and/ or receipt of the Welcome Kit cannot be construed to mean that Axis Bank has opened or agreed to open the account. Axis Bank Ltd. at its sole discretion, can either call for further documents or reject the application for any reason whatsoever. In case of rejection, I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) am aware that the Welcome Kit & Letter shall be construed as withdrawn and I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) undertake to return the same to the Bank forthwith"

Aadhaar Updation of Authorized Signatory/Beneficial Owner: A. I submit my Aadhaar number and voluntarily give my consent to: 1. A.) use my Aadhaar Details to authenticate me from UIDAI. ii. Use my Mobile Number provided for sending SMS alerts tome. B.) I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. C.) I hereby declare that all the above information voluntarily furnished by me is true, correct and complete. D.) I hereby state that I have no objection in authenticating myself with Aadhaar based authentication System and I voluntarily Consent to providing my Aadhaar number / VID number, Biometric information and/or One Time Pin (OTP) data (and/or any similar authentication data) for the purpose of CA application. E.) I confirm that I have been informed in my local language about the alternatives to submission of identity information and I have agreed to authenticate myself through Aadhaar based authentication system with full understanding of alternatives to submission of identity information I understand that Axis Bank shall ensure security and confidentiality of my personal identity data provided for the purpose Of Aadhaar based authentication.

Restrictions on Electronic Transactions: The Bank may not offer facility of electronic transactions, other than ATM cash withdrawals, to customers who do not provide mobile numbers to the Bank.
Entity PAN Updation: Wherever the Current account is opened with Form 49A of Entity, it is mandatory to submit Entity's PAN within 30 days of account opening to avoid debit freeze in the said account.

Section 25Companies Declaration: We hereby declare that :

1. The company had not applied its profits or income by way of dividends to its members. 2.The company had not altered objects clause of memorandum without prior approval of regional director (this is in addition to the provision of section 17) 3. Conditions of license complied with.

CKYC Declaration: 1) I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/we may be held liable for it. 2) My/Our personal/KYC details may be shared with Central KYC Registry 3) I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address

GST Declaration 1. I/We hereby provide my/our express consent to Axis Bank Limited ("Bank") and authorise: (a) the Bank to use, access, process and store my/our PAN or GST Number, for the purposes of sharing the same with Karza Technologies Private Limited ("Karza") / Signzy Technologies Private Limited ('Signzy") to enable Karza / Signzy to retrieve my/our Entity Details, Digital Returns, CST Payment History ("GSTN Data") from the (GSTN / CST portal), and to share, transfer and disclose GSTN Data with the Bank including with its group companies including Axis Bank Foundation, Axis Mutual Fund, Axis Securities limited, Axis Finance, Axis trustee, Axis Capital, A.Treds ltd, Freecharge ("Group Companies"); (b) the Bank and Group Companies to use, access. process, store, verify, profile, analyse, share, transfer and disclose the GSTN Data for the purposes Of marketing, promoting & offering the products & services of the Bank and Group Companies: monitoring, evaluating & improving the quality of the products & services of the Bank and Group Companies: for credit appraisal, credit bureau checks, developing credit scoring models and business strategies by the Bank and Group Companies; for fraud detection and anti-money laundering obligations of the Bank and Group Companies; for sharing and disclosing the GSTN Data to the service providers and consultants of the Bank and Group Companies for the purposes as mentioned above; for sharing and disclosing the GSTN Data to credit information companies, information utilities, Other Banks and Financial Institutions for the purposes as mentioned above and with regulatory authorities, investigation agencies, judicial. quasi-judicial and statutory authorities for the purposes as mentioned above. 2. I/We will not hold Bank liable or responsible for any breach or misuse by Karza / Signzy of the GSTN Data in any manner whatsoever and I/We, agree, confirm and acknowledge that Bank is not obligated to audit. monitor. review and assess the use of my/our GSTN Data by Karza / Signzy in any manner. 3. I/We hereby declare & confirm that I/We am/are responsible to provide my/our GST registration details while submitting my/our application form. I/We hereby agree and understand that in case I/we failed to provide the GST registration details, I/We will not get a B2B tax invoice from the Bank even if I/We am/are registered under GST regulations.

Declaration for updation/Periodic updation of KYC: I/We will ensure that any update/change in any information or documents provided by me/us in future is intimated/informed to the Bank promptly, i.e. within 30 days from the date of change.

MCA Declaration: I/We authorize Axis Bank Limited to verify the details of the company/entity digitally or otherwise from the MCA website or any other public domain (Govt Sites) and do hereby confirm to and agree to the Terms and Conditions.

