

NRI Account/ Deposit Form Checklist:

1. Please fill the form Completely in Capital Letters, preferably using Black Pen.
2. Any alterations on the form will need full signatures of the applicants near the alteration.
3. Please attach the documents as per the checklist provided below, along with Initial payment cheque from your existing bank account in India. The cheque should be in favor of EQUITAS SMALL FINANCE BANK A/C - (Your Name). In case you want to fund your account by Demand Draft, then as per regulation you need to attach the proof that the DD was made from your Indian Non-Resident Bank Account. Kindly note that we do not accept cheques from Overseas Bank Account.
4. Initial Payment shall not be paid by cash.
- 5 All photocopies have to be self-attested. Additional attestation to be done by either Equitas SF Bank Official or Your Banker or Indian Embassy or Any overseas legal professional authorised to Notarize documents.
6. Please ensure that the signature on the form is the same as on your passport and the documents submitted along with the form.
- 7.As per New NR KYC Grid - OVD to be certified on all KYC submitted by customers to be mandatorily certified by (i) Authorised officials of overseas branches of Scheduled Commercial Banks registered in India.(ii) Branches of overseas banks with whom Indian banks have relationships (iii) Notary Public abroad (iv) Court Magistrate (v) Judge (vi) Indian Embassy / Consulate General in the country where the NR resides.

Mandatory Documents		Additional Documents
If you are NRI (Indian Passport Holder)	If you are a Person of Indian Origin (PIO)	Employed with Merchant Navy (Seafarers)
<input type="checkbox"/> Copy of Indian Passport	Copy of Overseas Country Passport	Merchant Navy Declaration (Part of Application Page i)
<input type="checkbox"/> Copy of Valid Visa/Work/ Residence Permit	Copy of Overseas Citizen of India Card (OCI) or Copy of Old Indian Passport held by self or parents or grand/great grand parents as PIO Proof	Valid Contract Copy or Original letter from Principal/Agent/Liaison
<input type="checkbox"/> Proof of Communication Address (Refer note below of Indian or Overseas Address as selected on Account Opening Form)	Proof of Communication Address (Refer note below of Indian or Overseas Address as selected on Account Opening Form)	Original Letter from the Company providing 1. Name of the Employee 2. Employment in the Principal shipping Company 3. Name of Vessel and Flag 4. Name of the Port of Joining 5. Commencement of Contract 6. Tenure 7. Salary in Foreign currency 8. Passport Number and CDC
<input type="checkbox"/> Latest Passport Size Photo	Latest Passport Size Photo	Latest Passport Size Photo
<input type="checkbox"/> PAN Card Copy or Form 60 (Part of Account Opening Form)	PAN Card Copy or Form 60 (Part of Account Opening Form)	PAN Card Copy or Form 60 (Part of Account Opening Form)
<input type="checkbox"/> Initial Payment cheque from other Bank NRE. NRO Account. We do not accept Foreign currency cheque.	Initial Payment cheque from other Bank NRE. NRO Account. We do not accept Foreign currency cheque.	CDC Booklet Copy(Latest discharge stamp/ last date of arrival in India or a declaration of sailing for the first time), C1D Visa if available
<input type="checkbox"/> Total of Four Signatures, please make sure that you have not missed any (including one across photo on page 5)	Total of Five Signatures, please make sure that you have not missed any (including one across photo on page 5)	Total of Five Signatures, please make sure that you have not missed any (including one across photo on page 5)

Copy of Valid Passport: Passport Pages clearly indicating Name, Address, Signature, Photograph, Issue & Expiry Date and Seal/Sign of the Issuing Authority Pages to be attached.

Valid Visa: Copy Work Visa/ Resident Permit Card to be enclosed. For Employees going on first time overseas on employment must submit Offer letter and air tickets along with Visa. Students to submit Admission letter and Student Visa valid for a period of one year or more.

PIOs: For person of Indian Origin, Overseas Citizen of India OCI card is required. If OCI Card is not there then one of the following need to submitted:-

1. Copy of Old Indian Passport of Self,
2. Copy of Indian Passport/ OCI Card of Spouse,
3. Copy of Old Indian Passport of Parents/Grand/Great Grand Parents,
4. PIO Affidavit.

Overseas Address Proof: Any one of the following Document can be Submitted 1. Utility Bill (Electricity/Gas/Telephone/Water), 2. Bank Statement, 3. Credit Card Statement (All the Documents should not be more than 3 months old at the time of submission).

Indian Address Proof: Any one of the following document can be submitted 1. Passport Copy 2. Indian Driving License (Except for Maharashtra) 3. Aadhar Card 4. Voter ID or any other RBI authorised address proof (refer website)

Initial Payment: Initial Payment cheque is mandatory to open NRE/NRO Accounts.

Non Face to Face Application:

For Non face-to-face account opening, first payment to be effected from the applicant's KYC complied account with another bank in India or overseas. Initial Payment is mandatory to open NRE/NRO Accounts Non Face to Face. If for any reason the same is not available, the Bank will open the NR Account in Debit Freeze mode and the debit freeze would be removed post receiving funds from the self-account of the customer either by transfer within India or by remittance form abroad bank account.

Note - First remittance from an exchange house does not qualify to be considered as IP payment for regularizing the NR account's debit freezing.

