

Promo Code:

Application No:

ELITE ARTHA ACCOUNT OPENING FORM FOR NON RESIDENT INDIVIDUALS



Please open the following account

Type of Accounts : NRE Savings NRO Savings Both NRE CA NRO CA BothMode of operation Singly Either / Anyone or survivor Jointly (Debit / ATM card not applicable) Minor under guardian Former / Survivor

CLIENT INFORMATION

FIRST APPLICANT

SECOND APPLICANT

BASIC DETAILS	UCIC (If Existing Customer)								
	First Name								
	Middle Name								
	Last Name								
	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Third Gender					
	Date of Birth	<input type="checkbox"/> D	<input type="checkbox"/> D	<input type="checkbox"/> M	<input type="checkbox"/> M	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y	<input type="checkbox"/> Y
	Father's Name								
	Mother's Maiden Name								
	Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Others					
	Spouse's Name								
PAN Number	<input type="checkbox"/> / Form 60 <input type="checkbox"/>								
Aadhaar Number	<input type="checkbox"/> Optional								
Politically Exposed Person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Related to PEP						
NRI Status	<input type="checkbox"/> NRI(Indian Passport) <input type="checkbox"/> PIO(Foreign Passport) <input type="checkbox"/> Sea Farer								
Country of Residence									
Nationality									
Passport No & Issuance date									
Issuing Country									
Expiry date									
Place of Issue									
Visa Type	<input type="checkbox"/> Visa	<input type="checkbox"/> OCI Card	<input type="checkbox"/> CDC						
Document Type & No									
Place of Issue									
Issue Date	Expiry Date								
Are you a US Person	<input type="checkbox"/> No	<input type="checkbox"/> Yes							
	<input type="checkbox"/> If yes <input type="checkbox"/> US Citizen <input type="checkbox"/> Green Card Holder <input type="checkbox"/> Born in US								
Social Security No	For US Resident			For US Resident					
Address for Communication	<input type="checkbox"/> Overseas Address	<input type="checkbox"/> Indian Address							
Overseas Address									
	Landmark								
	City	State							
	Pincode	Country							
Overseas Mobile No	<input type="checkbox"/> + <input type="checkbox"/> I <input type="checkbox"/> S <input type="checkbox"/> D - <input type="checkbox"/>			<input type="checkbox"/> + <input type="checkbox"/> I <input type="checkbox"/> S <input type="checkbox"/> D - <input type="checkbox"/>					
Indian Address									
	Landmark								
	City	State							
	Pincode	Country							
Indian Mobile No	<input type="checkbox"/> +91 <input type="checkbox"/>			<input type="checkbox"/> +91 <input type="checkbox"/>					
Email ID	(Alerts will be sent to this Email id.)			(Alerts will be sent to this Email id.)					
Mobile No for SMS Alert	<input type="checkbox"/> Overseas Mobile No <input type="checkbox"/> Indian Mobile No (Alerts Will be Received Only by 1st Applicant)								

*All the fields in page 1 are mandatory except the fields marked as optional

ACKNOWLEDGEMENT - CUSTOMER COPY

I have applied for NRE Savings NRO Savings Both Others Variant of Account : Regular Eva ELITE EPIC

Product Name: _____ in the name of Mr/Mrs/Ms./M/s: _____ Application No: _____

With an initial payment cheque number: _____ of Rs. _____, in words : Rs. _____

From Bank : _____. I also confirm that I have read and understood the terms and conditions pertaining to the account, and the

Officer: Mr. _____ has explained all the details pertaining to the account in detail.

