	Fixed/Recurring Deposit Existing Customers - Resident Individuals/HUF/Overseas Indians Form Type	
Type of Account: Fixed Deposit Recurring Deposit	Tax Saver FD FD Plus* NRE Deposit NRO Deposit FCNR Deposit RFC Deposit	٦
*Cannot be closed prior to maturity	For Office Use	-
		_
Branch Name	Branch Code: Scheme Code Date: D M Y </th <th></th>	
Primary Applicant	Customer Onboarding Section	
Name* PREFX FIRST		
	omer ID* PAN***	\square
Joint Applicant Name* PREFX FIRST		\square
	omer ID*	
***If PAN is not available, please fill up Form o	60 or 61 separately. PAN/Form 60/61 is not required for NRE/FCNR deposits FD/RD Account Opening Section	
· · · · · · · · · · · · · · · · · · ·	our Date of Birth is updated in Bank Account. Special rate available for Staff and Senior Citizens are not applicable for NRE/NRO/FCNR/RFC dep ed Fixed Deposit in the form of (Tick one): Receipt Physical Advice e-Advice	osits
Self	Either/ survivor Former / survivor Anyone/ survivor	
Jointly by all	Minor A/C operated by Guardian Others Type of Deposit account	
Deposit/Installment Amount:	Period: Months Days Period of RD should be only in multiples of 3 months	_
	Reinvestment) Monthly (MIC) Quarterly (QIC) Half-yearly* Simple (Payout) *Applicable for Overseas Indians only val for Recurring Deposits, FD Plus & Tax Saver FD) No. of times III III "INTEREST PAYMENT/MATURITY PROCEEDS" Section.	1
tanding Instruction for RD: kindly debit my A	A/C no. On on of every month.	
DS to be deducted: Y Form	SB/CAA/C No OR FD	
N If No, TDS exempt reference No	TDS exempt submission date D D M Y Y Y	
Form 15H/G	tely by Branch wherever applicable. Interest Payment / Maturity Proceeds	_
For Interest Payment/Maturity Proceed		
Credit My Axis Bank A/C No	Signature Applicant Signature	
	time to time. 2) please refer the latest interest rate chart at the branch or visit www.axisbank.com 3) Interest payment is subject to tax deduction at source. prematurely closed before 1 year and also subject to terms and conditions.	
Payment by : DD Cheque	Remittance Details * Applicable for Overseas Indians only Wire Transfer TC FC Debit to Account	
umount ₹/FC		
	specify Foreign Currency) Remitted through	
	Initial Payment Details	
Deposit Amount ₹	(in words)	
Mode of Payment : Cash Debit r	my/ our existing A/C A/C No. (as per mode of operation)	
Cheque No.	Dated D M Y Y Y Y Cheque should be crossed A/C payee and drawn payable to "Axis Bank Ltd A/c <applicant name="">"</applicant>]
Drawn on	BankBranch Signature Applicant Signature only for A/C Deb	sit.
Office use only: Initial Deposit Tran ID	Value Date D D M M Y Y Y	n L

|

1	

Nominatio	on (Da1 Form)* (Only one individual nominee p	ermitted and to be signed also in case of n	o nomination)
I wish to nominate *** I do not	wish to nominate	Print Nominee Name: 🛛 🕅	
	Banking Regulation Act, 1949 and Rule 2 (on) Rules 1985 in respect of bank deposit
I/We (Name)	(Address) e event of my/our/minior's death the amount of de		by AXIS BANK ITD
			rimary Applicant
Name		Address: Same as Pr	
If different form Primary Applicant			
Relationship with depositor, If any	Age	Years If nominee is Minor, Da	ate of Birth DDMMMYYYY
As nominee is minor I/We appoint (name)		Relationship with minor	r
*Strike out if nominee is not a minor	If different		
to receive the amount of deposit on behalf or Signature of Witness***	f the nominee in the event of my/our minor's de	Signature of Primary Applicant**	
Name			
Address		Address Signature of the Joint Applicant(s)	
"Strike out if nominee is not a minor "Where deposit is made i	in the name of a minor, the nomination should be signed by a perso in annexure **** hereby decline to presently nominate any individu	n lawfully entitled to act on behalf of the minor.	