List of Permitted Countries under Self Attestation :- Argentina, Australia, Austria, Belgium, Brazil, Canada, China, Denmark, Finland, France, Germany, Greece, Bahrain, Qatar, Kuwait, Oman, Saudi Arabia, UAE, Hong Kong, Ireland, Israel, Italy, Japan, Luxembourg, Mexico, Netherlands, New Zealand, Norway, Portugal, Russian Federation, Singapore, South Africa, Spain, Sweden, Switzerland, Turkey, United Kingdom and United States of America.

Customers for the above list of countries can send self-certified documents and KYC (Passport, Proof of NRI Status, and Communication Address) with the words 'TRUE COPY'. The same should accompany along with the Initial Payment cheque and one of the following document in ORIGINAL for opening of NR account.

A signed NRE/NRO Rupee cheque drawn in favour of Equitas Small Finance Bank A/c - (your name) on your existing account in India towards Initial Payment (IP).

AND any one of the following document in original

An original Overseas bank account statement (not more than 3 months old) OR

Original Overseas credit card statement (not more than 3 months old) OR

Original Overseas utility bill (electricity/piped gas/telephone/water - not more than 3 months old)

Documentation for Non FATF countries and countries other than above Passport, Proof of NRI status & communication address need to be attested by any one of the following.

1. Authorised officials of overseas branches of Scheduled Commercial Banks registered in India (OR)
2. Branches of overseas banks with whom Indian banks have relationships (OR)
3. Notary Public abroad (OR)
4. Court Magistrate (OR)
5. Judge (OR)
6. Indian Embassy / Consulate General in the country where the non-resident customer resides.

Additionally a signed NRE/NRO Rupee cheque drawn in favour of Equitas Small Finance Bank A/c - (your name) on your existing account in India towards Initial Payment (IP). If for any reason the same is not available, the Bank will open the NR Account in Debit Freeze mode and the debit freeze would be removed post receiving funds from the self-account of the customer either by transfer within India or by remittance form abroad bank account.

TERMS AND CONDITIONS - CUSTOMER COPY

1. CLIENT DECLARATION FOR PRODUCT AND SERVICE AVAILED OUTSIDE THE HOME COUNTRY

I/We hereby certify that I am/we are the resident(s) of(overseas country) and that we have availed of this product/ facility/ service on a trip to INDIA and submitted all documents relating to such product or service while in (City/Town) in India hereby represent, warrant, agree and undertake on a continuing basis that: (a) There are no legal or regulatory prohibitions or impediments against my/ our maintaining my/our relationship with Equitas Small Finance Bank Ltd. (the Bank), including making the aforementioned investment(s)/ availing myself/ ourselves of the aforementioned facilities or services from time to time. (b) In making the aforementioned investment(s) availing myself/ourselves of the aforementioned facilities or services from time to time. I/We are in full compliance with all laws and regulations, including, without limitation, all applicable exchange control/ taxation laws/ regulations in my/our home country. I/We have already obtained/ shall obtain all necessary regulatory approvals, if required, in connection with any such transactions and shall promptly make all necessary regulatory reporting, if required, to the relevant authorities in my/our home country and I/We agree to furnish to the Bank, upon request copies of the approvals/reports, if any. (c) All decisions to make the aforementioned investment(s)/ availed of the aforementioned facilities or services from time to time are/shall be my/our own independent decisions, and are not made in reliance on any views or opinions, if any, as may be expressed by the Bank or its representatives from time to time, and are arrived at after personal analysis and careful consideration of the risks, benefits, terms and conditions taking into account my/our investments' objectives, financial situation and particular/specific requirements and needs.

I/We hereby request the Bank, its Affiliates and the representatives, associates, service providers and employers of the Bank and its Affiliates, to contact me/us by telephone, or any other possible mode to communicate with me from time to time in connection with servicing issues pertaining to the products/ relationship which I/We have with the Bank or its Affiliates from time to time. In addition to the above, the Bank, its Affiliates and the representatives, associates, service providers and employees of the Bank, its Affiliates may contact me/us from time to time by telephone, or any other possible mode to communicate in connection with new products, services of the Bank or its Affiliates. I/We shall indemnify the Bank and its representatives, employees and agents against all losses, costs, expenses, suits, damages whatsoever arising out of or in connection with their assistance and their services that may be provided to me/us for helping me/us invest in the aforementioned products/ avail myself/ourselves of the aforementioned facilities or services in my/our name (s). I/We acknowledge that the Bank relies on my/our representations, warranties, undertakings and statements contained herein in agreeing to establish/continue the relationship with me/us and in agreeing to provide the aforementioned facilities/services to us from time to time.

2. PEP DECLARATION

PEP Declaration : Politically Exposed Persons(PEP) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, Senior Politicians, Senior Government / Judicial / Military Officers, Senior Executives of State-Owned Corporations, Important Political Party Officials, etc. In addition, a 'Politically Exposed Person' includes the immediate family members of a Politically Exposed Person such as spouses, children, parents and other relatives. Politically Exposed Person includes even close associates like advisors, secretaries and other associates of a Politically Exposed Person who conduct transactions on behalf of a Politically Exposed Person.

