

The Branch Head Axis Bank Ltd.

Customer Updation Form For KYC - Resident Indian/ HUF

(All fields are mandatory)

Branch Sol ID CKYC ID if available	DateD M _ M _ Y _ Y _ Y _ Y _
Applicant Details	
*Customer Name Prefix First Name Middle Name Prefix First Name Middle Name Prefix Pref	Last Name
*Name as per ID Proof First Name Middle Name	Last Name
*Customer Id	*Gender Male Female Transgender
*Occupation Salaried Self Employed Retired Student Housewife Unemployed	Politician * Occupation Code (To be filled by branch Official)
If Salaried (To be ticked only when Occupation is Salaried) Pvt Ltd Public Ltd Proprietorship Partnership firm Public Sector Government Govern	ernment Multinational Trust/Association/ Society/Club
If Self Employed (To be ticked only when Occupation is Self Employed) Technology Professional Service provider Agriculture Gold Jewellery Stock Bro	oker Real Estate Trader Money Lender
No of years in Business Tate of Birth/Date of Incorporation D D M M Y Y Y Y N Nationality:	Indian
*Annual Income (Only Absolute & numeric Values to be entered)	
*Source of Funds Salary Business Income Investment Income Agriculture	Others
*Is the Customer having links with any Politically Exposed Persons	(Only Alphabetical characters allowed)
Contact Details	
*COMMUNICATION ADDRESS (Please leave space between two words)	
*Identity Proof Document Type	Issue Date Expiry Date
*Address Proof Document Type	Issue Date Expiry Date
Address	
Landmark City	
Pin code State Co	untry [I N D I A]
*PERMANENT ADDRESS(Please leave space between two words) Same as communication address	
Address	
Landmark City City	
Pin code State Co	untry I N D I A
*Mobile Number + 9 1 Landline # (R)	(O):
Email id	
Note: Incase you would like to update your PAN in the Bank's records, please fill the below PAN details	
*Permanent Account Number (PAN) Or Form 60 DOB as per PAN Card	[D_D_M_M_Y_Y_Y_Y]
Name as per PAN Card Prefix First Name Middle Name	Last Name
ivalile as per FAIN Caru	
Note: Details of demographics would be captured across all your relationships. Incase you would like to update in specific re	lationship, please select below.
Savings & FD Current A/cs Loan A/cs Credit Cards	
Additional Details	
Maiden Name (If any*) Prefix First Name Middle Name	Last Name
Father's Name* Prefix First Name Middle Name Or	Last Name
Mother's Name* Prefix First Name Middle Name Or Middle Name	Last Name
Spouse's Name Prefix First Name Middle Name	Last Name

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Dec	larations	l Lick as <i>i</i>	Applicable)

	rm	

	Date of Birth $[D,D,M,M,Y,Y,Y,Y]$
Form of declaration to be filed by a person who does not have a P	AN and who enters into any transaction specified in rule 114B
If applied for PAN and it is not yet generated enter date of application $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	D M M Y Y Y Y M and acknowledgement number
If PAN not applied, fill estimated total income (including income of spouse, min	nor child etc. as per a Agricultural income (₹)
section 64 of Income-tax Act, 1961) for the financial year in which the above t	
	Verification
	by declare that what is stated above is true to the best of my knowledge and belief. I further declare that I
·	me (including income of spouse, minor child etc. as per section 64 of Income-tax Act, 1961) computed in n which the above transaction is held will be less than maximum amount not chargeable to tax. Verified20
	Signature
■ *FATCA- CRS DECLARATION Please tick the applicable tax res	sident declaration (Any one)*
I am a tax resident of India and not resident of any other country	
I am a tax resident of the country/ies mentioned in the table below:	
Please indicate the country/ies in which the entity is a resident for tax purposes	and the associated Tax ID Number below:
City of Birth* Country of Birth* Country of Birth*	Address Type for Tax Purpose*- Residential Business Registered Office
Country# Tax Identification Identification Ty	
Number% (TIN or Other, please s	specify)% Communication Address Permanant Address Please note the address below
	Landmark
	Pin State Country
	USA % incase Tax Identification Number is not available, kindly provide functional equivalent FATCA Form (read along with the FATCA/CRS Instructions and Terms & Conditions) and hereby Confirm that d hereby accept the same.
	Signature
■*HUF Declaration & Mandate	
We, the undersigned, for ourselves and	as Manager/Karta and Ejaman of the family, also guardian of
	to take notice that we are members of Hindu Undivided Family/firm.
The joint family/firm is carrying business under the name and style of M/s	s, which is our joint family trade (Applicable for Current Account only)
The Hindu Undivided Family is engaged in	activity/occupation not in the nature of the business or trade.
	to operate upon the Bank account severally, jointly and all transactions entered into
and obligations incurred or to be hereafter incurred by them will be binding of time to time in the matter of maintaining and conduct of such accounts will be	n all of us. Any acts done/to be done to comply with Bank's rules which are in force or as amended from e binding on us.
Please treat this as a mandate from us to:	
Collect/ Credit Cheques/ remittances/ Warrants/ Refund orders/ ECS/ RTGS account in the HUF A/c Noofof	/ NEFT/ instruments issued in favour of, being the karta in the, HUF
We hereby undertake to indemnify the Bank in case of any loss/claims/damag	es/penalty/charges etc suffered by the Bank, on account of our aforesaid instruction/mandate.
Place: Date: Date: D M M Y Y Y N	Name:
Place: Date: D M M Y Y Y Y N	Name : Signature :
Place: Date: Date: D M M Y Y Y Y N	Name: Signature:
Place: Date:	Name: Signature:
*Here state the name of the children of each of the family members stating their parentage	and state also the name of guardians by whom they are represented.