Nomination Registered : Yes No Name of Nominee _____

Officer Signature: _____ Name of Bank Officer: _____ Phone Number: _____

OCCUPATION & ACCOUNT ACTIVITY

FIRST APPLICANT

SECOND APPLICANT

*Purpose of this Account:	<input type="checkbox"/> Household Expenses <input type="checkbox"/> Savings/Investments	<input type="checkbox"/> Others(Please specify)
*Source of funds	<input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Inheritance <input type="checkbox"/> Investments	<input type="checkbox"/> Savings <input type="checkbox"/> Sale of Property <input type="checkbox"/> others.....
	<input type="checkbox"/> upto 2 years <input type="checkbox"/> 2-5 years <input type="checkbox"/> Above 5 years	
*No. of years in Foreign Country	<input type="checkbox"/> Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Business <input type="checkbox"/> Student	
*Occupation Type	<input type="checkbox"/> Seafarer <input type="checkbox"/> IT <input type="checkbox"/> Housewife <input type="checkbox"/> Unemployed	<input type="checkbox"/> Retired <input type="checkbox"/> others
a) If salaried, employed with	<input type="checkbox"/> Public Ltd. Company <input type="checkbox"/> Govt. <input type="checkbox"/> Private Ltd. Company	
	<input type="checkbox"/> PSU <input type="checkbox"/> MNC <input type="checkbox"/> others.....	
Name of the Employer		
Designation		
b) If Self-employed, profession	<input type="checkbox"/> CA <input type="checkbox"/> Doctor <input type="checkbox"/> Trader <input type="checkbox"/> Lawyer	<input type="checkbox"/> Exporter/Importer <input type="checkbox"/> Engineer <input type="checkbox"/> others.....
c) If in business since	<input type="checkbox"/> <input type="checkbox"/> Years <input type="checkbox"/> <input type="checkbox"/> Months	Date of Incorporation
Nature of Business	<input type="checkbox"/> Manufacturing <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture	<input type="checkbox"/> Stock Broker <input type="checkbox"/> Trader <input type="checkbox"/> Real Estate <input type="checkbox"/> Others.....
Name of the Company/ Firm		
Type of Company/ Firm	<input type="checkbox"/> Public Limited <input type="checkbox"/> Private Limited <input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership <input type="checkbox"/> others.....
*Name of Currency in which you are earning		
*Annual Family Income(Equivalent)	<input type="checkbox"/> < USD 30,000 <input type="checkbox"/> USD 30,000-48,000	<input type="checkbox"/> USD 48,000-72,000 <input type="checkbox"/> USD 72,000-1,20,000 <input type="checkbox"/> > USD 1,20,000

<input type="checkbox"/> Household Expenses <input type="checkbox"/> Savings/Investments	<input type="checkbox"/> Others(Please specify)	
<input type="checkbox"/> Salary <input type="checkbox"/> Business Income <input type="checkbox"/> Inheritance <input type="checkbox"/> Investments	<input type="checkbox"/> Savings <input type="checkbox"/> Sale of Property <input type="checkbox"/> others.....	
<input type="checkbox"/> upto 2 years <input type="checkbox"/> 2-5 years <input type="checkbox"/> Above 5 years		
<input type="checkbox"/> Salaried <input type="checkbox"/> Self-employed <input type="checkbox"/> Business <input type="checkbox"/> Student		
<input type="checkbox"/> Seafarer <input type="checkbox"/> IT <input type="checkbox"/> Housewife <input type="checkbox"/> Unemployed	<input type="checkbox"/> Retired <input type="checkbox"/> others	
<input type="checkbox"/> Public Ltd. Company <input type="checkbox"/> Govt. <input type="checkbox"/> Private Ltd. Company		
<input type="checkbox"/> PSU <input type="checkbox"/> MNC <input type="checkbox"/> others.....		
Name of the Employer		
Designation		
<input type="checkbox"/> CA <input type="checkbox"/> Doctor <input type="checkbox"/> Trader <input type="checkbox"/> Lawyer	<input type="checkbox"/> Exporter/Importer <input type="checkbox"/> Engineer <input type="checkbox"/> others.....	
<input type="checkbox"/> <input type="checkbox"/> Years <input type="checkbox"/> <input type="checkbox"/> Months	Date of Incorporation	
<input type="checkbox"/> Manufacturing <input type="checkbox"/> Service Provider <input type="checkbox"/> Agriculture	<input type="checkbox"/> Stock Broker <input type="checkbox"/> Trader <input type="checkbox"/> Real Estate <input type="checkbox"/> Others.....	
<input type="checkbox"/> Public Limited <input type="checkbox"/> Private Limited <input type="checkbox"/> Proprietorship	<input type="checkbox"/> Partnership <input type="checkbox"/> others.....	
<input type="checkbox"/> < USD 30,000 <input type="checkbox"/> USD 30,000-48,000	<input type="checkbox"/> USD 48,000-72,000 <input type="checkbox"/> USD 72,000-1,20,000 <input type="checkbox"/> > USD 1,20,000	

