

Branch Name \_\_\_\_\_ SOL ID     SR. No.

### Customer Information

|                            |                      |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
|----------------------------|----------------------|---|---|---|---|---|---|---|---|---|--------------|--|--|--|--|--|--|--|--|---|-------------|--|--|--|--|--|--|--|--|-------------------------------------------|--|--|--|--|--|--|--|--|--|
| Customer ID*               |                      |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| Customer Name*             |                      |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 1                          | Name Updation        |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 2                          | DOB/DOI              | D | D | M | M | Y | Y | Y | Y |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 3                          | Aadhaar number       |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  | (Please Provide last 4 digits of Aadhaar) |  |  |  |  |  |  |  |  |  |
| 4                          | PAN number           |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  | 5 | Nationality |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| Customer's Name as per PAN |                      |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| Customer's DOB as per PAN  |                      | D | D | M | M | Y | Y | Y | Y | 6 | Passport No. |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 7                          | Visa No.             |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 8                          | LEI code expiry date |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |
| 9                          | LEI code             |   |   |   |   |   |   |   |   |   |              |  |  |  |  |  |  |  |  |   |             |  |  |  |  |  |  |  |  |                                           |  |  |  |  |  |  |  |  |  |

☐ LEI code - I/We authorize Axis Bank to update expiry date of LEI code, unless otherwise instructed in writing

☐ I wish to update below contact information in

[illegible]

## Contact Information

|                                                                                                                                                                                                                                                                                                    |                                            |                                               |                                        |                                            |                                                            |                                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------|----------------------------------------|--------------------------------------------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| <b>10</b>                                                                                                                                                                                                                                                                                          | <b>Mobile No. &amp; Alert Registration</b> | <input type="checkbox"/> Country Code         | <input type="checkbox"/> Mobile Number | <input type="checkbox"/> Transaction Alert | <input type="checkbox"/> EOD Alert                         | <i>(Applicable only for Current Account)</i>                                                                                   |
| Joint account holders will receive One Time Password (OTP) and transaction SMS alerts for their transactions on ATM, Internet Banking and Mobile Banking.<br>Monthly charge ₹ 5/- for Savings A/c except NRI customer. To unsubscribe from value added alerts please tick <input type="checkbox"/> |                                            |                                               |                                        |                                            |                                                            |                                                                                                                                |
| <b>11</b>                                                                                                                                                                                                                                                                                          | <b>Landline number</b>                     | <input type="text"/> Tel (R)                  | <input type="text"/> Tel (O)           |                                            |                                                            |                                                                                                                                |
| <input type="text"/>                                                                                                                                                                                                                                                                               |                                            |                                               |                                        |                                            |                                                            |                                                                                                                                |
| <b>12</b>                                                                                                                                                                                                                                                                                          | <b>E-mail ID</b>                           | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <i>(for e-mail statement registration. Physical statements will be discontinued once E-statements are activated)</i>                                                                                                                                                                               |                                            |                                               |                                        |                                            |                                                            |                                                                                                                                |
| <b>13</b>                                                                                                                                                                                                                                                                                          | <b>Address</b>                             | <input type="checkbox"/> (A) Communication i) | <input type="checkbox"/> Residence ii) | <input type="checkbox"/> Office            | <input type="checkbox"/> (B) Permanent /Registered address | <i>(Note - Please leave space between two words. In case of joint Holders, each holder is required to fill separate form.)</i> |
| <b>ADD 1</b>                                                                                                                                                                                                                                                                                       |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>ADD 2</b>                                                                                                                                                                                                                                                                                       |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>ADD 3</b>                                                                                                                                                                                                                                                                                       |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>Landmark</b>                                                                                                                                                                                                                                                                                    |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>City</b>                                                                                                                                                                                                                                                                                        |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>Pin Code/Zip Code/PO Box</b>                                                                                                                                                                                                                                                                    |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |
| <b>Country</b>                                                                                                                                                                                                                                                                                     |                                            | <input type="text"/>                          |                                        |                                            |                                                            |                                                                                                                                |

Please attach address proof document

**\*Please attach duly filled FATCA form if country of address is not INDIA**  
(For deemed OVD, OVD with updated address to be submitted within 3 months,  
not applicable for NRI and Credit Cards)