In case of thumb impression, nomination to be filled in as a	n annexure Thereby decline to presently nominate any individu Rules & Reg	• •	s associated with nomination not given by me
1)The payout of interest on Term Deposits under Monthly Intere 2)The payout of interest for Quarterly Interest Certificate is appli	est Certificate scheme, takes place at a discounted rate as prescribed u		
2)TDC: 1) In second effective effective entry of the later section entry of the second effective	d	n calendar quarter basis. , as applicable from time to time as per the Income Tax Act. 196	51 and Income Tax rules. Calculation of TDS in respect of interest on
Fixed Deposits (wherever applicable) TDS in respect of interest financial year crosses the threshold limit as applicable from time avampting from TDS on the interest income of ED and PD have	a on anniversary quarter and for LDS purpose interest is computed or therest payment is subject to tax deduction at source. TDS rates will be t earned on fixed deposits, is deducted on the basis of the total inter to time, TDS is deducted proportionately from the existing fixed dep to submit a completed Form 15 G/H at the Bank branch within the n may be renewed on and after 1st August 2013, interest reinvested wo	est projected on the aggregate of fixed deposits of the custo osits at the time of interest application. This is in accordance w	mer, for the financial year. Thus, if the total projected interest in a with Section $194A3(i)(a)$ of the Income Tax Act. Individuals seeking all new Baiyacetment Tax Denosite to be properly and an and after 1 of
August, 2013 and all existing Reinvestment Term Deposits that n 4) Premature Encashment: a. For Rupee Term Deposits of a cor	may be renewed on and after 1st August 2013, interest reinvested wou ntracted amount less than ₹ 5 Crores opened/renewed on or after N	Id be net of TDS and hence the maturity value would vary to t Aay 1, 2014 (including Flexi deposits), interest rate shall be 1	hat extent. 1.00% below the card rate, prevailing as on the date of deposit, as
applicable for the period the deposit has remained with the bank period the deposit has remained with the bank or the contracted b. For Pureo Term Deposit of a contracted amount less than \overline{z}	Intracted amount less than \$ 5 Crores opened/renewed on or after N k or 1.00% below the contracted rate, whichever is lower. However, for I rate, whichever is lower.	or Rupee Term Deposits closed within 14 days from the date o	f booking of the deposit interest rate shall be rate applicable for the
Penalty Rate will not be applicable. For subsequent partial with Rate will be applicable for the entire withdrawal amount. Howev	5 crores opened/renewed on or after December 15, 2017 (includin drawals, Premature Closure Penalty Rate will apply on the entire with /er, for Rupee Term Deposits closed within 14 days from the date of bo	drawal amount. For the partial withdrawal with value > 25% c oking of the deposit, interest rate shall be rate applicable for t	F 25% of term Deposit original principal value, Premature Closure of Term Deposit original principal value, Premature Closure Penalty he period the deposit has remained with the bank or the contracted
rate, whichever is lower.	es and above, interest rate shall be 1% below the card rate prevailing Deposits closed within 14 days from the date of booking of the depos		
and the second state of a se	stern af the end of the control of a first device on a first end of all her control for which a set	a la la surra a la surra a la	
remained with the bank or the contracted rate, whichever is low the period the deposit has remained with the bank or 1% below to for purpose the period of a contracted amount loss than Per-	ton of the minimum penod of 7 days, no interest shall be paid for the sa for NRE and FCNR Deposits. For NRE /FCNR Deposits of a contrac- rer,g. For NRE /FCNR Deposits of a contracted amount is 7 5 Crores & the contracted rate, whichever is lower. S., 5 crores and for a tenure >2 Years, premature penalty will not be i s), Tbs closed for the entire contracted amount and for Domestic & termination and payment of Term Deposits held in 'Either or Survivor' rge. However, the interest rate shall be the rate applicable for the perit	above (or equivalent in FCNR), interest rate shall be 1% below	w the card rate prevailing as on the date of deposit, as applicable for