PIO DECLARATION

I hereby declare that I am a Person of Indian Origin and confirm that: (Please pick a choice applicable to you)

A) I held an Indian Passport in the past (or)

B) I belong to a territory that became part of India after the 15th Day of August, 1947 (or)

C) I am a citizen of India by virtue of the Constitution of India or the Citizenship Act, 1955 (57 of 1955)

D) I am a child/ a grandchild/ a great grandchild, who is/ was a citizen of India or of a person referred to in clause A or B (or)

I am a spouse of foreign origin of a citizen of India or spouse of foreign origin of a person referred to in clause A or B or C or D

FIRST APPLICANT

SECOND APPLICANT

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Grand Father Name

Grand Father Name

Spouse Name

Spouse Name

FATCA - CRS STATUS DETAILS FOR

FIRST APPLICANT

SECOND APPLICANT

Customers travelling first time to Overseas as NRI need not provide Tax Identification Number/ SSN Number (USA) and mention "Not Available/Not Applicable" instead. Rest of the details are mandatory

City of Birth		
Country of Birth		
Are you a Tax Resident/ Citizen or Green Card Holder in United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am a tax resident of the countries mentioned below	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Country Name#		
Tax Identification Number (TIN)		
Identification Type (TIN / Other - Please specify)		
Address for Tax Purpose		
PIN _____ State _____		
Address Type for Tax Purpose <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office		

PAYMENT DETAILS AND CHANNEL ACCESS REQUEST

IP Funding:	<input type="checkbox"/> Cheque (Cheque should be crossed A/c payee and drawn payable to Equitas Small Finance Bank A/c <Applicant Name>)		
<input type="checkbox"/> Fund transfer from existing ESBF AC			
Total Amount INR	Cheque / Tran No.	Cheque / Tran Date	Bank Name
Debit Card		Cheque Book	
1st Applicant 2nd Applicant		1st Applicant 2nd Applicant	
NRE International Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		NRE : <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
NRO Domestic Debit Card <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		NRO : <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Channel Access			
1st Applicant		2nd Applicant	
<input type="checkbox"/> Internet Banking <input type="checkbox"/> Insta Alert		<input type="checkbox"/> Internet Banking	
<input type="checkbox"/> Mobile Banking		<input type="checkbox"/> Mobile Banking	

NRE Debit Card is internationally valid VISA/ Mastercard and NRO Debit Card is Rupay Platinum card meant for use within India. Per Non Face to Face A/C Opening.....
Transfer of funds to be done from an NR/overseas account where KYC is complied within 90 days of the account opening.

Choice Account Number :

Use my Overseas Mobile No as NRE Account No & Indian Mobile No as NRO Account No
 Use my choice A/c No: as NRE A/c No: 1 0 as NRO A/c No
 Do not use my Mobile Number as 10 digits of account number as provided for First Applicant. *Allocation of Choice account no is subject to availability