**Terms & Conditions:** I/We have read, and understood and agree to be bound by the Terms & conditions related to UIDAI guideline, sharing of Information with agencies/service provide on need to know basis, regarding various Products & Services / Fees & Charges including SMS Banking, E-Statement, & Internet Banking, including Terms & Conditions related to sharing of relevant information under foreign tax law like FATCA as displayed on www.axisbank.com. SMS alert charges are applicable as mentioned on Bank website: www.axisbank.com under Fees and Charges section. I/We hereby declare that all details provided in this form are true and correct and supported by valid documents enclosed with this form. I/We accept and agree that this declaration shall be addition to any other declaration provided by me/us with respect to the facility provided by Axis Bank Ltd and agree to indemnify and keep Axis Bank Ltd indemnified from any loss, damage, claim action, costs, charges and expenses which Axis Bank Ltd may suffer or incur as a result of any defect/misrepresentation made by me/us in the above declaration. My personal/KYC details may be shared with Central KYC Registry. I give my consent to download my KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYCR Registry. Also, I give my consent to receiving information from Central KYC Registry through SMS/Email on the registered no./email address. I understand that my KYC Record includes my KYC Records/Personal information such as my name, address, date of birth, PAN number, etc.**Mobile No.** may be updated in the bank records for sending any communication related to my above account, as well as transaction advice. I also authorise the bank to contact me on the above said number for doing verification, call backs or checks to confirm the veracity of any transaction, as deemed fit by the bank. I confirm that the mobile number is held by me and is not used by any third party and I undertake that I shall duly and promptly inform the bank, if and when my mobile number changes. **Address Update:** Please note the communication address will be updated at account level and Registered address at Customer ID level (For Current Account). Please note address shall be captured as per OVD submitted in case of any discrepancy observed in the details submitted on CRF via a vis OVD. **For Deemed OVD:** I hereby declare that, I will submit the copy of the OVD with updated address within 3 months from today and I understand that failure to do so may result in, the Bank taking action as deemed necessary, in line with the guidelines. Please carry original documents for verification purposes.

☐ **E-aadhaar Declaration** - There is no change in the Aadhaar Detail after the date of download of e-Aadhaar submitted to the Bank.

Date         Place \_\_\_\_\_

For Individual accounts, in case of joint holder mobile number updation, signature of only joint holder is required. For non-individual accounts, signatures as per mode of operation are required for mobile number updation.

Signature \_\_\_\_\_ Signature \_\_\_\_\_ Signature \_\_\_\_\_ Signature \_\_\_\_\_

## For office use only

**For Office use only**

Certified that this Request Letter is complete in all aspect & all relevant documents are obtained & verified for mode of operations and signature of the A/c holder. The request may please be processed. The CRF has been personally submitted by the Customer. I have satisfied myself about the identity of the customer by verifying his / her Debit Card/ KYC document & also his / her signature in Bank's record. I have done proper due dilligence for updating the records of the customer on his/her request at non-home branch. Due diligenace has been conducted for the customer by BH/OH for cases received under DEAF and Account activation.

**E-aadhaar Declaration :** E-Aadhaar downloaded in my presence (applicable for cases where Aadhaar downloaded in front of the customer in the branch.

**E-aadhaar Declaration :** E-Aadhaar downloaded in my presence (applicable for cases where Aadhaar downloaded in front of the customer in the branch).

☐ Bank induced request
 Request received date
 
Request processed date

Instructions received through :
☐ Mail/Representative
☐ In Person

Request accepted/ Customer met in person by : Name : \_\_\_\_\_
Emp ID : 

 Signature

IDs sighted - details (wherever applicable) : ID Type : \_\_\_\_\_
ID No. : \_\_\_\_\_
Expiry Date : \_\_\_\_\_

Signature verified by : Name : \_\_\_\_\_
Emp ID : 

 Signature

Callback details

Customer

(if applicable) : spoken with : \_\_\_\_\_
Date & Time : \_\_\_\_\_
No. Called : \_\_\_\_\_

Request verified/certified by : Name : \_\_\_\_\_
Emp ID : 

 Signature & S.S.No.

## Acknowledgement to Customer

We acknowledge the receipt of Customer Request / Complaint instruction from Mr./Mrs./Ms. \_\_\_\_\_  
relating to customer id \_\_\_\_\_ account number/credit card (enter only last 4 digits for credit cards)/loan account number \_\_\_\_\_  
under service request number \_\_\_\_\_.

Date of request 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 Name of the Branch Official : \_\_\_\_\_

**Please Note:** Your request will be processed within 2 working days. Delivery of kits /cheque books / statement etc. to your address will take between 5-11 working days if dispatched through courier and 15-18 working days if dispatched through speed post (depending on location)

For Axis Bank Ltd.