3. GENERAL DECLARATION

The eligibility criteria for ELITE Relationship is combined Average Monthly Balance (AMB) of INR 5 Lacs at a Family / Group Level (or) Combined Family Total Relationship Value (TRV)* of INR 25 Lacs ELITE measures only Family/ Group Level Relationship of the client with Equitas Bank with maximum Family Members allowed at 8 per Family/ Group. The evaluation for eligibility criteria of the programme will be done once in six months.

*TRV includes the average monthly savings and salary account balances, Fixed deposit value, Mutual funds and Insurance premium paid with Equitas Bank.

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 various services including but not limited to (a) ATMs (b) Phone Banking (c) Net Banking (d) Debit Cards (e) Mobile Banking (f) Bill Pay facility (g) Insta Alert Facility (h) Email Statements. I/ we accept and agree 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 30 days notice to me / us and or provide an option to switch to other services to me/ us. I/We am aware and agree that the Bank may debit my 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 is 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 particulars you are not bound to pay any interest on the deposit made by me/us. I/We hereby undertake to intimate you about my/our return to India for permanent residence immediately on arrival and would close or convert the NR accounts into a Resident account wherever such account is possible to hold and maintain with 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 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 if the deposit is not 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. I/We agree that the bank to consider any credit confirmations like sources of funds, purpose of transaction etc., through my/our Email ID Registered with the Bank.

vi. I/We agree to abide by the provisions of the Non-Resident (External) Account / Non-Resident (Ordinary) Account Scheme / Debit cards and for other products availed by me / us as specified in the FEMA and RBI guidelines issued time to time.

vii. I understand that Equitas Small Finance Bank does not offer Foreign Currency Non-Resident (FCNR) Deposits and Resident Foreign Currency (RFC) Deposits.

viii. I/ We would confirm that all debits to my / our accounts for the purpose of investment in India and credits representing sale proceeds of investments in India are covered either by general or special permission of RBI. I will ensure that investments in shares / securities or immovable properties in India out of funds held in my / our account with you are governed by respective regulations of Reserve Bank of India. The Savings Bank Account would be used to route transactions of only non-business/non-commercial nature, in the event of occurrence of such transactions or any such transactions that may be construed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and/or close the accounts, and the bank shall have the authority to report such instance to regulator as the case may be.

ix. I/We hereby declare 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/our NRO Account. I am / We are aware that the Credits representing gift / donation / loan from a resident Indian cannot be credited into the NRO account held with the Bank and I/We shall ensure that such credits are not made into the NRO account in such event, Bank shall have the right to freeze or close the account.

x. I/We have understood that I/We am/are required to maintain combined Average Monthly Balance (AMB) of INR 5 Lacs at a Family / Group Level (or) Combined Family Total Relationship Value (TRV)* of INR 25 Lacs for NRE/NRO Savings account. The evaluation for eligibility criteria of the programme will be done once in six months. I/We are further aware that on non-fulfillment of the eligibility criteria the Bank reserves the right to regrade the customer or simply withdraw the prevailing Program Features, with or without prior intimation. In case a customer has originally signed up for ELITE Relationship at the time of account opening and has failed to maintain any one of the mentioned eligibility criteria, his relationship will be converted to default EQUITAS Regular Savings Account. In case a customer has been upgraded to ELITE Relationship and has failed to maintain any one of the eligibility criteria, his relationship will be regraded to the respective account which was originally signed up by him prior to upgrade. I am/ We are also aware that the charges, as above are subject to changes, at the sole discretion of the Bank.

xi. I/We will refer the latest fees & charges schedule and Terms and Conditions for NRE/NRO Savings Account/ Fixed Deposits on www.equitasbank.com and also at the Bank Branch.

xii. I/We understand that in case I/We do not wish to receive promotional information through telephone calls / email / sms on products and services not currently availed by me, I can register for "Do Not Call" service through the Bank's website www.equitasbank.com or other channels that the Bank may offer. I agree that this service will not apply to receipt of advice and information regarding products and services currently availed by me, to help me in fully realizing the benefits of the range of financial solutions designed to make my banking relationship value added and more convenient.

xiii. In the event of the death of one of the depositors, premature termination and payment of Term Deposits held in 'Either or Survivor' or Former or Survivor' or 'any one' basis shall be allowed to the survivor /s. Such payment to survivor/s shall give valid discharge to the bank. Such premature withdrawal shall not attract any penal charge. However, the interest rate shall be the rate applicable for the period the deposit has remained with the bank or the contracted rate, whichever is lower.

xiv. I/We Further affirm that payment of the proceeds of such deposit to the survivor represents a valid discharge of the bank's liability provided. (i) There is no order from a competent court restraining the bank from making the payment from the said account. (ii) That the survivor would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that any person/s may have against the survivor to whom the payment is made.

xv. Where the deposit is held singly and premature withdrawal is required by the nominee in the event of death of the deposit holder. (i) In the event of the death of the depositors, the nominee named for the deposit is entitled to prematurely withdraw the said deposit, if he/she so requests the bank, without seeking the concurrence of the legal heirs. The depositors further affirm that payment of the proceeds of such deposit to the nominee represents a valid discharge of the bank's liability (ii) That the nominee would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that my legal heirs may have against the nominee to whom the payment is made.

xvi. I/We am/are 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.