Declaration (Continued)

FATCA CRS Terms and Conditions: The Central Board of Direct Taxes has notified on 7th August 2015 Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies/ withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Name of Authorized Signatory 1: _____ Signature 1: _____

Name of Authorized Signatory 2: _____ Signature 2: _____

Name of Authorized Signatory 3: _____ Signature 3: _____

Name of Authorized Signatory 4: _____ Signature 4: _____

Letter of Proprietorship

Re:Opening of a new account in the name of M/s_____. We refer to the captioned account to be opened with your Bank and declare as under:
I, the undersigned, is the Sole Proprietor of the firm and am solely responsible for liabilities thereof . I shall advise you in writing of any change that takes place in the constitution of the firm and I will be liable to you for any obligation, which may be standing in the firm's name in your books. On the date of the receipt of such change and until all such obligation shall have been liquidated. (Please sign without stamp)

Name: _____ Signature: _____ Place: _____ Date: _____

Letter of Partnership

We request you to take notice that we are trading in partnership under the name and style of M/s _____ and that our firm has been registered under the provision of the Indian Partnership Act with Registrar of Firms at _____ as No. _____ and further request that all transactions entered into with you by all or any one or more of us and all obligations incurred by all or any one or more of us whether under the Signature of the firm or subscribed by the individual signature of the person or persons entering upon the transaction or incurring the obligation, with or without co-obligants may be regarded by you as entered into and incurred for and behalf of all of us jointly and severally and also the assets of the firm shall be liable for amount due to the bank. We also request you to take notice that everyone of us is authorized to draw, execute endorse/accept and negotiate cheques, promissory notes, hundies, bills and other negotiable instruments on behalf of all of us and our firm and we also request you to take notice that our liability or liability of our firm to you as aforesaid shall not in any way be affected even if any third party joins in the transaction as co-obligant. We further hereby intimate to you that as per an agreement between Axis Bank Ltd. on the one part and ourselves on the other part to be estate whether joint or separate and person of each or every one of us is liable to you in respect of all or any of the aforesaid transactions or obligations. The retiring partner shall be liable to issue notice to you regarding retirement in the manner required under section 32 of the Partnership Act and such retiring partner/s shall be liable and continue to be liable for any act done by any of the partners until public notice is given of the retirement as aforesaid. Further, in the matter of making payment towards the liability arising in the account or acknowledging the liabilities or any part thereof as and when called upon by the bank to do so for the specific purpose saving limitation we declare that the payment or acknowledgement/s so made or given by one or more of us shall be liable shall save limitation against all of us jointly and or severally for the purpose of Law of Intimation, as such acknowledgement/s of debt and or payment/s shall be taken as given and made as agent/s of the other partners. This letter shall operate and be effective notwithstanding any provision on our deed of partnership which may conflict with any of the terms herein. (Please sign without stamp)

Name of Partner 1: _____ Signature 1: _____ Place: _____ Date: _____

Name of Partner 2: _____ Signature 2: _____ Place: _____ Date: _____

Name of Partner 3: _____ Signature 3: _____ Place: _____ Date: _____

Name of Partner 4: _____ Signature 4: _____ Place: _____ Date: _____

Bank Use

Documents Received ☐ Self Certified ☐ True Copies ☐ Notary

BDE/Lead Generator Code ☐☐☐☐☐☐

BDE/Lead Convertor Code ☐☐☐☐☐☐

A/c Manager/CSTM Code ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

A/c Report Code ☐☐☐☐

A/c Label 1_____ A/c Label 2_____

Ledger No ☐☐☐☐ Re-KYC: ☐☐ *(*Re-KYC for CPU use)*

EMP No. ☐☐☐☐☐☐☐ Date ☐☐☐☐☐☐☐☐

DECLARATION BY THE BRANCH

I hereby certify that this account opening form is complete in all respects and relevant documents have been obtained as per the KYC guidelines of the Bank and performed due diligence to verify the genuineness of the customer. The Account may please be set up in Finacle. In case of signature mismatch, I certify that the customer has personally met and has signed in my presence. Kindly process the request. We have made best efforts to identify the beneficial owner(s) of the said entity. The details furnished above have been verified from information, wherever available, in public domain

For Axis Bank Limited

Signature: _____
Branch Head / Authorized Signatory

S.S. Number_____

Date ☐☐☐☐☐☐☐☐

LND01

Letter of Indemnity of Private Limited/Public Limited (For Debit Card Issuance)

We hereby certify that following are the true extracts of resolution passed at the Meeting of the Board of Directors of the Company held on _____ day of _____.

We,

1._____2._____3._____4._____5._____Directors of the Company named_____(Hereinafter referred to as the "Company")have a current account bearing no_____ with AXIS Bank,_____Branch(Hereinafter referred to as the "Bank). We authorize

1._____2._____3._____4._____5._____Hereinafter referred to as the 'said Director/s, to solely withdraw cash, deposit cash, to do the balance enquiry, to transfer funds, to change PIN, to use card for merchandise purchases etc. on behalf of the Company.

The Bank is issuing the International Business Debit Card to the said Director/s on the request of the Company, vide this application form in addition to the cheque book(s) for operating the account.

We hereby agree that the related PIN for the purpose, will be kept under the safe custody of the said Director/s and that the said Director/s would use the card for the purposes as specified by the Company and not for his individual use or otherwise. Any misuse at the hands of the Director/s in any manner whatsoever shall be at their risks and consequences and the Bank shall not be liable for the same.

We hereby agree that in the event there is any change in the Constitution of the Board of Directors of the Company, it would be onus of the existing/continuing Directors to inform the Bank and the Bank shall not have any liability of the actions carried out by the outgoing Director/s till it is intimated to the Bank in writing and received by the Bank.

