

# CUSTOMER INFORMATION FORM

(For Resident Individual)



Tick  boxes as applicable.

(Separate CIF to be filled for joint holder/s) \*Mandatory Fields

(Please fill the form in BLOCK LETTERS and SAME INK only. THIS IS A MACHINE READABLE FORM AND WILL PASS THROUGH A SCANNER)

CKYC Number

Application Date

\*Capacity of Customer  Individual  Auth. Signatory  Guardian  Beneficial Owner  Auth. Signatory & Beneficial Owner  Other (Please Specify)  R-KIT

## 1. \*PERSONAL DETAILS

\*Title  Mr.  Ms.  Mrs.  Mx.  Dr.  Others \_\_\_\_\_ please specify

\*Full Name  F I R S T  M I D D L E  L A S T

Name  F I R S T  M I D D L E  L A S T  
(as on Account)

\*Religion  Hindu  Muslim  Christian  Sikh  Zoroastrian  Jain  Buddhist  Others \_\_\_\_\_ please specify

\*Category  SC  ST  OBC  General  Others \_\_\_\_\_ please specify

\*Mother's Name  F I R S T  M I D D L E  L A S T  
(Prefix)

Applicants Maiden Name  F I R S T  M I D D L E  L A S T  
(if any) (Prefix)

\*Date of Birth  D D M M Y Y Y Y  Minor  Yes  No \*Marital Status  Married  Unmarried  Others \_\_\_\_\_ please specify  
(Please Provide Guardian Details)

\*Gender  Male  Female  Transgender

\*Nationality  Indian  Others Country Name (If ticked on Others)

\*  Father/  Spouse Name  F I R S T  M I D D L E  L A S T  
(Prefix)

\*Are you a Politically Exposed Person or related to one  Yes  No Company website URL \_\_\_\_\_  
If PAN not available Father's name is mandatory

## 2. FATCA / CRS Declaration

\*RESIDENCE FOR TAX PURPOSE IN JURISDICTION(S) OUTSIDE INDIA  Yes (If yes, mention the following details)  No (If, no rest of the fields are not mandatory)

Tax Identification Number or equivalent  TIN Description

Country of Tax Jurisdiction  TIN Issue country

City of Birth  Country of Birth

## 3. ADDRESS DETAILS

\*CURRENT ADDRESS (For Bank Use:- Officially Valid Document submitted as Address Proof  / Deemed OVD submitted as address proof  )

\*Address Type  Residential  Business \*DOCUMENTS GIVEN FOR CURRENT ADDRESS PROOF Document Type

\*House No. & Building Name/No.

Road/Street Name/No.

\*Landmark  \*City

\*State  \*Country  \*Pin Code

### PERMANENT ADDRESS

\*Address Type  Residential  Business \*DOCUMENTS GIVEN FOR PERMANENT ADDRESS PROOF Document Type

\*House No. & Building Name/No.

Road/Street Name/No.

\*Landmark  \*City

\*State  \*Country  \*Pin Code

\*PREFERRED MAILING ADDRESS  Same as Permanent Address  Same as Current Address

\*Address Type  Residential  Business

\*Company Name/House No. & Building Name/No.

Road Name/No.

\*Landmark  \*City

\*State  \*Country  \*Pin Code

### ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES\* (Applicable if section 2 is ticked Yes)

\*Address Type  Residential  Business

\*Company Name/House No. & Building Name/No.

Road Name/No.

\*Landmark  \*City

\*State  \*Country  \*Pin Code



**8. GUARDIAN DETAILS FOR MINOR (Mandatory Only If Applicant is Minor)**

Name of Parent/Guardian \_\_\_\_\_ Customer ID \_\_\_\_\_  
 I hereby declare that the date of birth of the minor, who is my \_\_\_\_\_ is DDMMYYYY and I am his/her natural or lawful guardian appointed by the court order dated DDMMYYYY (copy enclosed). I shall represent the said minor in all transaction of any description in the above account until the said minor attains majority. I agree to indemnify RBL Bank against all claims of the minor or any person claiming through him/her for withdrawal/transactions made by me in his/her account. Guardian's Signature \_\_\_\_\_