I/We have read and made the various declarations set forth as well as in the above sections 1 to 3 and in the website of this form and in the website of the Bank. I/We hereby agree to all the terms and conditions and will abide by them.

Customer Copy

ELITE RELATIONSHIP INITIATION FORM - NON RESIDENT INDIVIDUALS



Application Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Application No. <input type="text"/>
<input type="checkbox"/> Face to face <input type="checkbox"/> Non face to face	I-Kit <input type="checkbox"/> Non I-Kit <input type="checkbox"/>



ACCOUNT DETAILS

This single account opening form will be used to open multiple accounts including NRE Saving, NRO Saving, NRE Fixed Deposit and NRO Fixed Deposit.

Please tick whichever account(s) you want to open and cross out whichever is not required.

1st Applicant Name Existing Customer ID: (If any)

2nd Applicant Name Existing Customer ID: (If any)

Please open my NRE Savings A/C NRO Savings A/C NRE Fixed Deposit NRO Fixed Deposit (*Please fill nomination DA1 Form separately for FD A/c at the time of opening SB & FD)

Preferred Branch Name/ City Branch Code

Mode of Operation: Single Either or survivor Jointly (debit / ATM card not applicable) Anyone or Survivor Minor under guardian

MODE OF FUNDING

- Cheque (Cheque should be crossed A/c payee and drawn payable to Equitas Small Finance Bank A/c <Applicant Name>)
- NIL IP Approval Debit from my Account No. for opening FD-NRE/ NRO/NROSB

Product	Total Amount INR	Cheque No	Cheque Date	Bank Name
NRE				
NRO				

TERM DEPOSIT DETAILS

Rupee Deposit: NRE NRO

Period: month(s) day(s)

**Amount Rs. (In words)

Nomination No Yes (Please fill a separate nomination form, If no separate nomination default nominee would be as in savings account)

Interest Frequency (tick any one below)	Maturity Instruction (tick any one below)
Payout <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly	<input type="checkbox"/> Auto renew principal <input type="checkbox"/> Repay principal
Reinvestment <input type="checkbox"/> Cumulative(Default)	<input type="checkbox"/> Auto renew principal & interest <input type="checkbox"/> Auto renew principal & pay interest <input type="checkbox"/> Repay principal & interest <small>(Default if not ticked)</small>

Interest Payment Instruction - Credit my Equitas Account No. OR

Credit my Account No. with Bank City

Account Type Branch IFSC Code (Please attach a cancelled cheque of the account)

#For NRO DTAA benefits in TDS please submit Tax Residency Certificate. **Maximum Retail Fixed Deposit Value is less than Rs. 2 Crores. Please use separate FD Application form for booking Bulk Fixed Deposits of value of Rs. 2 Crores and above.

*Pre-closure penalty of 1% apply on the NRO Fixed Deposits when Pre-closed before the completion of 6 months from the Date of Booking of the Deposit.

FIRST APPLICANT PERSONAL DETAILS

PREFIX	FIRST NAME	MIDDLE NAME	LAST NAME
.....

*Mother's Maiden Name: Father's Name:

* PAN Card No. / Form 60(Fill Annexure - Page ii) DOB Gender Male Female TG

*Passport No. Issuing country

*Passport Date of Issue *Place of Issue: *Expiry Date:

*Type of Visa: *Place of Issue *Visa Issue Date: *Visa Expiry Date:
(Visitor & Business Visas are not allowed)

*OCI Card Number : Date of Issue : Place of Issue : Expiry Date

*For Seafarers CDC No : Place of Issue : Issued Date : Expiry Date

*Status NRI Foreign Citizen of Indian Origin(PIO) Foreign Citizen of Non Indian Origin(Foreigner)

*Marital Status: Married Single Spouse Name Minor: Yes No

*Are you U.S. Person? Yes, I am USA Citizen Green Card Holder Born in USA No, I am not U.S. Person (As required under FATCA)

*Country of Residence *Nationality Social Security No. (US Resident) :

Aadhaar No. I don't have Aadhaar Card

In case the applicant is a minor please mention guardians name in the 2nd applicant's name. (Minor declaration need to be filled separately)

- Use my Mobile Number as 10 digits of account number as provided for First Applicant. I/We agree to the terms and conditions of My Favourite Number program and understand that the allocation of account numbers shall be done on best efforts basis subject to the availability.

FIRST APPLICANT INDIAN ADDRESS

Please tick where your correspondence is to be sent Indian# Overseas* (If None ticked, correspondence will be sent to Indian Address)

* Please note that all communication (including cheque book, Debit / ATM Card, PIN Mailer & a/c statements) is sent to the communication address of 1st Applicant as opted above.

* For Seafarers, communication sent to Indian address only.

Address :

 *City: *State:
 *Country: *Postal/Zip Code:
 *Indian Mobile No: **+91** Number Indian Land Line No: **+91** Area Code Number

FIRST APPLICANT CURRENT OVERSEAS ADDRESS

* For Seafarers, Overseas address to be filled as per Offer / Appointment letter issued by the Foreign company.

Address :

 *City: *State:
 *Country: *Postal/Zip Code:
 *Overseas Mobile No: **+** Country Code Number Overseas Land Line No: **+** Country Code Area Code Number

*SMS/OTP Alerts to be sent: Overseas Mobile No Indian Mobile No
(Please ✓ any one)

*Email ID

*SMS, Transactional One Time Password (OTP) and Email alerts will be sent only to the mobile number and email id as opted above.