We hereby agree that in case of any dispute amongst the Director/s for which the operations on the account needs to be stopped, a letter to this effect needs to be sent to AXIS Bank_____(Branch name and address). The operations on the account would be stopped only after 48 hours after actual receipt of letter at the above address by the Bank. Till such time, the Bank shall not held liable for any misuse by the Director/s.

We hereby agree that in case of death, insanity or insolvency of any Director/s, the Bank would stop the operations in the account and the Business Debit Card would be hot listed within 48 hours after intimation of the same to the Bank. The Bank is not responsible for any loss to the Company in such events and it is the onus on the discontinuing Director/s and/or the Company to inform the Bank of such events.

In the premises aforesaid, we, our successors, assigns and legal heirs hereby indemnify and keep indemnified the Bank of, form and against all losses, damages, costs, charges, claims, disputes and consequences whatsoever arising out of issuance of the Business Platinum Debit Card to the said Director/s as requested by the Company as aforesaid without any demur.

The Company hereby authorized to execute this Indemnity in favor of the Bank indemnifying the Bank against all losses, damages, costs and consequences arising out of the operations of the Business Platinum Debit Card by the Company/Directors.

Certified to be true for (Name of the Company) _____.

_____ _____ _____ _____

Signature of the Chairman) (Signature of the Director) (Signature of the Director) (Signature of the Director)

Place:

Date:

Letter of Indemnity of Partnership Firm (For Debit Card Issuance)

We,

1. 2. 3. 4.

are the partners in the firm [M/s _____] and are hereby executing this letter of indemnity as herein below:

We hereby confirm that we have entered into a partnership deed dated _____("Partnership Deed") and are carrying out business in the name and style of M/s. _____("Partnership Firm"). The Partnership Deed is executed under the Indian Partnership Act, 1932 and and is enclosed herewith along with this application form.

We hereby acknowledge that in terms of the Partnership Deed, Shri_____ is designated as the Managing partner and has the necessary powers to conduct day to day affairs of the business and also open and operate the bank account for and behalf of the Partnership Firm in any bank as so he desires.

We are aware and acknowledge that the Partnership Firm with full consent of all the partners and in terms of the Partnership Deed has opened an account with AXIS Bank Ltd, _____ branch bearing no._____("The Bank").

The Bank has agreed to issue an ATM/Debit card in the name of the Managing Partner vide this application form to enable him to operate the Partnership Firm's account through ATM/Debit Card on the request of the Partnership Firm and we agree and acknowledge the same.

We, in our capacity as partners of the Partnership Firm, hereby indemnify the Bank jointly and severally in considerations of the Bank issuing the ATM/Debit Card to the Partnership Firm as hereunder:

1)That all or any transactions carried by the said Managing Partner and/or any other partner by using the ATM/Debit Card shall be binding on all the partners of the Partnership Firm.

2)We shall at no point of time raise any objection or claim on the said transactions and the Bank is well within the law to deem the said transactions so effected as valid, binding transactions conducted by the Partnership Firm represented by all its partners on the said account.

3)We hereby confirm and consent that the Partnership Firm and all its partners shall be liable jointly and severally for the transactions done by the Managing Partner who is authorized to receive and operate the ATM/Debit Card Vis-à-vis the Partnership Firms account.

4)We, jointly and severally as partners of the Partnership Firm, agree that we shall abide by the rules and regulations stipulated by the Bank, from time to time, in relation to the operation of the ATM/Debit Card. We also agree that we shall forthwith surrender the ATM/Debit Card upon request by the Bank.

5)We further confirm that we shall jointly and severally be liable for any claim, costs, damages, expenses, and/or other liability which may arise to the Bank or its successors or assigns in business by virtue of the said operations of the said account by the Managing Partner or by any other partner by the use of the said ATM/Debit Card. We jointly and severally undertake to indemnify the Bank and make good the said claims to the Bank.

6)We further undertake that we shall keep the Bank informed in writing about any change in the Partnership structure i.e. any addition or retirement of the partners and any reconstitution of the Partnership Firm shall be notified to the Bank forthwith and the copy of the partnership deed of the reconstituted firm shall also be submitted to the Bank.

7)We confirm that this understanding shall be binding not only in our capacity as partners but also in our individual capacity and shall bind our respective legal heirs, executors and assigns.

Dated_____day of _____ Signed and Delivered by the within named

_____ _____ _____ _____

(Signature of the Partner) (Signature of the Partner) (Signature of the Partner) (Signature of the Partner)

Controlling Person (CP) Type Description

Controlling Person (CP) Type			
Code	Sub-Category	Code	Sub-Category
C01	CP of legal person - ownership	C09	CP of legal arrangement – Other – settlor equivalent
C02	CP of legal person – other means	C10	CP of legal arrangement – Other – trustee equivalent
C03	CP of legal person – senior managing official	C11	CP of legal arrangement – Other – protector equivalent
C04	CP of legal person – trust – settlor	C12	CP of legal arrangement – Other – Beneficiary equivalent
C05	CP of legal arrangement – trust – trustee	C13	CP of legal arrangement – Other – Other equivalent
C06	CP of legal arrangement – trust – protector	C14	CP of legal arrangement – Author of Trust
C07	CP of legal arrangement – trust – beneficiary	C15	Unknown
C08	CP of legal arrangement – trust - other		