TERMS AND CONDITIONS

- All necessary documentation as mandated by the Regulatory/Bank authorities should be provided for opening the accounts
- In event of no Salary Credits for any continuous three months, the Salary Account will be converted to Savings Regular Account (for Salary accounts)
- The Bank reserves the right to amend any of the services/facilities in any account either wholly or partially at any time by giving 30 days notice to the customer
- All accounts should maintain the stipulated average quarterly balance based on the product program and in the event of non maintenance of the same, charges as applicable to the product variant would be applicable
- The Bank would levy charges and fees with respect to transactions and services and the same would be recovered by a debit to the account. In case of inadequacy of funds to cover the charges, the charges would be appropriated from the credits into the account in lump sum or over a period of time, at the discretion of the Bank, till the entire amount is recovered.
- Savings accounts opened by individuals can be used for non-business purposes only and should comply with the Terms & Conditions of the Bank and extant guidelines of the RBI.
- An account can be opened on behalf of a minor by his/her natural guardian or by a guardian appointed by a Court of competent jurisdiction. The guardian shall represent the minor in all transactions until the minor attains majority upon which the right of the guardian to operate the account ceases. Guardian shall produce timely information of the minor attaining majority and ensure that the account is not continued to be operated by him/her even after the minor attaining majority. In such an event, Bank is not responsible. Account will be frozen if account holder does not re-submit the KYC on attaining major.
- In case there are no transactions initiated by the customer in the account for a continuous period of 2 years for Savings and Current Accounts, the account would be treated as dormant. Activation of a dormant account requires written instructions signed by all account holders and submission of KYC documents and activation shall be initiated at the home branch only.
- In case the welcome kit after account opening is not delivered for reasons such as "no such address, no such person, party shifted or incomplete address" the Bank will be constrained to freeze the account after making necessary efforts to reach the customer.
- For opening of a Current Account, declaration of existing credit facilities with any Bank and its branches is required.
- Complaint, if any, relating to features of any product of the Bank, may be conveyed over our Toll Free No: 1800 103 1222 or you may write to the Customer Service Department of the bank customerservice@equitasbank.com for resolution. If complaint is not resolved satisfactorily within 30 days, you may approach the Banking Ombudsman, Reserve Bank of India, of the region.
- NRE/NRO Current Account are non-interest bearing account.

FORM 60 DECLARATION**FIRST APPLICANT****SECOND APPLICANT**

Form for declaration to be filled by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

If applied for PAN and it is not yet generated, then enter the date of application and acknowledgement number:.....

If PAN not applied, fill estimated total income (including income of spouse, minor child etc. as per section 64 of Income Tax Act, 1961) for the financial year in which the above transaction is held

a. Agricultural income Rs.....

b. Non Agricultural Income Rs.....

I..... do hereby declare that what is stated above is true to the best of my knowledge and belief, I further declare that I do not have a Permanent Account Number and my/our estimated total income (including income of spouse, minor child etc.) computed in accordance with the provisions of Income Tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

NOMINATION

Yes, I/We wish to nominate (as per details below) No, I/ We do not wish to make a nomination in my / our account and declare I/We fully understand the risk and difficulties associated with "No Nomination"

Nomination under section 45ZA of the Banking Regulation Act 1949 Rule 2(1) of the Banking Companies (Nomination Rules) 1985 in respect of Bank deposits, I/ We Nominate the following person to whom in the event of my / our minor's death the amount of the above opened account / Fixed Deposits / Recurring Deposits, may be returned by Equitas Small Finance Bank

NATURE OF DEPOSITS	NAME OF NOMINEE	ADDRESS	RELATIONSHIP WITH DEPOSITOR	AGE	DATE OF BIRTH
	If Nominee is Existing Customer Please mention UCIC				

Nominee Name to be printed on the statements/Advises

Yes No

(Name, Address and Age)

** As Nominee is a minor on this date I/We appoint

..... to receive the amount of deposit in the account on behalf of the nominee

*Signature/Thumb impression
of the depositor

Witness 1 Signature :

Witness 2 Signature :

If Customer has selected no nomination or not selected any option, to be signed by the sourcing officer -

I have clearly explained to the customer the advantages of nomination facility and inspite of the same he/she still does not want to nominate and he/she also refused to provide a specific letter to the effect that he/she does not want to make a nomination

*Employee Signature and Code

If you wish to provide multiple nominees in successive or simultaneous mode, please fill the separate Nomination form available with the branch.

TERMS AND CONDITIONS

I/We have read and understood the Terms and Conditions governing the opening of an account with Equitas Small Finance Bank and those relating to your account and do not accept (a) TMs (b) PMs (c) NMs (d) MMs (e) BMs (f) family Alert Facility (g) Email Statements. If we accept any of the above to be bound by the said Terms and Conditions, including those excluding limiting the Bank's liability. I/We understand that the Bank may, at its absolute discretion, discontinue any of the services completely or partially with atleast 30 days notice to me / us and/or provide an option to switch to other services to me / us. The charges have been explained to me for the respective products. I/We understand that schedule of charges is available on Equitas Small Finance Bank's website. I/We agree that the Bank may debit my/our account for service charges as applicable from time to time. I/We authorise the Bank to disclose from time to time any information relating to my savings account to any parents/ subsidiary, affiliate and associate of Equitas Small Finance Bank, and to the third parties engaged by the bank, for purposes of servicing my account.