FIRST APPLICANT OCCUPATION & ACCOUNT ACTIVITY:

*Purpose of this Account: Household Expenses Savings/Investments Others(Please specify)

*Source of funds Salary Business Income Inheritance Investments Savings Sale of Property others.....

*No. of years in Foreign Country upto 2 years 2-5 years Above 5 years

*Occupation Type Salaried Self-employed Business Student Seafarer IT
 Housewife Unemployed Retired others.....

a) If salaried, employed with Public Ltd. Company Govt. Private Ltd. Company PSU MNC others.....
 Name of the Employer Designation

b) If Self-employed, profession CA Doctor Trader Lawyer Exporter/Importer Engineer others.....

c) If in business since Years Months Date of Incorporation

Nature of Business Manufacturing Service Provider Agriculture Stock Broker Trader Real Estate Others.....

Name of the Company/ Firm

Type of Company/ Firm Public Limited Private Limited Proprietorship Partnership others.....

*Name of Currency in which you are earning

*Annual Family Income(Equivalent) < USD 30,000 < USD 30,000-48,000 < USD 48,000-72,000 < USD 72,000-1,20,000 > 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

I am attaching herewith the supporting documents in proof of my declaration.

1) OCI Card No. 1st Applicant Card No Issued On:

2) OCI Card No. 2nd Applicant Card No Issued On:

3) Other (Please specify):-

Please attach Supportive Document to establish PIO status is mandatory to open NR Account.

1 st Applicant	2 nd 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
1 st Applicant Name	2 nd Applicant Name
Country of Passport	Country of Passport
Passport No	Passport No
PIO First Applicant	PIO Second Applicant
Signature	Signature

CHANNEL ACCESS REQUEST

Technology Access	Internet Banking	Mobile Banking	Insta Alerts	Bank Statements*
FIRST APPLICANT	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Email <input type="checkbox"/> Physical
SECOND APPLICANT	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Email

*If no option is selected, E-mail would be treated as default choice wherever E-mail ID is available

Channel Access - NRE Accounts	Debit Card	Cheque Book
FIRST APPLICANT	<input type="checkbox"/> ELITE International NRE Debit Card	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECOND APPLICANT	<input type="checkbox"/> ELITE International NRE Debit Card	

Channel Access - NRO Accounts	Debit Card	Cheque Book
FIRST APPLICANT	<input type="checkbox"/> Domestic Rupay Classic Debit Card	<input type="checkbox"/> Yes <input type="checkbox"/> No
SECOND APPLICANT	<input type="checkbox"/> Domestic Rupay Classic Debit Card	

- **E-statements:** E-statements for all accounts linked to the Customer ID of the 1st applicant will be sent on the email ID registered as per the Bank's records.
- **SMS and Email Alerts:** Subscription to SMS & Email Alerts and subsequent modifications of the threshold limits can also be done through submitting request at branch.
- **Default Alerts:** Any Debit / Credit transactions, Any changes in Account Balance, Salary Credit & Overdraft Alerts will be communicated to A/c Holder(s).
- **Channel Access Request:** Net Banking Password and ATM PIN for the Debit card can be generated using the Signup Option in the Retail Net Banking Login Page.

1. CLIENT DECLARATION FOR PRODUCT AND SERVICE AVAILED OUTSIDE THE HOME COUNTRY

Is the Application Filled in India Yes No (If yes, please fill the details below)

(Tick "No" for Non Face to Face Application)

I/We hereby certify that I am/we are the resident(s) of(overseas country) and that we have availed of this product/ facility/ service on a trip to INDIA and submitted all documents relating to such product or service while in (City/Town), in India hereby represent, warrant, agree and undertake on a continuing basis that: (a) There are/shall be no legal or regulatory prohibitions, violation or impediments against my/ our maintaining my/our relationship with Equitas Small Finance Bank Ltd. (the Bank), including making the aforementioned investment(s)/ availing myself/ ourselves of the aforementioned facilities or services from time to time. (b) In making the aforementioned investment(s) availing myself/ourselves of the aforementioned facilities or services from time to time. I/we shall ensure that I/We are in full compliance with all laws and regulations, including, without limitation, all applicable exchange control/ taxation laws/ regulations in my/our home country. I/We have already obtained/ shall obtain all necessary regulatory approvals, if required, in connection with any such transactions and shall promptly make all necessary regulatory reporting, if required, to the relevant authorities in my/our home country and I/We agree to furnish to the Bank, upon request copies of the approvals/reports, if any. (c) All decisions to make the aforementioned investment(s)/ availed of the aforementioned facilities or services from time to time are/shall be my/our own independent decisions, and are not made in reliance on any views or opinions, if any, as may be expressed by the Bank or its representatives from time to time, and are arrived at after personal analysis and careful consideration of the risks, benefits, terms and conditions taking into account my/our investments objectives, financial situation and particular/specific requirements and needs. I/We acknowledge that the Bank relies on my/our representations, warranties, undertakings and statements contained herein in agreeing to establish/continue the relationship with me/us and in agreeing to provide the aforementioned facilities/services to us from time to time.

