AXIS BANK Customer Request Form

Branch Name _____ SOL ID ☐☐☐☐ SR. No. _____

Customer Information

Customer ID* ☐☐☐☐☐☐☐☐

Customer Name* _____

1 Name Updation

2 DOB/DOI D D M M Y Y Y Y

3 Aadhaar number *(Please Provide last 4 digits of Aadhaar)* ■ ■ ■ ■ ■ ■ ■ ■

4 PAN number

5 Nationality

6 Passport No. *(Please update Passport /VISA no. as per attached copy)*

7 VISA No.

8 LEI code *(Applicable for Non Individual only)*

9 LEI code expiry date ☐ LEI code - I/We authorize Axis Bank to update expiry date of LEI code, unless otherwise instructed in writing

I wish to update below contact information in

Individual Segment

☐ All Relationships

Please select below if you wish to update in selective accounts only.

☐ Savings & FD ☐ Loan A/cs

☐ Current A/cs ☐ Credit Cards

Non-Individual Segment

☐ All Linked Accounts ☐ Also update at Cust ID level for CA

☐ Only in A/c no

Contact Information

10 Mobile No. & Alert Registration + Country Code Mobile Number ☐ Transaction Alert ☐ EOD Alert *(Applicable only for Current Account)*

Joint account holders will receive One Time Password (OTP) and transaction SMS alerts for their transactions on ATM, Internet Banking and Mobile Banking.
Monthly charge ₹ 5/- for Savings A/c except NRI customer. To unsubscribe from value added alerts please tick ☐

11 Landline number Tel (R) ISD STD Number Extn

Tel (O) ISD STD Number Extn

12 E-mail ID
(for e-mail statement registration. Physical statements will be discontinued once E-statements are activated)

13 Address ☐ (A) Communication i) ☐ Residence ii) ☐ Office ☐ (B) Permanent /Registered address
(Note - Please leave space between two words. In case of joint Holders, each holder is required to fill separate form.)

ADD 1

ADD 2

ADD 3

Landmark State

City

Pin Code/Zip Code/PO Box Country

(For deemed OVD, OVD with updated address to be submitted within 3 months, not applicable for NRI, Current A/c, Credit cards and loan products)

Please attach address proof document _____

Terms & Conditions: I have read, and understood and agree to be bound by the Terms & conditions related to UIDAI guideline, sharing of Information with agencies/service provide on need to know basis, regarding various products and services including SMS Banking, E-Statement, & Internet Banking, including Terms & Conditions related to sharing of relevant information under foreign tax law like FATCA as displayed on www.axisbank.com.
Mobile no. may be updated in the bank records for sending any communication related to my above account, as well as transaction advice. I also authorise the bank to contact me on the above said numberfor doing verification, call backs or checks to confirm the veracity of any transaction, as deemed fit by the bank. I confirm that the mobile number is held by me and is not used by any third party and I undertake that I shall duly and promptly inform the bank, if and when my mobile number changes.
Address Updation - Please note the communication address will be updated at account level and Registered address at Customer ID level (For Current Account)

Date D D M M Y Y Y Y Place _____

For Individual accounts, in case of joint holder mobile number updation, signature of only joint holder is required.
For non-individual accounts, signatures as per mode of operation are required for mobile number updation.

Signature | Signature | Signature | Signature

For office use only

Certified that this Request Letter is complete in all aspect & all relevant documents are obtained & verified for mode of operations and signature of the A/c holder. The request may please be processed. The CRF has been personally submitted by the Customer. I have satisfied myself about the identity of the customer by verifying his / her Debit Card/ KYC document & also his / her signature in Bank's record. I have done proper due dilligence for updating the records of the customer on his/her request at non-home branch.

☐ Bank induced request Request received date D D M M Y Y Y Y Request processed date D D M M Y Y Y Y

Request accepted by _____

Employee number ☐☐☐☐☐☐ Signature

Request certified by *(Employee number)* ☐☐☐☐☐☐ Signature & S.S.No.