**9. CREDIT FACILITY DETAILS (Current account only)**

Complete lending exposure details is provided in separate declaration/annexure

**10. DECLARATION & CONFIRMATION**

I/We am / are residents of India. I/We, declare that the information furnished by me/us is true and correct. I/We, the undersigned have read and understood and agree to abide and be bound by all the provision of the Terms & Conditions published on the bank's website www.rblbank.com governing the opening of all my/our accounts, present and future with RBL Bank and those relating to various service including but not limited to ATMs/Debit Card/Mobile Banking/Internet Banking/Phone Banking/Bill Payment Facility etc. I/We hereby confirm having read, understood and accepted the terms and conditions of card usage and opt the above transactional options. I/We agree not to share the card number, CVV, OTP, PIN, etc. to anybody including but not limited to Bank officials. I/We understand that the Bank may at its sole discretion discontinue any of the services completely or partially without any notice to me/us. I agree that the Bank may debit my account for service charges as applicable from time to time. I/We agree that if the premature withdrawal is permitted at my/our request, the payment of interest on the deposit may be allowed in accordance with the prevailing stipulations laid down by the Bank / Reserve Bank of India from time to time. I/We authorized the Bank or its agents to make reference/ enquires as may be necessary and to exchange / share / part with any/all information with the Bank's other branches / subsidiaries / affiliates, Credit Bureaus / Rating Agencies, Services Providers, banks / financial institution, governmental / regulatory authorities, third parties for KYC information verification, credit risk analysis, or for other related purposes that the Bank may deem fit. I hereby state that I have no objection in authenticating myself with Aadhaar based authentication system and consent to providing my Aadhaar number, Biometric and/or One Time Pin (OTP) data (and/or any similar authentication mechanism) for Aadhaar based authentication for the purposes of Re-KYC for updating my details with RBL.

I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I/we hereby consent to uploading the required information on CKYC Registry. Do Not Disturb Consent : I/We  consent  do not consent to receive information/service etc for marketing purposes through Telephone/Mobile/SMS/Email by the Bank/its agents. I/We am/are aware that post registration I/We may receive a call from the Bank to verify the Correctness of request for registration

**11. CUSTOMER SIGNATURE (Sign within the box and use black ink for Signature)**

(Please do not sign this form if it is BLANK. Please ensure all relevant sections and columns are completely filled to your satisfaction and only then sign the form)

Signature

Please affix recent  
Passport Size Photo  
Please Sign across  
the Photograph

Name \_\_\_\_\_

**12. ARE YOU INTERESTED IN THE FOLLOWING PRODUCTS**

Personal Loan  Credit Card

**13. BANK USE SECTION**

**Application type**  New  Update      **Account type**  Normal  Simplified (for low risk customer)  Small

**Document Received**  Certified Copies

I have met Mr./Ms. \_\_\_\_\_ in person. I hereby confirm the identity and address. The form has been filled and signed in my presence. The original documents have been verified by me,

I confirm that I have visited the Current residential address of the applicant and confirm that the applicants resides in the address mentioned in the account opening form.

Signature of Bank Official

**Emp. ID** \_\_\_\_\_

**Name of the Emp.** \_\_\_\_\_

**Emp. designation** \_\_\_\_\_

**Emp. Branch** \_\_\_\_\_

**\*Staff Indicator**  Employee ID \_\_\_\_\_ (for RBL Bank emp. Only)      **\*Branch Code** \_\_\_\_\_      **\*Constitution**  Individual  Pensioner  RBL Staff  NRI  Foreign National (Other than RBL) Ex/Existing

**Customer Type**  Individual  HNI  Foreign national  Foreign students  Person of Indian Origin/OCI

**\*LC Code** \_\_\_\_\_ (Sourcing Code)      **\*LG Code** \_\_\_\_\_ (Lead Generator)      **Walk-in customer**  Yes  No (If yes, SVR is mandatory)

**\*Primary Relationship Manager ID** \_\_\_\_\_      **Secondary Relationship Manger ID** \_\_\_\_\_

**Weaker Section** \_\_\_\_\_ (Only for Assets)

**Special Category**  
 Blind  Illiterate  Incapacitated  PEP  Relative to PEP  Differently Abled Persons (DAP)  Not Applicable

**\*BSR Type of Organization** \_\_\_\_\_      **\*Business Segment** \_\_\_\_\_

**MIS Code.1** \_\_\_\_\_      **MIS Code.2** \_\_\_\_\_      **MIS Code.3** \_\_\_\_\_      **MIS Code.4** \_\_\_\_\_      **MIS Code.5** \_\_\_\_\_

**Customer Segment** \_\_\_\_\_      **4th Line Embossing** \_\_\_\_\_ (For approved cases only)

Signature of Bank official (Checked by)

**Emp. ID** \_\_\_\_\_

**Name of the Emp.** \_\_\_\_\_

**Emp. designation** \_\_\_\_\_

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