2. PEP DECLARATION

PEP Declaration : Politically Exposed Persons(PEP) are individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, Senior Politicians, Senior Government / Judicial / Military Officers, Senior Executives of State-Owned Corporations, Important Political Party Officials, etc. In addition, a 'Politically Exposed Person' includes the immediate family members of a Politically Exposed Person such as spouses, children, parents and other relatives. Politically Exposed Person includes even close associates like advisors, secretaries and other associates of a Politically Exposed Person who conduct transactions on behalf of a Politically Exposed Person.

Please tick Yes / No mandatorily (If Yes, Please Fill separate AML Form for all applicants)

Is the 1st applicant Politically Exposed or Related to PEP Yes No

Is the 2nd applicant Politically Exposed or Related to PEP Yes No

3. GENERAL DECLARATION

The eligibility criteria for ELITE Relationship is Combined ELITE Family TRV of INR 25 Lacs (or) Combined ELITE Family Savings AMB of INR 5 Lacs. ELITE measures only Family/ Group Level Relationship of the client with Equitas Bank with maximum Family Members allowed at 8 per Family/ Group. The eligibility criteria will be evaluated once in six months for the programme. *TRV includes the average monthly savings and salary account balances, Fixed deposit value, Mutual funds and Insurance premium paid with Equitas Bank. 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 various services including but not limited to (a) ATMs (b) Phone Banking (c) Net Banking (d) Debit Cards (e) Mobile Banking (f) Bill Pay facility (g) Insta Alert Facility (h) Email Statements. I/ we accept and agree 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 30 days notice to me / us and or provide an option to switch to other services to me/ us. I/We am/are aware and agree that the Bank may debit my 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 is opened based on the statements/ declarations made by me/us, documents produced by me/us. I/we also agree that if any of the statements / declarations made herein is found to be not correct in material particulars you are not bound to pay any interest on the deposit made by me/us and further you are entitled to close my/our accounts. I/We hereby undertake to intimate you about my/our return to India for permanent residence immediately on arrival and would close or convert the NR accounts into a Resident account wherever such account is possible to hold and maintained with 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 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 if the deposit is not 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. I/ We agree that the bank to consider any credit confirmations like sources of funds, purpose of transaction etc., through my/our Email ID Registered with the Bank.

vi. I/We agree to abide by the provisions of the Non-Resident (External) Account / Non-Resident (Ordinary) Account Scheme / Debit cards and for other products availed by me / us as specified in the FEMA and RBI guidelines issued time to time.

vii. I/We understand that Equitas Small Finance Bank does not offer Foreign Currency Non-Resident (FCNR) Deposits and Resident Foreign Currency (RFC) Deposits.

GENERAL DECLARATION CONTINUED...



- viii. I/We would confirm that all debits to my / our accounts for the purpose of investment in India and credits representing sale proceeds of investments in India are covered either by general or special permission of RBI. I will ensure that investments in shares / securities or immovable properties in India out of funds held in my / our account with you are governed by respective regulations of Reserve Bank of India. The Savings Bank Account would be used to route transactions of only non-business/non-commercial nature, in the event of occurrence of such transactions or any such transactions that may be construed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and/or close the accounts, and the bank shall have the authority to report such instance to regulator as the case may be.
 - ix. I/We hereby declare 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/our NRO Account. I am /We are aware that the Credits representing gift / donation / loan from a resident Indian cannot be credited into the NRO account held with the Bank and I/We shall ensure that such credits are not made into the NRO account. In such event, Bank shall have the right to freeze or close the accounts.
 - x. I/We have understood that I/We am/are required to maintain combined Average Monthly Balance (AMB) of INR 5 Lacs at a Family / Group Level (or) Combined Family Total Relationship Value (TRV)* of INR 25 Lacs as applicable for NRE/NRO Savings account. The evaluation for eligibility criteria of the programme will be done once in six months. I/We are further aware that on non-fulfillment of the eligibility criteria the Bank reserves the right to regrade the customer or simply withdraw the prevailing Program Features, with or without prior intimation. In case a customer has originally signed up for ELITE Relationship at the time of account opening and has failed to maintain any one of the mentioned eligibility criteria, his relationship will be converted to default EQUITAS Regular Savings Account. In case a customer has been upgraded to ELITE Relationship and has failed to maintain any one of the eligibility criteria, his relationship will be regraded to the respective account which was originally signed up by him prior to upgrade. I am / We are also aware that the charges, as above are subject to changes, at the sole discretion of the Bank.
 - xi. I/We will refer the latest fees & charges schedule and Terms and Conditions for NRE/NRO Savings Account/ Fixed Deposits on www.equitasbank.com and also at the Bank Branch.
 - xii. In the event of the death of one of the depositors, premature termination and payment of Term Deposits held in 'Either or Survivor' or Former or Survivor' or 'any one' basis shall be allowed to survivor /s. Such payment to survivor/s shall give valid discharge to the bank. Such premature withdrawal shall not attract any penal charge. However, the interest rate shall be the rate applicable for the period the deposit has remained with the bank or the contracted rate, whichever is lower.
 - xiii. I/We Further affirm that payment of the proceeds of such deposit to the survivor represents a valid discharge of the bank's liability provided. (i) There is no order from a competent court restraining the bank from making the payment from the said account. (ii) That the survivor would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that any person/s may have against the survivor to whom the payment is made.
 - xiv. Where the deposit is held singly and premature withdrawal is required by the nominee in the event of death of the deposit holder. (i) In the event of my death of the depositor, the nominee named for the deposit is entitled to prematurely withdraw the said deposit, if he/she so requests the bank, without seeking the concurrence of the legal heirs of the depositors. I/We further affirm that payment of the proceeds of such deposit to the nominee represents a valid discharge of the bank's liability (ii) That the nominee would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that my legal heirs may have against the nominee to whom the payment is made.
 - xv. I/We hereby request the Bank, its Affiliates and the representatives, associates, service providers and employers of the Bank and its Affiliates, to contact me/us by telephone, or any other possible mode to communicate with me from time to time in connection with servicing issues pertaining to the products/ relationship which I/We have with the Bank or its Affiliates from time to time. In addition to the above, the Bank, its Affiliates and the representatives, associates, service providers and employees of the Bank, its Affiliates may contact me/us from time to time by telephone, or any other possible mode to communicate in connection with new products, services of the Bank or its Affiliates. I/We shall indemnify the Bank and its representatives, employees and agents against all losses, costs, expenses, suits, damages whatsoever arising out of or in connection with their assistance and their services that may be provided to me/us for helping me/us invest in the aforementioned products/ avail myself/ourselves of the aforementioned facilities or services in my/our name (s).
 - xvi. I/We understand that in case I/We do not wish to receive promotional information through telephone calls / email / sms on products and services not currently availed by me, I can register for "Do Not Call" service through the Bank's website www.equitasbank.com or other channels that the Bank may offer. I agree that this service will not apply to receipt of advice and information regarding products and services currently availed by me, to help me in fully realizing the benefits of the range of financial solutions designed to make my banking relationship value added and more convenient.
 - xvii. I am/We are aware that I am/We are 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.
- I/ We have read and made the various declarations set forth as well as in the above sections 1 to 3 and in the website of this form and in the website of the Bank. I/We hereby agree to all the terms and conditions and will abide by them.