Details of Business Debit Cards

Features	Business Supreme Card	Business Platinum Card	Business Classic Card
Fire & Burglary Insurance cover	Rs. 20,00,000	NA	NA
ATM limits	Rs. 2,00,000	Rs. 75,000	Rs. 40,000
Purchase limits	Rs. 5,00,000	Rs. 5,00,000	Rs. 2,00,000
Activation benefits	Rs. 500 Travel voucher	NA	NA
Complimentary Movie tickets	1 Inox Bogo offer per month	NA	NA
Complimentary domestic airport lounge access	2 Per quarter	2 Per quarter	NA
Cashback on utility spends	5% Cashback on utilities	NA	NA
Personal Accident Insurance	Rs. 10,00,000	Rs. 5,00,000	Rs. 2,00,000
Air Accident Insurance	Rs. 1,00,00,000	Rs. 1,00,00,000	Rs. 1,00,00,000
Loss / delay in baggage & Personal Documents Insurance	500 USD	500 USD	500 USD
Price Protection	Rs. 50,000	Rs. 50,000	Rs. 50,000
Purchase Protection Insurance	Rs. 50,000	Rs. 50,000	Rs. 50,000
EDGE REWARD Points	1 Point on every Rs. 200 spent	1 Point on every Rs. 200 on domestic trxn. 3 Points on every Rs. 200 on international trxn.	NA
Card personalization - MyDesign	Yes	Yes	Yes
Issuance fee*	Rs. 1,000	Rs. 500	Rs. 250
Annual fee*	Rs. 1,000	Rs. 500	Rs. 250
Card Replacement fee*	Rs. 500	Rs. 200	Rs. 200

*Taxes as applicable shall be charged

AXIS BANK

Non-individual:FATCA-CRS Form NTB

(Not Applicable for Sole Proprietorship Accounts)

Form Type FCA02

Details of ultimate beneficial owner including additional FATCA & CRS information

1) Name of the entity*

2) Existing Customer* ☐ Y ☐ N If Yes, Customer ID 3)PAN Or ☐ FORM 97 & 49A

4) Address for Tax purpose* ☐ Communication/Local ☐ Registered/Residence ☐ other if other, fill address details below

5) Other Address:

City State Country Pin code

6) Address type for tax purpose* ☐ Residential ☐ Business ☐ Registered Office

Please tick the applicable tax resident declaration : (Any one)

☐ Entity is a tax resident fo India and not resident of any other country OR

☐ Entity is a tax resident fo the country/ies mentioned in the table below

Please indicate the country/ies in which the entity is a resident for tax purposes and the associated Tax ID Number below:

Country	Tax Identification Number%	Identification Type (TIN or Other%, please specify)

% In case Tax Identification Number is not available, kindly provide functional equivalent$

In case the Entity's Country of incorporation/Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code[3] here: _____

Owner-documented FFI's[9] should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8-BEN-E

Fatca-CRS declaration (Please consult your professional tax advisor for further guidance on FATCA-CRS classification

Part A (to be filled by Financial Institutions or Direct Reporting NFEs)

1	We are a ☐ Financial institution[1] or ☐ Direct reporting NFE[2] (please tick as appropriate)	*GIIN:* _____ *Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's provide your sponsor's GIIN above and indicate your sponsor's name below:* *Name of sponsoring entity:* _____	GIIN: not available (please tick as applicable): ☐ ***Applied for*** Following options available only for Financial Institutions: ☐ ***Not required to apply for*** (Please specify sub-category[4]) Please provide with Form W8-BEN-E, duly filled in ☐ ***Not obtained - Non-participating FI***

Part B (please fill any one as appropriate to be filled by NFEs of other than Direct Reporting NFEs)

1	Is the Entity a publicly traded company[5] (that is, a company whose shares are regularly traded on an established securities market)	☐ Yes (If yes, please specify any one stock exchange upon which the stock is regularly traded) Name of the stock exchange _____
2	Is the Entity a related entity of a publicly traded company[6] - a company whose share are regularly traded on an established securities market	☐ Yes Name of the Listed company, the stock of which is regularly traded _____ (If yes, please specify any one stock exchange upon which the stock is regularly traded) Name of the stock exchange _____ Nature of relation: ☐ Subsidiary of the listed company ☐ Controlled by a listed company
3	Is the Entity an active NFE[7]	☐ Yes Nature of business _____ Please specify the sub-category of Active NFE: _____ (mention code - refer 2c of Part D)
4	Is the Entity a passive NFE[8]	☐ Yes Nature of business _____

[1]Refer 3(VIII) of Part D, [2]Refer 1 of Part D, [3]Refer 3(VII) of Part D, [4]Refer 1A. of Part D, [5]Refer 2a of Part D, [6]Refer 2b of Part D, [7]Refer 2c of Part D, [8]Refer 3(II) of Part D, [9]Refer 3(VII) of Part D

Certifications

I/We have understood the information requirements of this Form (read along with the FATCA-CRS Instructions & Definitions under Part D) and hereby confirm that the information provided by us on this Form is True, Correct, and Complete. I/We also confirm that I/We have read and understood the FATCA-CRS Terms and Conditions above and hereby accept the same.