newed on or after December 15 2020 (excluding Flexi deposit: 5.a. In the event of the death of one of the depositor, premature to back citical perpendicular back and a set of the depositor.	s), TDs closed for the entire contracted amount and for Domestic & termination and payment of Term Deposits held in 'Either or Survivor'	NRO deposits. or Former or Survivor' or 'any one' basis shall be allowed to sur-	vivor /s. Such agents to survivor/s shall give valid discharge to the
deposit, the bank is entitled to honour the same. We further of Su	revivor' and a premature withdrawal is required by either of the joint h firm that the payment of proceeds of such deposits to either one of us	older eepositias femaled with the bank of the construction of us reque represents a valid discharge of the bank's liability, provided t	est the bank, to allow either of us to prematurely withdraw the said there is no order from a competent court restraining the bank from
making the payment from the said account to either of us.	or Survivor' or 'Anyone or Survivor', in the event of the death of one of leposit without seeking the concurrence of the legal heirs of the decea		
to him/her shall not affect the right or claim that any person/s ma e.Where the deposit is held singly and premature withdrawal is a request the bank without seeking the concurrence of my legal	In order. In K from making the payment from the said account, (ii) That the surviv ay have against the survivor to whom the payment is made. required by the nominee in the event of death of the deposit holder. (I heirs. I further affrm that payment of the proceeds of such deposit that buch payment to him/hershall not affect the right or claim that m	 In the event of my death, the nominee named for the deposition to the nominee represents a valid discharge of the bank's liab 	it is entitled to prematurely withdraw the said deposit, if he/she so lity (ii)That the nominee would be receiving the payment from the
o) All encashment or withdrawais of Fixed Deposit with repayme	ent instruction as direct credit to the linked account can be executed at	any Axis Dank Dranch.	
7) (i) For Recurring Deposits opened on or after 9th August,201 Recurring Deposit Customers, in case of delay in payment of any the purce of the part of the part of the part of the part of any	16, in case of delay in payment of any instalment/s beyond the calend instalment/s beyond the calendar month, the depositor /s shall be liak delay (iii) Fraction et a month will be tracted as full month for the numeric the numeric statement of the numeric statement for the numeric statement of the numeric statement of the numeric statement for the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement of the numeric statement	dar month, the depositor /s shall be liable to pay a penalty at sle to pay a penalty at peage of solutions such penalty is a if the instalment due on 2	₹ 10 per ₹ 1000 per month for the period of delay. (ii) For Existing
of the Recurring Deposit.	delay. (iii) Fraction of a month will be treated as full month for the pur dates 28th/29th/30th/31st will not be available at the time of Recurr		
 8) For all new Reinvestment Term Deposits to be opened on and vary to that extent. 9) Minimum deposit amount for opening of FD Plus account is ₹5 	I after 1st August, 2013 and all existing Reinvestment Term Deposits t	that may be renewed on and after 1st August 2013, interest re	einvested would be net of TDS and hence the maturity value would
10) FD Plus Deposits cannot be closed prior to date of maturity	y. Premature withdrawal is not permissible under this scheme except e above cases will result in the change of applicable interest rate from t	for exception cases which include bankruptcy/winding up/d the FD Plus rate to that of Normal Fixed Deposit rate (as per th	lirections by court/regulators/receiver/liquidator/deceased cases. e prevailing rate) and will include application of penalty.