Date: ___/___/___

Place: _____

PHOTO

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

Do not sign this form if it is BLANK, please ensure all relevant sections and columns are complete, filled to your satisfaction and then only sign the form.

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





NRI/PIO FIRST APPLICANT



NRI/PIO SECOND APPLICANT

Name: _____ Date: _____

Name: _____ Date: _____

NRI - You should have put two signatures on form till this page
PIO - You should have put three signatures on form till this page

FATCA – CRS DECLARATION (MANDATORY INFORMATION)

Please tick, if you are a Tax Resident of any Country outside India.

If you do not tick, it is your affirmation that you are a tax resident of India and not of any other foreign country

For seafarers Country of residence should be filled as per Appointment / Offer Letter Issued by Foreign Company's Overseas Country, Mention TIN Number as (NA/Not Applicable)

For First time Travelling to Overseas as NRI need not provide TIN number, only to mention Name of the Overseas Country, Mention TIN Number as (NA/Not Applicable)

Status details for	First Applicant	Second Applicant
I am a tax resident of India and not of any other Country	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
City of Birth		
Country of Birth#		
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
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.....	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
Signatures	NRI/PIO FIRST APPLICANT 	NRI/PIO SECOND APPLICANT

To also include USA, where the individual is a citizen / green card holder of USA % In case Tax Identification Number is not available, Kindly provide functional equivalent FATCA - CRS Certification: I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me / us on this Form is true, correct, and complete and hereby accept the same.

Certification: I/We have understood the information requirements of this Form as per the CBDT notified Rules 114F to 114H and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the Terms and Conditions below and hereby accept the same. I/We understand that my personal details as provided /available in the bank records will be used for CBDT reporting / Central KYC Registry. I hereby consent to receiving information from Central KYC Registry through SMS / Email.

CBDT Terms and Conditions: The Central Board of Direct Taxes (CBDT) has notified 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. Towards compliance,I/We may also be required to provide information to any institutions such as 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 to advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with Equitas Small Finance Bank or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

	FATCA/ CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
		If customer does not agree to be Specified U.S. person/ reportable person status
1	U.S. place of birth	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below); AND 3. Any one of the following documents: a. Certified Copy of "Certificate of Loss of Nationality or b. Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
2	Residence/ mailing address in a country other than India	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)
3	Telephone number in a country other than India (and no telephone number in India provided)	1. Self-certification (in attached format) that the account holder is neither a citizen of United States of America nor a resident for tax purposes; and 2. Documentary evidence (refer list below)

NRI - You should have put three signatures on form till this page

PIO - You should have put four signatures on form till this page

NOMINEE ADDITION - FORM DA1

I wish to Nominate I do not wish to Nominate##

Nomination under section 45ZA of the Banking Regulation Act.- 1949, and the Rule 2(1) of The Banking Companies (Nomination) Rules, 1985, in respect of bank deposits,

I/We Address(es)

nominate the following person to whom in the event of my/our/minor's death, the amount of the deposit in the account(s) opened with this application form may be returned by Equitas SFB.

Nominee Name Address

*City.....*Pin Code..... State..... Contact No.....