i. I/We hereby declare that I am/we are Non-Resident Indian(s) or PIO(s) of Indian origin as defined under Foreign Exchange Management Act (1999) and the applicable regulations, rules, notification, direction, or order made thereunder (collective, "FEMA"). I/We understand that the above account will be opened based on the statements/declarations made by me/us, and I/We also agree that if any of the statements/declarations made herein is found to be not correct in material particular, the Bank is not bound to pay any interest on the deposit made by me/us. I/We hereby undertake to inform you about my/our return to India for permanent residence immediately on arrival and would close or convert the NR account into a Resident account wherever such account is possible at Equitas Small Finance Bank.

ii. I/We agree that no claim will be made by me/us for any interest on the deposit(s) for any period after the date(s) of maturity of the deposit(s), in respect of deposit not withdrawn or renewed after maturity, interest payable by the Bank shall be as applicable to SB account as applicable and not at the contracted rate post the maturity date.

iii. Interest will not be paid on deposits if the NRO term deposit has not been held for a minimum period of 7 days. Similarly for NRE term deposit, no interest will be paid on deposits if held for a minimum period of 12 months.

iv. The Bank computes interest based on 365 days a year irrespective of the actual number of days in the year including leap year.

v. In case of my/travel abroad for employment on temporary visa, I/We undertake to submit regular or permanent visa within 90 days from the date of opening of my/travel account.

vi. I/We undertake to submit KYC documents immediately as and when Bank calls upon me/us to do so.

vii. I/We agree to abide by the terms and conditions of my/travel account and shall not make any transaction or close the account.

viii. I/We hereby confirm that only legitimate dues in India which would include current income like rent, dividend, pension, interest etc., sale proceeds of assets including immovable property acquired out of rupee/foreign currency funds or by way of legacy/inheritance will be deposited in my/travel NRO Account. Assets are not includable in Credit balance gift done by a resident Indian cannot be credited into the NRO account held with the Bank and I/We shall ensure that my/travel credits are not mapped to the NRO account.

ix. I am aware that I am not permitted to utilize the funds held by me in my NRO account for discharging my payment obligations in foreign currency in respect of transactions carried out by me outside India using credit card with international validity issued by any bank.

x. I/We consent to receive information for marketing purposes through telephone/Mobile/SMS/Email from the Bank/its agents. I/We understand that in case we do not consent to receive promotional information through telephone/Mobile/SMS/Email products and services not currently available by me/us, I/We can opt out for "Do Not Call" service through the Banks website www.equitasbank.in or other channels offered by the Bank. I/We agree that this service will not apply to the receipt of transaction advice and information regarding products and services currently available by me/us.

xii. I/We understand that by not providing my country of residence in FATCA declaration, I mean that it either not applicable in my case or I have not yet received my Tax Identification Number in overseas country". I also understand that the information requirements of FATCA are as per CBDT notified rules and I hereby confirm that the information provided by me/us is true/ correct and complete. Please refer to our website www.equitasbank.in for latest SOC.

xiii. I/We hereby confirm that the Bank engages business correspondents, selling agents and Business Facilitators for the purpose of selling/promoting its financial products viz deposits, loans etc and we have no objection for the bank to share our contact details with them and receiving calls from them. I/We are also aware that I/We have the right to approach the nodal officer or customer care department of the bank in case of any grievance in respect of the conduct of such persons/entities. NRE/NRO Current Account are non-interest bearing account.

Declaration: As required under Sec 10(5), Chapter III of FEMA, 1999. I/We hereby declare that the transaction does not involve and is not designed for the purpose of any non-business/non-financial nature. In the event of occurrence of such transactions or any such transactions that I/We understand that if I/We refuse to comply with any such requirement or make any unsatisfactory compliance therewith, Bank shall refuse in writing to undertake the transaction and shall, if has a reason to believe that any contravention/evasion is contemplated by me/us, report the matter to RBI. I/We also hereby agree and undertake to give such information/documents as will reasonably satisfy the Bank about this transaction in terms of the above declaration. I/We also declare that the transaction does not relate to or involve any Specially Designated Nationals and Blocked Persons (SDN)/countries or entities or outfit, notified under the list of the Office of Foreign Assets Control (OFAC), an agency of the United States Dept. of the Treasury. I/We also declare that the transaction does not involve any transaction with any SDN or Blocked Persons (SDN)/countries or entities or outfit, listed under OFAC in any manner. I/We hereby confirm that Equitas Small Finance Bank, shall not be responsible or liable for any of its action or inaction in respect of the transactions undertaken by me/us having nexus with or related or connected to such Specially Designated Nationals and Blocked Persons (SDN)/countries or entities or outfit notified by OFAC.

