

☐ Internet Banking DP & Tele DP Service

☐ Auto Emailer Service

Gigaplex, Building No.1, 4th Floor, Plot No. I. T. 5, MIDC, Airoli Knowledge Park, Airoli, Navi Mumbai - 400708. Email: dp.operations@axisbank.com

## **Application for availing e-depository Services**

To The Branch Head, Axis Bank Limited, Br	anch			ſ	Date:	D	D M	M	YY	YY	/		
Dear Sir, I/We hold a Demat Account with your branch. Th	ne details of	f my/our	relation	ship	are as	s unde	er:						
Demat Account Number **:	I N	3 0	0	4	8	4	-						
PAN Number  I/We would like to subscribe for the following e-whichever is required)	Depository	service(s)	as per	the to	erms	and c		OB.: [ ns app	D D pended	]	И Y w. (Ple	Y Y Ease t	Y Y tick (✔)
Internet Banking Depository and Tele Depo	sitory Serv	vice :											
I/We require access to my/our above mentioned Internet Banking User-ID of Demat account holde		count thro	ough In	terne	et Bar	nking .	/ websit	te and	d Tele I	Deposi	tory.	The e	existing
Bank Cust ID of Sole/ First Holder :													
Bank Cust ID of Second Holder :													
Bank Cust ID of Third Holder :													
Auto E-Mailer Service:													
I/We would like to have the statement of transact Email Id (please write clearly): The Statement can be emailed to us with the follow		@							:				
☐ On Monthly basis ☐ On Weekly basis	On a da	aily basis											
I/We the under mentioned Demat Account holde Axis Bank Limited, are subject to the Terms and co										ed sen	vices,	provi	ded by
Terms & conditions for requisition for DIS book through Website and/ or by email				e Dep	osito	ory an	d Trans	actio	n and	Holdir	ng St	atem	ent
<ol> <li>I/We am/are aware that I/we will not receive the transaction</li> <li>I/We agree that Delivery Instruction Slip (DIS) booklet reque in terms of the NSDL/CDSL requirements entirely as to our riat my/our registered address for communication as recorde applicable cost (if any) that the Bank may now or subsequer</li> <li>I/We will take all the necessary steps to ensure confidentiali</li> <li>I/We am/are aware that the transaction statement may be a I/We take the entire responsibility of the same.</li> <li>I/We agree that the transaction statements are sent by e-ma</li> <li>I/We agree and aware that DP shall have the right to termin.</li> <li>I/We agree that the above terms and conditions are in addit PARTICIPANT AND THE PERSON SEEKING TO OPEN AN ACCORD</li> </ol>	sted through Ir sk & conseque d in above stat- itly prescribe. sy and secrecy o ccessed by oth ill, I/we shall im ate such service on to and not	nternet Bank ences. The Ba ed Demat A of the login reer entities in mediately in e provided a in contraver	king depo ank shall b ccount (as name and a case the nform the written n ition of th	pe abso s intima I passw confid DP ab otice is se term	olved of ated ar vord of entialit out cha s given s and c	fits dutind recore the Interpreters by / secre ange in atleast conditio	es/liabilite ded by the ernet / e-m ecy of the e-mail add 10 days in ns formin	es if the e Axis B nail acco login na dress, if n advand ig a par	DIS boo Bank Lim ount. ame and f any. ce and vi t of the "	klet requited from passwo ce versa. AGREEN	uested n time t rd is cc	is desp to time ompron	atched ) at nised.
Please do the needful at the earliest at my/our sole respo													
Signature of Sole/ First Holder***	Signatur	e of Seco	nd Hold	er**	k			Sign	ature c	of Third	l Hold	ler**	*
** Compulsory fields to be provided. *** All DEMAT A	ccount Holo	ders must s	ign the	form.									
(For Branch use only)													
Account holder/s signature/s verified by:													
Name of the Officer	Er	mployee i	No.	_		Sigr	nature c	of Emp	oloyee	& Brar	nch S	tamp	
(For use at Central Office – Depository Servi	es only:)												
Processing Unit Processing Stage Emplo	vee No.	Si	anatuı	re		Seal	/ Rema	arks_					

Central Unit

Account Activation