Authorised Signatory Name : _____ Authorised Signatory Signature

Authorised Signatory Designation : _____

Date: D D M M Y Y Y Y Place: _____

Branch Declaration :

We have made best efforts to identify the beneficial owners/controlling persons of the said Company. The details furnished above have been verified from information available through constitutional documents, public domain.

DECLARATION OF BENEFICIAL OWNERSHIP

(NOT APPLICABLE FOR SOLE PROPRIETORSHIP ACCOUNTS)

Name of the Customer/Company

Registered Number (Wherever applicable)

Registered Address

The Customer/Company as stated above hereby confirms and declares that on the below date (Please tick the correct option - option 3 is applicable only for Company)

1 ☐ The following natural person(s) (listed in Table below) exercise control or ultimately have a controlling ownership interest i.e. having ownership/entitlement of more than 10% (in case of Company) or more than 10% (Partnership/LLP) or more than 15% (Association/BOI/Society) or 10% and above (in case of Trust) of capital/profits/property or controlling through voting rights, agreement, arrangement etc.

OR

2. ☐ There are no natural person(s) who exercise control or ultimately have a controlling ownership interest as stated above, therefore details of:
   - ○ All partner(s)(for partnership)/trustees (for trust)/senior managing officials (for unincorporated bodies) who are natural person(s) are stated in the below Table
   - ○ Natural person(s) holding the position of directors/senior management in the Company are given in the below Table.

(*If you have ticked any of the above, please complete the Table below before signing the declaration)

Sr No.	Full Name of Beneficial owner/controlling natural person(s)	Date of Birth	Nationality	Address	Type of KYC Documents		Controlling ownership interest (%)
					Identity	Address	

OR

3. ☐ The Company is listed on _____ (*Name of the Stock Exchange)

or is a majorly owned subsidiary of _____ (*Name of the listed Company)

listed on _____ (*Name of the Stock Exchange)

in _____ (*Name of the Jurisdiction)

***Stock Exchange listed in India or any jurisdiction notified by Central Govt.**

The Customer/Company undertakes that the facts stated above are true and correct. The Customer/Company also undertakes and agrees that it will notify Axis Bank without delay of any changes in the controlling persons / shareholders, person exercising control or having controlling ownership interest in the Company / Partnership / LLP / AOP / Society / Trust / Club / University / Institution, as declared in the table above.

For and on behalf of [Name of Company / Partnership / LLP / AOP / Society / Trust / Club / University / Institution]:

Signature of the Authorized Official* :

Full Name of the Authorized Official:

Designation / Position:

Date D D M M Y Y Y Y

Only for Trust Accounts

☐ We confirm that all details of the trustees, settlor and authors, beneficiary(/ies) of the trust have been provided above and is detailed in the trust deed submitted herein and the same is in order.

OR,

☐ We confirm that the following are the additional names associated with the trust which is not recorded in trust deed and the same is in order.

Name of Settlor /Author of Trust /Trustee/ beneficiary(/ies) .....

Signature of the Authorized Official* .....

* The declaration should be signed by:
i. An active/designated partner in case of Partnership Firm/LLP, a trustee in case of Trust, a senior member in case of AOP, Society, Club and member of the Managing Committee in case of University and Institution.
ii. The official authorized to sign the Board Resolution in case of Company.

AXIS BANK

Corporate Internet / Mobile Banking (neo by Axis Bank) Application Form

(Only to be used with CAAOF & not for stand-alone request)

Form Type CIB01

Channel Preference ☐ Web Banking Only ☐ Mobile Banking Only ☐ Both Web Banking and Mobile Banking

(Select one option only)

I/We, being the duly authorised signatory(ies), hereby expressly consent to the activation of the above selected Neo for Corporates (NFC) digital banking channel(s) and authorize the Bank to record and maintain this consent for its records. I/We further acknowledge and agree that SMS and/or email alerts relating to operations in the account(s), including financial and non-financial transactions, will be sent to the mobile number(s) and/or email ID(s) registered with the Bank.

Corporate customer id *(only for existing customers)* ☐☐☐☐☐☐☐☐☐☐☐

Existing Corporate ID if any, ☐☐☐☐☐☐☐☐☐☐ **OR We Prefer Corporate ID** ☐☐☐☐☐☐☐☐☐☐

User Detail	User 01	User 02	User 03
Name of User			
Customer ID			
CIB Login ID *(if existing CIB user)*			
*Mobile No			
*Official Email ID	@	@	@

Contact details will be used for online setting of password. Also, as an additional security feature, it is mandatory to use Netsecure for all financial transactions through Corporate Internet Banking. In order to facilitate this, the mobile number and email id of all corporate internet banking users' needs to be registered with the bank.

