

SHIVALIK SMALL FINANCE BANK

SAVING ACCOUNT OPENING FORM FOR INDIVIDUALS

ACCT-DEP.

Branch :

Account No.

Customer ID

1. Activity ID/Ref No.

2. Entered by

3. Checked by

Date :

Account Type New Existing

Canvas ID / Emp. No.

C-KYC Number *(Mandatory for KYC update request)*

PLEASE OPEN AN ACCOUNT AS PER DETAILS GIVEN BELOW :

SAVINGS NORMAL (1001)
 SAVINGS GOLD (1012)
 SAVINGS DIAMOND (1013)
 SAVINGS STAFF (1003)

CORPORATE SALARY ACCOUNT (1026)
 SAVINGS SCHOLARSHIP (1005)
 OTHERS

Please enter initial amount

Cheque No.

Cash/Cheque Bank Branch

APPLICANT DETAILS :

1st Applicant : Cust. ID :

2nd Applicant : Cust. ID :

3rd Applicant : Cust. ID :

MODE OF OPERATION

Self
 Either or Survivor
 Power of Attorney
 Minor Self Operated
 Others

Anyone or Survivor
 Former or Survivor
 Jointly by All
 Minor Guardian Operated

AADHAR CARD LINKAGE (Please link my Aadhar card to SB account)

Cust ID 1 : Aadhar card No. : linked with A/c

Cust ID 2 : Aadhar card No. : linked with A/c

Cust ID 3 : Aadhar card No. : linked with A/c

I/We confirm that I do not have any existing customer ID apart from mentioned above. In case found otherwise, Bank reserves the right to consolidate the customer ID's as it may decide, without any prior notice to me.

CARD FACILITY ATM cum Debit Card

Card Required Primary A/c Holder Debit Card Number/Ref. Number (Office Use Only)

Add on card 1
 Normal Platinum

Add on card 2
 Normal Platinum

Dispatch Mode Hold at Branch/ Hand Delivery By Post

OTHER SERVICES

Please tick for availing the other banking Services :

At Par/ Multicity Cheque Book
 SMS Banking
 Passbook/e-statement
 Internet Banking *(Please fill form on page 4)*

CUSTOMER SIGNATURE

Applicant(s) must sign in the presence of bank's official

Name of 1st Applicant Signature of 1st Applicant

Name of 2nd Applicant Signature of 2nd Applicant

Name of 3rd Applicant Signature of 3rd Applicant

DECLARATION IN CASE OF ILLITERATE

"I hereby agree that the account will be operated by me, by personally calling at the counter and that the Bank will not be liable to pay, except as above". Contents of this form have been clearly explained to me in the language I understand. The rules of the business and other terms & conditions have also been explained to me and I have understood the same."

DECLARATION IN CASE OF STAFFEmp. Code

I hereby declare that I am the employee of Shivalik Bank and the amount deposited in the account belongs to me. The account is being maintained in joint names for the sake of convenience only. (The name of the staff shall be first in case of joint accounts).

DECLARATIONS/UNDERTAKINGS BY APPLICANTS

"I/we confirm having received, read and understood the accounts rules and hereby agree to be bound by the terms and conditions outlined in these rules which govern the account (s) which I/we am/are opening with Shivalik Small Finance Bank and amendments there to made from time to time will be binding on me/us when displayed by the bank on its notice board or on its website and those relating to various services offered by the bank including but not limited to debit card/Internet banking/SMS banking/Mobile banking/Tele-banking and other facilities listed in this form. I/we am/are aware that the usage of these facilities is governed by the terms and conditions which are displayed on www.shivalikbank.com, the site maintained by Shivalik bank and I/we have reviewed the contents of the same. I/We understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me/us. I/we agree that the bank may debit my account for service charges as applicable from time to time. I/we declare that the transactions in the account will be made from legitimate sources only the account will not be used for any purpose contrary to law. I/we declare that the information furnished above is true and correct to the best of my knowledge".

I/We agree to abide by the Bank's rules relating to the conduct of the above Accounts / Services / Products.

I/We declare that I am not recipient of contribution/donation/receipts from any banned organization.

I/We hereby authorize you to honour all cheques / orders / bills / noted drawn on this account, which may be drawn by me/us, and to debit such cheques or orders to my account so long the amount is in credit or otherwise.

My/Our personal KYC details may be shared with Central KYC Registry.

I/We hereby consent to receiving information from central KYC Registry through SMS, Email on my/our registered number or/and email address.