Relationship with depositor, if any Age..... DOB

As the nominee is a minor on this date, I/We appoint Shri / Smt / Kum..... Age DOB

Relation with Minor Nominee....., to receive the amount of the deposit on behalf of the nominee, in the event of my/our/minor's death during the minority of the nominee.

Signature(s) /Thumb Impression(s)***

NRI/PIO FIRST APPLICANT

NRI/PIO SECOND APPLICANT

Date & Place.....

Signature of First Witness...

Signature of Second Witness...

Witness Name & Address

Witness Name & Address

*Strike out if nominee is not a minor ***Thumb impression(s) shall be attested by two witnesses ##Please Sign No Nomination Declaration below

Applicable, if No Nomination is provided in a Single Holder A/c
 The Bank, through its authorized representative had explained to me the advantages of nomination facility as per the extant guidelines of RBI. However, I hereby decline to presently nominate any individual and understand the risks and consequences of my failure to give nomination and am fully aware of the hardships my legal heirs would face in the event of my death without nomination registered in your Bank records.

 Applicant(s) Signature

FOR BANK USE ONLY
 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 & Code

FOR BANK USE ONLY Face to Face Non Face to Face

INSTA KIT Yes No (If Yes, fill Customer ID & Account No. below)

	Customer ID	Account No. NRE/NRO	Customer Category	Document Submitted	Photo
1 st Applicant only	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Passport <input type="checkbox"/> Visa <input type="checkbox"/> Address Proof	<input type="checkbox"/>
2 nd Applicant only	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Passport <input type="checkbox"/> Visa <input type="checkbox"/> Address Proof	<input type="checkbox"/>

Branch Codes LG Code LC Code

Value Date Funds Parked A/c No. UDN

Business RM - Assigned	
Employee Name	
Employee Code	

Service RM - Assigned	
Employee Name	
Employee Code	

Customer Signed in my presence	Emp Name	Signature
	Emp Code	

Tele Confirmation Done	Emp Name	Signature
	Emp Code	

Branch Stamp with Date

CSO/RM Signature & Date BDM/BM Signature & Date

CPU Stamp with Date

DVU Signature & Date FCU Signature & Date

NRI - You should have put four signatures on form till this page
 PIO - You should have put five signatures on form till this page

VERSION 2.0 JULY 2024

ELITE SET-UP

Family Members Details

S.No	Family Member Name	Cust ID(or)PAN	Relationship with Primary Members	Signature of the Members
1			PRIMARY - SELF	5 SIGN HERE
2				SIGN HERE
3				SIGN HERE
4				SIGN HERE
5				SIGN HERE
6				SIGN HERE
7				SIGN HERE
8				SIGN HERE

Note:

1. First name and Signature of the family member to be tagged as Primary.
2. Following family relationships can be currently configured:
 - Husband • Wife • Spouse • Son • Daughter • Father • Mother • Brother • Sister • Grand Father • Grand Mother • Grand Son
 - Grand Daughter • Son-in-law • Daughter-in-law • Father-in-law • Mother-in-law • HUF
3. Equitas Bank reserves the right to change the benefits offered as part of the services.
4. If the balances required as per Programme eligibility are not fulfilled (or for any other reason as deemed fit by the Bank), the Bank reserves the right to regrade the customer or simply withdraw the prevailing Programme Features, with or without prior intimation. However, evaluation will be done once in six months.
5. In case a customer has been upgraded to ELITE Relationship and has failed to maintain the eligibility criteria of the programme, the relationship will be regraded to the respective account which was originally signed up before the upgrade.
6. In case of withdrawal of Programme entitlement, all or selective programme features (e.g., discounts, services etc.) will be withdrawn and instead the minimum balance requirements, fees and charges will be applicable as per the standalone Product / Account variant/s held by the customer. The Bank shall not be responsible / liable in any manner whatsoever for any costs, losses, damages or expenses, or other consequences, caused by reason of such instance/ migration/regrade.
 - I/We want to upgrade/ avail ELITE relationship offering for all Savings Accounts under the above-mentioned customer ID (or Customer ID linked to PAN Number).
 - I/We confirm having read the terms & conditions of ELITE relationship offering available on website www.equitasbank.com and will abide by the same.

ADDITIONAL DECLARATIONS (PLEASE FILL IF APPLICABLE)

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

MERCHANT NAVY DECLARATION FORM

Date:
The Manager
Equitas Small Finance Bank
Branch

Dear Sir, Re: Declaration

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....., with same company or a new/different company.....

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



ACKNOWLEDGEMENT

No charges levied for account opening _____ Serial No.

Customer Name: Mr. / Ms. / Mrs. / Dr. / Prof.....

Amount of Rs..... ps..... paid by Cheque No.....

Nominee Name:.....

Name of Bank Official

Date.....

Signature of Bank Official

Nomination Form Submitted: Yes No



Phone Banking

Toll Free Number : 1800 300 1222

Non Toll Free Number : +91-44-3089 8888

(From any country)



Email

nri@equitasbank.com



Net Banking

www.equitasbank.com

Customer Copy

MERCHANT NAVY DECLARATION FORM CONTINUED...

I understand that the account will be opened with 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,

.....

FORM 60

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 DD/MM/YYYY 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. Other than Agricultural Income Rs.....

Verification

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. Verified today, theday of.....20.....

Date....., Place.....

Applicant Signature

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