	User 01	User 02	User 03
Transaction Type (not applicable for viewer profile) (select any one)	A ☐	A ☐	A ☐
	B ☐	B ☐	B ☐
	C ☐	C ☐	C ☐
	TFConnect ☐	TFConnect ☐	TFConnect ☐
	☐	☐	☐

A: Only between own accounts | B: Own Accounts, Third Party Accounts, Tax Payment & Power Transfer, Online Payments | C: Only Tax Payment | TFConnect (Online Trade Portal): Activities relating to Letters of Credit, Bank Guarantees, Bills and Other Trade Services.

	User 01	User 02	User 03
User Profile (Select any one)	Viewer ☐	Viewer ☐	Viewer ☐
	Initiator ☐	Initiator ☐	Initiator ☐
	Approver ☐	Approver ☐	Approver ☐
	Initiator & Approver ☐	Initiator & Approver ☐	Initiator & Approver ☐

Initiator - the user may ONLY initiate financial transaction, Approver - the user may ONLY authorise financial transactions, Initiator & Approver - the user may initiate & authorize financial transactions, Viewer - the user has only view rights and may not initiate / authorise financial transactions.

User Detail	**User 01**	**User 02**	**User 03**
Per Transaction			
No. of Approver required	☐☐	☐☐	☐☐

Transaction Limits will be defined by the Board Resolution and subject to Corporate Internet Banking Limits / Sanctioned Limits.

I/We confirm that I/we have read and agree to abide by the Terms and Conditions present on website www.axis.bank.in and understand that any changes to the Terms and Conditions will be available on the website www.axis.bank.in only. (Path: Home / Corporate / Neo by Axis Bank / Neo for Corporates > Terms & Conditions and Downloads)

Name of the Authorized Signatory _____

Date _____ Place _____

Signature of the Authorized Signatory

Terms & Conditions

I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) have read and understood the below T&C and understand that any changes to the T&C will be available on the website www.axis.bank.in only. **Account opening/service provision:** All services, including opening of the account are subject to verification of information/documents provided by me. In the event this account is not opened, if I/we have initially funded the account in cash for ₹ 20,000 or more, it will be refunded to me in the form of a DD/Cheque or PO only. RBI approval is required for entity from Pakistan to open account for its Project Office Account Existing Customer ID: In case of existing customers, not declaring their customer id and applying as a new customer, the Bank in such instances reserves the right to consolidate the customer IDs as it may decide, without any prior notice to me **Services:** All services will be provided by Axis Bank on a best effort basis. The complete list of services available to me will be available on www.axis.bank.in **Fees & Charges:** Fees and Charges will be applicable on my account and for other services availed by me, as described in the schedule of charges and on the website www.axis.bank.in Goods & Services Tax and other statutory imposts as applicable from time to time will be levied on all fees. **Change in Fees & Charges & Services:** Any change/discontinuation of Fees & Charges, Services, or Interest Rate will be intimated to me at least 30 days in advance through letter/SMS/ website/email or other means. **Recovery:** If no funds are available in the account to pay fees/charges, I authorize Axis Bank to set off any available credit, including amounts flowing into the account from collection proceeds or any deposits. **Account Freeze:** We authorize the bank to freeze my account in the following circumstances, with intimation to me except where specified otherwise. a. If it is suspected by the bank that deposits pertaining to all cash, cheque, DDS and Other deposits / transactions by way of NEFT, RTGS etc in my account are not in accordance with or in violation of the Laws and Regulations applicable from time to time, the bank can freeze the account and we shall be responsible/accountable for such deposits/transactions. b. If it is suspected that our account is being misused as a money mule or as a channel for unauthorized money pooling or a conduit for any illegal activity. (We will not receive a notice in this case). We also authorize the Bank to put restrictions on credits and/debits in the account, if the account is found deficient in any Regulatory requirements including know your customer guidelines, as required by Bank from time to time. **Account Closure:** We authorize the Bank to close my account, with prior intimation to me, in case of: a. Balance in the account remains zero for 3 months or more. b. high occurrences of dishonoured payments from my account. c. if the account is found deficient in any Regulatory requirements including know your customer guidelines, as required by Bank from time to time. d. Such Other instance which the Bank may decide pursuant to any order, instructions, directions, guidelines issued/directed by any Court/Statutory/ Regulatory authorities from time to time.**Transactions:** Any instructions to Axis Bank regarding the account, both of a financial/non-financial nature (eg: Issuance of Cheque book/card, financial transactions, updation of personal details etc.) will be provided by me through the authorized channels only, which will be specified by the bank, based on regulatory guidelines prevailing at that time. Axis Bank is not expected to act on instructions that do not come in through the authorized channels, but reserv es the right to act upon its discretion to provide such facilities under extraordinary circumstances. **Channel Facility:** Non- authorised Signatory who wants channel service facility must fill the Channel Registration Form and submit it with supporting documents. **Cheque Book:** No fresh cheque book will be issued if cheques of ₹ 1 crore and above are returned on four occasions during a financial year for want of sufficient funds or 8 cheque of below 1 crore are returned during a quarter for want of sufficient funds. **Debit Card:** All facilities provided by Axis Bank are subject to specific guidelines that are provided on the website www.axis.bank.in Axis Bank is not liable for fraud in the event that I disclose sensitive information such as passwords, PINs, or IDs / TFConnect to anybody.

