

FASTAG- CUSTOMER RELATIONSHIP FORM – RESIDENT INDIVIDUALS



Application Date

Application No.

APPLICATION FORM SHOULD BE FILLED IN CAPITAL LETTERS ONLY

PERSONAL

Customer Name as per Address Proof Document

Prefix, (Mr, Miss, Mrs)

Full Name as per Address Proof Document : (Please leave space between two words)

_____ F I R S T N A M E _____ M I D D L E N A M E _____ S U R N A M E _____

PAN Number _____

Form 60. (Non PAN Card holder)

Passport / DL / Voters Card / Other No _____

Date of Birth

Last 4 digits of AADHAAR number _____

Exp date (if applicable) _____

Please ensure only last 4 digits of AADHAAR number is visible in the Self attested copy of AADHAAR that you share with Bank's representative. Full AADHAAR number should NOT be visible in the self attested copy".

Mother's Maiden Name _____ Father's (or) Spouse Name _____ Gender : Male Female Third Gender

Marital Status Single Married Others _____

"I hereby give my consent to Equitas Small Finance Bank, to obtain my Aadhaar number, Name and Fingerprint/Iris for authentication with UIDAI. Equitas Small Finance Bank has informed me that my identity information would only be used for KYC and also informed that my biometrics will not be stored / shared and will be submitted to CIDR only for the purpose of authentication."

OCCUPATION & INCOME

Occupation: Salaried Self-employed Retired Self-employed professional Students Housewife Others (Please Specify) _____

Source of Funds Salary Agriculture Business Income Investment Income Others (Please Specify) _____

Politically Exposed Person (PEP) Yes Related to PEP No Nationality Indian Others

Gross Annual Income <50000 50000-1 Lac 1-3 Lac 3-5 Lac 5-10 Lac 10-15 Lac 15-25 Lac 25-50 Lac 50 Lac-1 Cr >1Cr

PERMANENT ADDRESS / MAILING ADDRESS (Please leave space between two words)

Flat No / Bldg Name _____

Road Name _____

Landmark _____

City _____ PIN Code _____

State _____ Country _____

Tel. (R) _____ S T D N U M B E R _____ Tel. (0) _____ S T D N U M B E R _____ Extension Number _____

Email ID _____

_____ Mobile Number +91 _____

VEHICLE REGISTRATION NUMBERS

DECLARATION

I hereby give my consent to upgrade my Equitas FASTag wallet to a Full KYC wallet. I understand that Bank will verify the documents submitted by me before converting my wallet to Full KYC wallet. I am aware that, as per current RBI guidelines, the maximum outstanding balance that could be maintained in the Full KYC wallet is upto Rs 1,00,000 (Rupees One Lakh only). I declare that the information provided above with respect to my account is up to date and correct. | I submit a self attested photocopy of the following as:

Address proof _____

Identity proof _____

Place _____

Date _____

Customer Signature
(Please provide Signature proof document)
I have read & agree to the detailed T&Cs available at www.fastag.equitasbank.com

Please paste
passport size photo
of the applicant
Applicant to sign across the photo

Individual Customers Signature

I hereby declare that the T&Cs regarding the account opened by me with you, have been read over to me in the language known to me and understood by me in full. I confirm that I have signed all necessary documents for the aforesaid purpose inlanguage and shall be bound by the same.

I am voluntarily submitting a copy of my Aadhaar Card without redacting the Aadhaar number. I request you to ensure strict confidentiality of my/our personal information as may be stipulated by Regulator/s from time to time. I have been given to understand that the document submitted to you shall not be used for any other purpose other than for the purpose mentioned above or as per requirements of law.

FOR OFFICE USE

Agent Name :

Agent Mobile Number :

Agent ID number :

Channel Partner Name :

Agent Address :

Agent Email ID :

I Confirm that I have seen & Verified the originals submitted by the customer. I am aware that information given by customer is confidential and shall not, without prior written consent of the Bank divulge / use the information for any other purpose. If required by the Bank, I consent to send the physical copies to the Bank.

Agent Signature with Channel Partner Seal

The customer has signed in my presence and I have done KYC verification & have visited the customer at the given mailing address

CUSTOMER ACKNOWLEDGEMENT COPY

Reference Number _____

Acknowledgement date

Signature of Agent _____

MANDATORY FORM FILLING INSTRUCTIONS

- Please download the correct Application Form from the Portal (Branch / Channel Partner / CSC VLE)
 - All **YYYYYYYYYYYY** Red marked fields are mandatory
 - If KYC documents don't have the full name, customer to fill and submit Dual Name Declaration form (available in the website)
 - Clear copy of documents and photo is required. Blurred image will NOT be accepted
 - If signature of the customer does not match with one available in KYC documents, please fill and submit Dual Signature Declaration form available in the website.
 - If customer fills the Application form or signs the Application form in any other language(Except English), then Vernacular declaration section should also be filled.
 - The signature should be the same signature as in the KYC documents
 - Ensure self-attested copies of KYC documents are submitted. If AADHAAR copy is submitted as KYC document, ensure ONLY last 4 digits of AADHAAR number are visible in the document submitted. First 8 digits to be redacted.
 - Upload all filled pages
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