I understand that, in case of unauthorized transactions in the account, the customer agrees to report the same to the Bank Branch or customer service call center within 7 working days from the date of the incident. In case of delay in reporting beyond 7 working days, the customer liability shall be determined as per the board-approved compensation policy of the Bank, which is available on the Bank's website.

Form for declaration to be filled by an individual or a person (not being a company or firm) who does not have a permanent account number and who enters into any transaction specified in rule 114B

If applied for PAN and it is not yet generated, then enter the date of application and acknowledgement number:.....

If PAN not applied, fill estimated total income (including income of spouse, minor child etc. as per section 64 of Income Tax Act, 1961) for the financial year in which the above transaction is held

a. Agricultural income Rs.....

b. Non Agricultural Income Rs.....

I..... do hereby declare that what is stated above is true to the best of my knowledge and belief, I further declare that I do not have a Permanent Account Number and my/our estimated total income (including income of spouse, minor child etc.) computed in accordance with the provisions of Income Tax Act, 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

NATURE OF DEPOSITS	NAME OF NOMINEE	ADDRESS	RELATIONSHIP WITH DEPOSITOR	AGE	DATE OF BIRTH
	If Nominee is Existing Customer Please mention UCIC				

Nominee Name to be printed on the statements/Advises

Yes No

(Name, Address and Age)

** As Nominee is a minor on this date I/We appoint

..... to receive the amount of deposit in the account on behalf of the nominee

*Signature/Thumb impression
of the depositor

Witness 1 Signature :

Witness 2 Signature :

If Customer has selected no nomination or not selected any option, to be signed by the sourcing officer -

I have clearly explained to the customer the advantages of nomination facility and inspite of the same he/she still does not want to nominate and he/she also refused to provide a specific letter to the effect that he/she does not want to make a nomination

*Employee Signature and Code

If you wish to provide multiple nominees in successive or simultaneous mode, please fill the separate Nomination form available with the branch.

Aadhaar Consent, I/We am/are voluntarily submitting a copy of myAadhaar Card without redacting the Aadhaar number, as I/We wish to avail / desirous of availing Direct Benefit Transfer

I/ We hereby confirm that I/we declared the details in the above Form-60 section

I/We confirm that I/we have provide the details in the Nomination section.

The Eligibility criteria for ELITE ARTHA relationship is Combined ELITE ARTHA Family Savings of INR 30 Lakhs (or) combined TRV of INR 1 Cr . Maximum Family members allowed are 8 per Family/Group.

I/ We also confirm that the account was opened by bank officer Mr./ Ms.....

.....and

I/ we here by confirm that I/we have signed all the necessary documents for the purpose of opening the account / program.

1
PLEASE PASTE LATEST
PASSPORT SIZE PHOTO OF THE
FIRST APPLICANT
PHOTO TO BE SIGNED ACROSS.
FIRST APPLICANT SIGN BELOW

1
FIRST APPLICANT

2
PLEASE PASTE LATEST
PASSPORT SIZE PHOTO OF THE
SECOND APPLICANT
PHOTO TO BE SIGNED ACROSS.
SECOND APPLICANT SIGN BELOW

2
SECOND APPLICANT

Bank use Source of lead Branch Sales BC/BF Others

Lead generator Code Lead Convertor Code

KYC Certification (Lead Convertor)

The customer has signed in my presence and I have done KYC verification & have visited the customer at the given mailing address. I hereby declare that I have explained all details about the product and have handed over a copy of the brochure and schedule of charges and have explained all the terms and conditions in detail to the customer.