Declaration

I/We have read, understood and hereby agree to the terms stated in this Application Form as well as the Terms and Conditions governing the Curr ent Account/ EEFC account and the various facilities/services such as mobile banking, Corporate Internet Banking, debit cum ATM card and such other services available under Axis Bank current account / EEFC account and as displayed on www.axis.bank.in and agree to abide by the same. I/We understand that the said terms are subject to revision from time to time and I/we agree to keep ourselves updated of such changes and be bound by the terms as are in force from time to time.

I /We confirm that the authorised signatories as approved by me/our Board/all the partners of the firm/all members of the Managing Committee, are authorised to operate the account. I/We agree and understand that Axis Bank Ltd/ Affiliates reserve the right to reject any application without providing any reason. I/We agree and understand that Axis Bank Ltd. reserves the right to retain the Application, and the documents provided therewith, including photographs, and will not return the same to me/us.

I/We further agree that any false/misleading information given by me/ us, or suppression of any material fact will render my/our account liable for closure and further action. I/We also hereby agree to indemnify Axis Bank and their successors or assignees if any of the representations and declarations made he re under by me/us is incorrect, false or misleading in any of its particulars. I/We declare, confirm, and agree:

a) That all the particulars and information given in the Application form (and all documents referred or provided therewith) are true, correct, complete and upto date in all respects and I/we have not withheld any information. [/We agree and Undertake to provide any further information that Axis Bank Ltd./its Affil iates may require, b) that I/we have had no insolvency initiated against me/us nor have I/we ever been adjudicated insolvent, c) that I/we have not at any time defaulted under any loan taken by me/us from any other bank/institution, or been in non-compliance of the applicable rules/regulations/guidelines in force from time to time, as framed by the Reserve Bank of India, d) that I/we have read and agree to the charges applicable to Current account/EEFC account and all other facilities to be availed by me/us and hereby agree to bear the charges as revised from time to time by Axis Bank at its sole discretion. I/We have read and understood the facilities available under Axis Bank Current Account/ EEFC account as listed on the Axis Bank Website. I/We have also gone through the schedule of charges and understand that to be eligible for the concessions, I/we have to maintain the minimum Monthly average balance (MAB), as indicated in the Schedule of Charges and agreed upon by me/us on a Monthly/Quarterly basis and in the event I/we fail to do so, I/we shall be liable to pay a fee every Month/Quarter as indicated in the schedule of charges. I/We also understand that continuation of the account is at Axis Bank's sole discretion and in case Axis Bank is dissatisfied with the conduct of the account, Axis Bank has the right to close the account after giving me/us 15 days' notice or withdraw the concessions in all or any service charges granted to me/us and/or charge Axis Bank's applicable rates for services availed by me/ us.

I/We hereby declare that in case of being professional(s)* by occupation, the said account will be used exclusively for our own transactions and not on behalf of my /our clients. *(not applicable for regulated and supervised individuals and entities) I/We hereby further confirm having read and understood the applicable rules/regulations/instruction/guidelines as framed by the Reserve Bank of India, including the FEMA regulations 2000 governing EEFC Accounts, and the Foreign Exchange Management Act, 1999, In force from time to time and agree to abide by and to be bound by all such applicable Law, rules, regulations and guide lines in force from time to time.

I/We hereby authorize Axis Bank to exchange, share or part with all the information/data provided herein including personal and business information with financial institutions/credit bureaus/agencies/ statutory bodies/other such persons, in order to facilitate the Bank to comply with its obligations under various applicable laws, regulations, and standards. I/ We shall not hold Axis Bank Ltd. or its agents/ representatives liable for using/sharing information provided herein for the said purpose. I/We shall keep Axis Bank informed at all times, regarding any changes/alteration in my/our communication address and authorize the Bank to update any such change/alteration in my/our communication address that the Bank may be informed of by me and/or is brought to the notice of the Bank and hereby authorize Axis bank to contact me /us on such changed/altered address. I/ We shall be solely responsible to ensure that Axis bank has been informed of the correct address for communication within two weeks. I/We agree to indemnify Axis bank against any fraud or any loss of damages suffered by Axis Bank due to my/our providing of any incorrect communication address and/or failure on my/our part to communicate the change/alteration in my/our communication address change in authorised signatories / account details.

All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement with Axis Bank for account opening and servicing (like courier, Cheque book/Debit card printing vendor etc.) on need-to-know basis.

