AXIS BANK

Customer Request Form

FASTag
Easy to Cruise

To,

The Branch Head

Axis Bank Ltd.

_____ Branch | SOL ID: _____

Request No.: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Date of Request: [D][D] [M][M] [Y][Y][Y][Y]

Customer Name: [ ]

Mobile Number: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]   **(OR)**   Wallet ID: [ ]

☐ *I hereby certify that I am a customer of Axis Bank FASTag and would like to update the below mentioned details. I certify that I would provide all the necessary documents when requested by the bank.

1. Re-Issuance of FASTag - (Applicable Tag cost would be recovered from wallet balance)

*Vehicle Number: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

☐ *I confirm that I have removed and disposed the existing FASTag from my vehicle

☐ *(I hereby give my consent to debit my wallet with applicable Tag cost)

*Please attach annexure (vehicle details) for more than one vehicle

2. Addition of Vehicle in Existing Wallet (Applicable Tag cost, Security Deposit and Threshold Amount would be recovered from wallet balance)

*Vehicle Number: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

☐ *(I hereby give my consent to debit my wallet with applicable Tag cost + Security Deposit + Threshold Amount)

*RC Copy with original verified & branch attestation to be attached
*Please attach annexure (vehicle details) for more than one vehicle
*FASTag would be issued as per vehicle class identified from RC
*Vehicle Image Front with VRN and Vehicle Image Side with Axle

3. Dispute / Chargeback

☐ Double Debit   ☐ Paid by Cash   ☐ Excess Charged   ☐ Others

Toll Txn. Date: _____   Amount: _____   Plaza Name: _____

Dispute Information:

[   ]

4. Change of Dispatch Address / Update Address

Home: ☐

*Address: [ ]

[ ]

*Landmark: [ ]   *State: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

*City: [ ]   *Pincode: [ ][ ][ ][ ][ ][ ]

*Country: [ ]   *Nationality: [ ][ ][ ][ ][ ][ ][ ][ ][ ]

Shipping: ☐

*Address: [ ]

[ ]

*Landmark: [ ]   *State: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

*City: [ ]   *Pincode: [ ][ ][ ][ ][ ][ ]

*Country: [ ]   *Nationality: [ ][ ][ ][ ][ ][ ][ ][ ][ ]

5. Document Number Update

Document Number Update: (For Minimum KYC updation require Passport / Driving License / Voter ID Card / Nrega Job Card) -for Non Axis Bank Customer) - Attach document copy with Branch Original verified attestation

Document Type: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Document No.: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ *Document Validity Date: [D][D][M][M][Y][Y][Y][Y]

6. Mobile Number Update

Mobile Number: ☐☐☐☐☐☐☐☐☐☐

7. E-mail ID Update

E-mail ID: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

8. PAN Update

Pan Number: ☐☐☐☐☐☐☐☐☐☐

9. Date of Birth Update

DOB: [D][D][M][M][Y][Y][Y][Y]

10. Vehicle Number Update (RC Copy with Original Verified and Branch Attestation to be attached)

Existing Vehicle Number (according to profile) / Chassis Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Vehicle Number to be Updated: ☐☐☐☐☐☐☐☐☐☐☐☐☐ *RC Validity Date: [D][D][M][M][Y][Y][Y][Y]

11. Name Modification

Retail: ☐   Corporate: ☐

Name to be modified: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

12. Closure of Wallet

Refund Bank Account No.: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Bank IFSC Code: _____

Bank Account Name: _____ Bank Name: _____

☐ *I confirm that the physical tag (s) associated with the vehicle (s) has been removed

13. Tag Closure (Wallet will be active only FASTag allocated would be closed)

Vehicle Number: _____ **(OR)** Tag Sequence Number _____

*Post Tag closure, funds will get credited in linked wallet.

☐ *I confirm that the physical tag (s) associated with the vehicle (s) has been removed

14. Closure Reason: (Wallet / Tag)

☐ Recharge Issue   ☐ Vehicle Sold or Not in Use   ☐ Exempted Category   ☐ FasTag Not Required   ☐ KYC Issue

☐ Service Issue   ☐ Car Sold or Purchased New Car   ☐ Using other Service Providers FasTag ☐ FasTag Lost   ☐ Tag Destroyed

☐ Technical Issue   ☐ Upgraded to Corporate User or Tag ☐ Car or FasTag Damaged or Destroyed ☐ Tag Blacklisted   ☐ Others

15. Update CIF / NCIF ID for Enabling Full KYC (Axis Bank Customers)

A/c No.:_____ CIF ID: _____ NCIF ID: _____

16. Autosweep

Activation: ☐   De-Activation: ☐

Bank Account Number: _____ (For activation provide Auto Debit Mandate form) ☐

17. Any Other Issue

✍ Customer Signature
(Along with Signature Verified Stamp)

For Branch Office Use Only

☐ Certified that this Request Letter is complete in all respect and all relevant documents are obtained and verified mode of operation and signatures of the A/c. 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 and also his / her signature in Bank's records. I have done a proper due diligence for updating the records of the Customer on his / her request at non-base branch.

Request Received Date: | D | D | M | M | Y | Y | Y | Y |

Request Certified by BH / OH: | | | | | | | |
(Employee number)

Signature & S. S. Number: | | | | | | | |

Request accepted by: _____ Employee Number: _____ Signature: _____

Acknowledgement to Customer

Request Number: | | | | | | | | |

Request Received Date: | D | D | M | M | Y | Y | Y | Y |

Employee Number: _____

Name of Branch Official: _____

Signature: _____