

***To be filled if card pack ref. no. is not available**

Date Card No. Enter last 4 digits

Insta Non-Insta Card Pack Ref. No.*

Prepaid Instrument Type: KMRL Smart Pay Freecharge Meal

Corp. ID Prepaid RM Emp. Code Product Code

Company Y N Company Name

Existing Customer* Y N If yes, Customer ID

Photo

If not existing customer, I confirm if found otherwise, Bank reserves the right to consolidate the customer IDs as it may decide, without any prior notice to me.

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

Name* (Same as ID proof)

Date of Birth* Gender* M F T Nationality* Married* Y N

Mobile No.* E-mail Address

Maiden Name* (Mandatory for married females)

Spouse Name*

Father Name*

Mother Name*

Mother's Maiden Name* (Max. 16 Characters)

Differently Aabled Status* Y N (If Yes, please fill up additional details) UDID Number

Type of Impairment Percentage of Impairment %

Address Details: For all payroll accounts of defence personnel, the communication address should be only of the Unit. Civilian address should not be mentioned

Communication / Residence Address*

Landmark* City*

Pincode* State* Country*

Residence Type Owned Rented / Leased Ancestral / Parental Company provided Preferred language of communication*

Permanant Address* Same as communication address Please note the address below

Landmark* City*

Pincode* State* Country*

Residence Type Owned Rented / Leased Ancestral / Parental Company provided

Know Your Customer*

Account Opening through e-KYC Y N Transaction ID CKYC No.

If No, please provide KYC document (Attach photocopies of the following documents and produce the original copies of these documents for verification)

Aadhaar Card Number Mention last four digits PAN No.* Or Form 60 / 61 ***If PAN is not available, please fill up additional Declaration Form 60 to 61

*Identity Proof Document Type	*ID No.	Issuing Authority	Place of Issue
*Address Proof Document Type	*ID No.	Issuing Authority	Place of Issue

Passport Issue Date Passport Expiry Date Required if Passport provided as Identity / Address Proof

Driving License Issue Date Driving License Expiry Date Required if Driving License provided as Identity / Address Proof

Date* _____

Place _____

 Signature of Primary Applicant

*These facilities are provided without the need of complying with any registration formalities **Kindly approach the bank in case any of these facilities is / are to be discontinued

Corporate Details

Introduction by Corporate (for cards issued through corporates) we hereby confirm that the particulars provided in this form by our Distributor / Agent / Employee are correct and we request Axis Bank to issue the Prepaid Card for our Distributor / Agent / Employee.

Company Seal and Signature
of Designated Signatory

For Office Use Only

Account to be opened at _____

Branch Code _____

Ledger No.

A/c Label _____

LC Code _____

Documents Received Self-Certified True Copies Notary

In Person Verification Carried Out By

I hereby declare that I have personally captured the live photograph and original document image of the customer, _____ as part of the KYC process.

I confirm that the images have been taken in the customer's presence and accurately represent their identity.

Employee Name _____

Date

Employee Code _____

 Employee Signature

Employee Branch _____

Declaration by the Branch

I hereby declare that this application form is received from the customer and is complete in all respects. I also confirm that all relevant documents have been obtained and verified as per the product extant guidelines. The Application form may be processed and Prepaid Instrument be issued.

Employee Name _____ Employee Designation _____

S.S. Code _____ Employee Signature _____