Insta A/C Declaration: " I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) have approached Axis Bank for opening a Current account. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) understand that the account should be operated by me only after it has been activated. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) further undertake that any violation of this will constitute as a default on I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) part & the Bank reserves the right to close the said account forthwith on the happening of such a default without assigning any reason whatsoever. I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) am aware that delivery and/ or receipt of the Welcome Kit cannot be construed to mean that Axis Bank has opened or agreed to open the account. Axis Bank Ltd. at its sole discretion, can either call for further documents or reject the application for any reason whatsoever. In case of rejection, I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) am aware that the Welcome Kit & Letter shall be construed as withdrawn and I / We (In this context, "I/we", "my/ours" and "me/us" refers to all holders of the account) undertake to return the same to the Bank forthwith"

Aadhaar Updation of Authorized Signatory/Beneficial Owner: A. I submit my Aadhaar number and voluntarily give my consent to: 1. A.) use my Aadhaar Details to authenticate me from UIDAI. ii. Use my Mobile Number provided for sending SMS alerts tome. B.) I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. C.) I hereby declare that all the above information voluntarily furnished by me is true, correct and complete. D.) I hereby state that I have no objection in authenticating myself with Aadhaar based authentication System and I voluntarily Consent to providing my Aadhaar number / VID number, Biometric information and/or One Time Pin (OTP) data (and/or any similar authentication data) for the purpose of CA application. E.) I confirm that I have been informed in my local language about the alternatives to submission of identity information and I have agreed to authenticate myself through Aadhaar based authentication system with full understanding of alternatives to submission of identity information I understand that Axis Bank shall ensure security and confidentiality of my personal identity data provided for the purpose Of Aadhaar based authentication.

Restrictions on Electronic Transactions: The Bank may not offer facility of electronic transactions, other than ATM cash withdrawals, to customers who do not provide mobile numbers to the Bank.
Entity PAN Updation: Wherever the Current account is opened with Form 49A of Entity, it is mandatory to submit Entity's PAN within 30 days of account opening to avoid debit freeze in the said account.
Section 25Companies Declaration: We hereby declare that :
1. The company had not applied its profits or income by way of dividends to its members. 2.The company had not altered objects clause of memorandum without prior approval of regional director (this is in addition to the provision of section 17) 3. Conditions of license complied with.

CKYC Declaration: 1) I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/we may be held liable for it. 2) My/Our personal/KYC details may be shared with Central KYC Registry 3) I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address

GST Declaration 1. I/We hereby provide my/our express consent to Axis Bank Limited ("Bank") and authorise: (a) the Bank to use, access, process and store my/our PAN or GST Number, for the purposes of sharing the same with Karza Technologies Private Limited ("Karza") / Signzy Technologies Private Limited ('Signzy") to enable Karza / Signzy to retrieve my/our Entity Details, Digital Returns, CST Payment History ("GSTN Data") from the (GSTN / CST portal), and to share, transfer and disclose GSTN Data with the Bank including with its group companies including Axis Bank Foundation, Axis Mutual Fund, Axis Securities limited, Axis Finance. Axis trustee, Axis Capital, A.Treds ltd, Freecharge ("Group Companies"); (b) the Bank and Group Companies to use, access, process, store, verify, profile, analyse, share, transfer and disclose the GSTN Data for the purposes Of marketing, promoting & offering the products & services of the Bank and Group Companies: monitoring, evaluating & improving the quality of the products & services of the Bank and Group Companies: for credit appraisal, credit bureau checks, developing credit scoring models and business strategies by the Bank and Group Companies; for fraud detection and anti-money laundering obligations of the Bank and Group Companies; for sharing and disclosing the GSTN Data to the service providers and consultants of the Bank and Group Companies for the purposes as mentioned above; for sharing and disclosing the GSTN Data to credit information companies, information utilities, Other Banks and Financial Institutions for the purposes as mentioned above and with regulatory authorities, investigation agencies, judicial, quasi-judicial and statutory authorities for the purposes as mentioned above. 2. I/We will not hold Bank liable or responsible for any breach or misuse by Karza / Signzy of the GSTN Data in any manner whatsoever and I/We, agree, confirm and acknowledge that Bank is not obligated to audit, monitor, review and assess the use of my/our GSTN Data by Karza / Signzy in any manner. 3. I/We hereby declare & confirm that I/We am/are responsible to provide my/our GST registration details while submitting my/our application form. I/We hereby agree and understand that in case I/we failed to provide the GST registration details, I/We will not get a B2B tax invoice from the Bank even if I/We am/are registered under GST regulations.

Declaration for updation/Periodic updation of KYC: I/We will ensure that any update/change in any information or documents provided by me/us in future is intimated/informed to the Bank promptly, i.e. within 30 days from the date of change.

MCA Declaration: I/We authorize Axis Bank Limited to verify the details of the company/entity digitally or otherwise from the MCA website or any other public domain (Govt Sites) and do hereby confirm to and agree to the Terms and Conditions.

Declaration (Continued)

FATCA CRS Terms and Conditions: The Central Board of Direct Taxes has notified on 7th August 2015 Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies/ withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Acknowledgement (to be filled by Branch)

Application form acknowledgement

I have received Application no. _____ from _____

for opening an account with Axis Bank Branch _____

Name of Bank Official _____

Mobile no._____

Signature_____

Nomination acknowledgement

☐ I. We acknowledge receipt of nomination made by you in favour of:

Name of nominee _____ Age: _____ year with respect to your application no._____

☐ II. No nominee for the account since nomination facility not availed by the account holder.

Signature of Bank Official _____

According to RBI's nomination guidelines, it is necessary to register a nominee on accounts opened under a single name. Appointing a nominee is beneficial for the following reasons:

1. If the account holder dies, the bank will easily pass on the funds in the account to the nominee
2. Hassle-free formalities for the nominee while claiming benefits