Signature

Emp Name

Pre welcome calling done by

Signature

Emp Code/Name

Emp Code

Branch Manager / SOM Name :

Branch Manager / SOM Code :

Date

Signature of Branch Manager / SOM With Branch Round stamp

.....

ADDITIONAL DECLARATIONS (PLEASE FILL IF APPLICABLE)

MINOR DECLARATION FORM

Type of Guardian: Father Mother Court Appointed Testamentary Guardian

Full Name of Guardian Mr./Ms.

I hereby declare that the date of birth of the minor who is my is DD/MM/YYYY and I am his/her natural and lawful guardian/ guardian appointed by court order, dated ____/____/____ (Copy Enclosed). I shall represent the said minor in all future transactions of any descriptions in the above account until the said minor attains majority. I indemnify the Bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account.

Guardian Signature

TEMPORARY ENTRY / WORK / RESIDENCE VISA DECLARATION

The Manager,
Equitas Small Finance Bank Ltd.,
..... Branch

I/We..... (Name of Account Holder/s), the undersigned, are desirous of opening a NRE/NRO Account with

Equitas Small Finance Bank.

I/ We have submitted to the Bank my/our Entry/Work/Residence Visa/ dated.....(visa issuance date/s) expiring on.....(visa expiry date/s) for this purpose.

I/We hereby agree to furnish the Bank with the copy(ies) of my/ our regular visa(s) immediately on issuance and confirm that I/we have no objection if the Bank freezes transactions in the said account(s) or closes the said account(s) in case of my/our non-submission of regular visa copy(ies) within 3 months from the date of expiry of visa.

I/ We also confirm that this procedure will also apply in case I/we are joint holders of the account(s).

Signatures

FIRST APPLICANT

SECOND APPLICANT

SEAFARER DECLARATION FORM

Part A - Declaration by Mariner who is on break

I hereby confirm that I have just returned after completion of my contract with (Company)

Registered in (Address of the principals).

I am on break for..... days / months and will be joining on a new contract on / by.....

I request you to kindly open an NRE/NRO account in my name on the basis of the following documents submitted.

- Passport copies indicating my previous trip abroad
- Most recent contract copy
- Copy of CDC Book

Part B Applicable for 1st Time Sailor

Declaration by Mariner proceeding for voyage on fresh contract

I hereby confirm that I am proceeding on a contract with (company) registered in (address of the principals).

I will be joining on the contract on/ by.....

I request you to kindly open an NRE/NRO account in my name on the basis of the following documents submitted:

- Passport copy
- Contract confirmation

I understand that the account will be opened in block status and I will not have access to the same until I submit the following documents:

• Passport pages showing exit & entry stamp of my journey outside India

- Contract copy
- Visa
- Copy of CDC Book indicating the trip abroad (applicable for cargo ship)

I also confirm that I will inform the bank in case I am unable to proceed on the contract and have the non-resident accounts opened in my name redesignated to resident accounts.

Yours Sincerely, _____

CUSTOMER CONSENT TO RECEIVE TRANSACTION OTP ON REGISTERED EMAIL ID MENTIONED IN ACCOUNT OPENING FORM

I do not agree to receive the OTP through Registered Email ID:

I hereby agree to receive the OTP in my Registered Email ID and undertake to the Bank as follows:

1. That the Bank would trigger OTP to my email ID registered with the Bank.
2. Bank has the obligation only to send the OTP in a secured manner.
3. Bank shall not be responsible for the misuse of OTP for any compromise of email or mobile number or OTP in any manner and/or for any reason whatsoever. It shall be my responsibility to prevent or not to allow the misuse of OTP.
4. In case of misuse of the OTP in any manner whatsoever, Bank shall neither be liable nor responsible for any such compromise or misuse of the OTP.
5. I undertake to inform the bank immediately on any change in email ID and/or mobile number.

I undertake and agree to indemnify and keep the Bank indemnified and harmless from actions as per law, claim, compensation etc., against the Bank that may arise from any quarter whatsoever, for the reason of compromise of the OTP at my end or arising out of breach of the undertakings herein or in any other document pertaining to my above mentioned account.

Signature : _____

Date : _____

Name :

Place :



Phone Banking

Toll Free Number : 1800 103 1222



Email

nri@equitasbank.com



Net Banking

www.equitas.bank.in