Terms & Conditions

- In case of Joint A/c., separate form is required.
- All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement business purpose and on need to know basis.
- Axis Bank shall always strive to comply with the rules and regulations as applicable from time to time on this context in accordance with the bank's Privacy policy my consent to the sharing of the data, the products/services available to me, pursuant to the consent provided earlier, shall no longer be available to me, and initiate closure of such products/ services.
- All the terms and conditions, processes and alternatives have been explained to me in local language as well.

■ E-Aadhaar Declaration	
There is no change in the Aadhaar Detail after the date of download of e-Aadhaar submitted to the Bank.	
Name Mismatch Declaration	
I want to update Rekyc for Current/Savings/FD/OD/Loan Account with your Branch. I am submitting the following documents which carry variation	ons in my name
Name as per NSDL:	
Name as per OVD:	
Name is correct as per the OVD and both the names are one and the same. I request you to update Rekyc as per the OVD. Name differs with NSDL site; kindly attach PAN copy	
Customer DOB Mismatch Declaration	
With reference to my request for Rekyc/Profile updation, I hereby affirm that date of birth $\begin{bmatrix} D & D & M & M & Y & Y & Y & Y \end{bmatrix}$ as declared by me in the fo	orm is correct and request you to
kindly consider the same and make the necessary update in the Bank records.	s sorrest and request year to
■ Signature Mismatch Declaration	
With reference to my request for Rekyc/Profile updation, I hereby affirm that my signature has changed from the one featured in myover passage of time. My present signature is as under and I hereby confirm that all actions and transactions authorized/executed by me using the binding on me. Name:	
Previous Signature Present Signature	
I Would Like To Activate My Inoperative Account	
*Reason for not operating the account Not in state / country Using alternate account Others	
Customer Acknowledgement	
• I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you	
of any changes therein, immediately.	AFFIX RECENT
• In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/we may be held	PHOTO &
liable for it.	Customer Signature Across Photo and
My personal / KYC details may be shared with Central KYC Registry	Branch stamp and signature
• I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address	
• I agree to indemnify and keep indemnified the Bank at all times from and against all costs, charges, damages, penalties (including attorney fees)	~
suffered and/or incurred by for any act done or omitted to be done on account of the above declaration.	Signature of Applicant
Branch Declaration - For Bank Use Only	
Customer DOB Mismatch Declaration: I certify that the customer has personally met and identified the customer. Kindly process the request. Signature Mismatch Declaration: I certify that the customer has personally met by me and I have identified the customer and he/she has signed in Kindly process the request. Customer Photo Mismatch Declaration: I confirm that the photo of the applicant affixed on CRF and that on OVD is of one and the same personal Negative Declaration: Negative Declaration: I have conducted necessary due diligence and confirm that the name of the customer for Rekyc updation is not part of negative database.	
Certified that this Form is complete in all respect & all relevant documents are obtained & verified with Mode of operation and	
ignatures of the A/c. The request may please be processed.	Signature & Branch Stamp
Designation OH BH *S.S No *Constitution code Resident Individual HUF	Signature & Branch Stamp
Documents Received Certified Copies E-KYC data received from UIDAI Data received from Offline verification Digital KYC Proce	ess Equivalent e-document
KYC VERIFICATION CARRIED OUT BY	
• E-Aadhaar Declaration: E-Aadhaar downloaded in presence of me - wherever applicable. • Name Mismatch Declaration: I certify that the customer has personally met and has signed in my presence. Kindly process the request.	
Identity Verification Done Place: *Date D.D.M.M.Y.Y.Y.Y.	
Emp. Name :	Ø
Emp. Designation : *Emp. Branch:	mployee Signature & Branch Stamp
S.S No	
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• • • • • • • • • • • • • • • • • • • •	t Name
Date of Request Received D D M M Y Y Y Service Request No.	
Name of Branch Official	
Employee Number of Branch Official	Signature & Branch Stamp