Yours faithfully

Name: Address:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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1st Applicant**2nd Applicant****3rd Applicant****Signature/Thumb Impression(Male : LTI & Female : RTI)****Witness (In case of Thumb Impression)**
Signature of Witness**FAMILY BANKING**

Family Member	Name	Age	CIF	SB account with us/ A/c no.	Locker with us	FD with us / A/c No.	RF with us / A/c No.
Self					<input type="checkbox"/> YES <input type="checkbox"/> NO		
Father					<input type="checkbox"/> YES <input type="checkbox"/> NO		
Mother					<input type="checkbox"/> YES <input type="checkbox"/> NO		
Spouse					<input type="checkbox"/> YES <input type="checkbox"/> NO		
Children 1					<input type="checkbox"/> YES <input type="checkbox"/> NO		
Children 2					<input type="checkbox"/> YES <input type="checkbox"/> NO		

Signature of the Authorized Official

Emp. Code

Signature of the Branch Head

Emp. Code **ACKNOWLEDGMENT OF NOMINATION**Nomination received & registered on : Registration No. Account Name Account Number Customer ID **For Shivalik Small Finance Bank**

Authorised Signatory

INTERNET BANKING APPLICATION FORM

REQUEST FOR ACTIVATION OF INTERNET BANKING (Registration of mobile no. and valid SSFB ATM Card is must to avail this service)

FULL NAME <input style="width: 90%;" type="text"/>	DATE <input style="width: 80%;" type="text"/>
DOB <input style="width: 80%;" type="text"/>	CUSTOMER ID <input style="width: 80%;" type="text"/>

RELATIONSHIPS WITH BANK :

S.No.	Name of other A/c signatories in SB A/c	A/c Type (Single/Joint)	A/C NO.	Access Type Required (Y/N)		
				Full Access	No Access	View Only

TERMS & CONDITIONS

If the customer id of above accounts have mode of operation Self/Either or Survivor, you may do the following.

- All non-financial transactions like statement download, card block etc.
- You may request for any financial transaction like RTGS/NEFT online in a secured manner, it is only a request which will be treated manually from our backend team and further will have many validation like maker checker and calling to the customer to check his/her authenticity. It is same like you can request through email but it is faster and secure comparatively.

If the customer id of above accounts have mode of operation Jointy, you cannot request for any financial transaction.

I/We request you to activate net banking facility for me so that I may initiate self-registration process. I confirm having read terms and conditions of the Bank for providing Internet Banking facility as published on bank's website and which are subject to changes from time to time.

I/We submit the following information (this is mandatory):

- a) My registered Mobile no. is for communicating to me One-Time-Passwords (OTPs) / other alerts.
- b) My email id is already registered with you.
- c) I/We confirm that I/We have Shivalik Bank ATM-cum-Debit Card No./Ref. No. which is active.
- I/We have read & understood all the Terms & Conditions for Internet Banking Activation and agreed for the same.

Yours faithfully,

S.No.	Full Name	Relationship in account	Specimen Signature
1st applicant			
2 nd applicant			
3 rd applicant			

FOR OFFICE USE ONLY

I hereby confirm that I have checked/updated and verified the following:

- Date of Birth
 Mobile No.
 ATM-cum-Debit Card
 Signature with bank records
 KYC is completed.
- I/we have done the necessary deduplication check on all the applicants.
- I have checked the mode of operation and account type as per declared by customer.
- I have checked/Updated email id in CBS with customer id.

Risk Category of the customer as per CBS

- Low Risk
 Medium Risk
 High Risk

I recommend initiation of internet banking facility to the applicant.

Checked By : (Signature Emp. Code of Authorized Officer)

Verified By : (Signature & Emp. Code of Authorized Officer)

Signature _____

Signature _____

Emp. Code

Emp. Code

Date : _____

Date : _____

CUSTOMER ACKNOWLEDGMENT & RULES (CUSTOMER COPY)

- Interest rates on saving account have been de-regularized by RBI. The rates may vary from time to time and will be calculated on daily basis on clear balance. The interest will be credited to savings account on quarterly basis.
- Nomination facility is available for all types individual's deposit accounts. Bank extends pass book facility on savings bank account.
- The savings bank account should be used to route transactions of only non-business/ non-commercial nature. In the event of occurrence of such transaction or any such transaction that may be constructed as commercial/ business/ dubious or undesirable, the bank reserves the right to unilaterally freeze transactions in any such account and/or close the account.
- Customer should carefully examine the entry made in their statement of accounts/ passbook and draw bank's attention to any error/ omission/ discrepancies that may be discovered within 30 days from the date of entries falling which the same shall be deemed to be correct and accepted by the customer and the customer shall not be entitled to questions that the correctness/accuracy there of.
- The account would be treated as dormant if there are no transactions in the account for a period of two years. A request for activation of account has to be made by the customer in writing by visiting a nearest branch with his original identity proof documents acceptable to the bank. Accounts which are not operated for ten years will be marked as 'Unclaimed'.
- Satisfactory conduct of the account entails maintaining stipulated average monthly balance (wherever applicable) as well as sufficient balance to honour cheques issued to third parties. If there are high incidences to the contrary, the bank reserves the right to close the account under intimation to the customer. Any non-maintenance of stipulated minimum balance will attract service charges as per banks general schedule of features and charges which available with our branch and on the bank's website www.shivalikbank.com.
- The bank reserves the right to close any account which is not operated satisfactorily dormant with prior notice.
- The customer needs to intimate bank in writing of any change in the contact details/address. Customers need to submit documentary proof wherever applicable.
- The age considered for minors is below 18 and for senior citizen is 60 years and above.
- The bank may disclose information about customers account if required or permitted by any law, rule or regulation or at the request of any public or regulatory authority or if such disclosure is required for the purpose of preventing fraud, without any specific consent of the customer.
- The bank reserves the right to make any changes, alteration, cancellations in the above rules at any time without notice. Any person opening the account shall be bound by the rules governing the account.