Acknowledgement to Customer

Customer Name _____

Customer ID ☐☐☐☐☐☐☐☐☐☐ Date of request D D M M Y Y Y Y

Name of the Branch Official _____ Branch Official Signature

Please Note: Your request will be processed within 2 working days. Delivery of kits /cheque books / statement etc. to your address will take between 5-11 working days if dispatched through courier and 15-18 working days if dispatched through speed post (depending on location)

Branch Name _____ SOL ID ☐☐☐☐ SR. No. ☐☐☐☐☐☐

Account Number* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ This page is required to be filled only if there are requests numbered 14 to 24

Banking Requests

14 Duplicate Statement From Date D D M M Y Y Y Y To Date D D M M Y Y Y Y *(Will be changed as applicable)*

15 New Cheque book ☐ No. of books ☐☐ **16** Passbook ☐ **17** Print Nominee Name ☐ *(Nominee name will get printed on statement, passbook, etc)*

18 Account activation ☐ Please activate my account. *(For Individual A/c, kindly attach KYC document of (all account holders. For non-Individual All, attach NYC document of the entity)*

Name change if any to be requested on pg1 *Reason fornot operating the Account _____

19 Reversal of charges

1) ₹ ☐☐☐☐☐☐☐☐☐ debited on D D M M Y Y Y Y 2) ₹ ☐☐☐☐☐☐☐☐☐ debited on D D M M Y Y Y Y

I agree to henceforth maintain Average Monthly/Quarterly/Half Yearly Balance as per requirement (applicable (or cases where Average Balance Non-Maintenance is charged)

20 Scheme code conversion Existing scheme code ☐☐☐☐☐ New scheme code ☐☐☐☐☐ *(Please attach MID/KYC/necessary supporting document)*

Label Code..... *I agree to maintain account balance as per requirement of new scheme code & have read & understood the terms & conditions and applicable Schedule of charges / MID*

(Mention label code for conversion to salary account)

21 Account Transfer

From Branch _____ To Branch _____ OR From Sol ID ☐☐☐☐ To Sol ID ☐☐☐☐

Reason for Transfer of Account _____

22 Stop Payment Request *will be charged as applicable)* Request received at (time) _____

Payee Name : _____ Date of Cheque (s): D D M M Y Y Y Y

Cheque Number(s): _____ Amount _____

Reason for Stop Payment : _____

23 Debit Card Debit Card Number

☐ Deactivation ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

24 Any other *(Please specify)* _____

Terms & Conditions

Address Updation - Please note the communication address will be updated at account level and Registered address at Customer ID level (For Current Account)

Scheme code conversion - Please note that the new scheme code will be applicable from the next charge cycle.

Account Transfer - Bank reserves the rights of recovery in case of any future debits accruing on this account as a result of any claims or transactions. All old cheques issued shall be honoured, if otherwise in order. The remaining channel facilities (debit card, internet banking & telebanking) shall remain the same. Also all the standing instructions and ECS mandates given would be honoured, if otherwise in order. The flexi linked FD's will continue to remain in the old branch, the new flexi linked FD's will be opened in the new branch and any cheques issued shall be honoured by withdrawal from the flexi linked deposits only. The new IFSC and MICR codes will be communicated vide a confirmation letter and the details will also be incorporated on the new cheque book which will be issued to the account. I have read and understood the above terms and certify that the details provided on the form are correct.

Date D D M M Y Y Y Y Place _____

For Individual accounts, signatures of all account holders are required for Account Transfer, Account Activation & Scheme Code Conversion.
For non-individual accounts, signatures as per mode of operation are required.

Signature | Signature | Signature | Signature

For office use only

Certified that this Request Letter is complete in all aspect & all relevant documents are obtained & verified for mode of operations and signature of the A/c holder. The request may please be processed. The CRF has been personally submitted by the Customer. I have satisfied myself about the identity of the customer by verifying his / her Debit Card/ KYC document & also his / her signature in Bank's record. I have done proper due dilligence for updating the records of the customer on his/her request at non-home branch.

☐ Bank induced request Request received date D D M M Y Y Y Y Request processed date D D M M Y Y Y Y

Request accepted by _____

Employee number ☐☐☐☐☐☐ Signature

Request certified by *(Employee number)* ☐☐☐☐☐☐ Signature & S.S.No.

RL/CRF/Jul2020/VER.1

Acknowledgement to Customer

Customer Name _____

Customer ID ☐☐☐☐☐☐☐☐☐☐ Date of request D D M M Y Y Y Y

Name of the Branch Official _____

Please Note: Your request will be processed within 2 working days. Delivery of kits /cheque books / statement etc. to your address will take between 5-11 working days if dispatched through courier and 15-18 working days if dispatched through speed post (depending on location)

Branch Official Signature