11) In case of minor, minor declaration needs to be filled in. 12) An overdue term deposit or its portion may be renewed from	n the date of Maturity, provided the overdue period from the date of	maturity till the date of renewal does not exceed 14 days. The	e rate of interest payable on the amount of the deposit so renewed
	n the date of Maturity, provided the overdue period from the date of I as prevailing on the date of maturity. If the overdue period is more th amount so placed as a fresh deposit at the rate decided by the Bank wi al of large deposit for amount ₹ 5 crs and above held by entities other th		
14)Personal Information: a. Any updation of my details including damage, due to my providing wrong information or not updatin information will be used in the predicting of early income facilities.	g personal information, change of address etc. will be provided by me of the information that may occur to me and to Axis Bank and based for the part of the part of the provided information and underta (insti-	to the bank, along with documents of proof within 2 weeks of on which the bank may act as true and correct. b. All informa-	of such change. I agree to indemnify Axis Bank for any fraud, loss or ation provided by me of any nature (including personal & sensitive
clearing network as may be required by law/customary practice business purpose and on need to know basis. Axis Bank shall alv	by the bank c. All information provided by me of any nature (includi ways strive to comply with the rules and regulations as applicable from	in time to time on this context in accordance with the bank's F	prices/service providers who have an agreement with Axis Bank for Privacy policy. If I intend to revoke my consent to the sharing of the
15)FATCA-CRS Terms and Conditions: The Central Board of Dire and beneficial owner information and certain certifications and c	al of large deposit for amount $\$$ or sand above held by entities other the gersonal information, change of address etc. will be provided by me g the information that may occur to me and to Axis Bank and based f, aclitization of transactions, providing information and updates (includi ways strive to comply with the rules and regulations as applicable from event provided earlier, shall no longer be available to me, and I shall be rect Taxes has notified on 7th August 2015 Rules 114F to 114H, as part documentation from all our account holders. In relevant cases, informa- lase include United States in the foreign country information find and r has noty et bene issued, please provide an explanation and attach thi un of $\$$ 5 lable (runice).	: of the Income-tax Rules, 1962, which Rules require Indian fin ation will have to be reported to tax authorities/ appointed ag	ancial institutions such as the Bank to seek additional personal, tax encies/ withholding agents for the purpose of ensuring appropriate
withholding from the account or any proceeds in relation theretor advisor. If you are a US citizen or resident or green card holder, pl are tax resident issues such identifiers. If no TIN is yet available or	o. Should there be any change in any information provided by you, please include United States in the foreign country information field all rhas not yet been issued, please provide an explanation and attach this	ase ensure you advise us promptly, i.e. within 30 days.If you ha ong with your US Tax Identification Number.\$ It is mandatory s to the form.	ave any questions about your tax residency, please contact your tax to supply a TIN or functional equivalent if the country in which you
10) The deposits in the bankare insured with Diede for an annou	unt of ₹5 lakhs (principal + interest) per depositor. elevant sections and columns are completely filled to your satisfactic		
	provided above is up to date and correct and I hereby sul		tocopy of the KYC documents.
Signature of Primary Applicant*	Signature of 1st Joint Applicant	Signature of 2nd Joint Applicant	Signature of 3rd Joint Applicant
Credit Card Offer:			
I wish to apply for Credit Card against		EMP No.	Date D D M M Y Y Y Y
this FD 🝸 N	Signature of Bank Official in whose presence signed		
Applicant for Customer	F		
	For Office U	Jse Only	
A/C No.	A/C Manager		For Axis Bank Limited
SE Code	Ledger No REP Code		
A/C Lable 1		A/C Lable 2	
Camp Code	Camp. Reference Numbe	r	Branch Head / Authorized Signatory
			Name of Official:
DECLARATION BY THE BRANCH I hereby certify that this account opening form is corr	nplete in all respects and relevant documents have been o	obtained as per the KYC guidelines of the Bank	Designation :
and RBI (as amended from time to time) and performe Incase of signature mismatch, I certify that the custom	ed due diligence to verify the genuineness of the custome ner has been personally met and has signed in my presence	r. The Account may please be set up in Finacle. . Kindly process the request.	S. S. Number :
	2		

Form Type				
		TDJ		

Costomer Obloading Sectors - Joint Applicant / Customer Discussion Details Costomer* Costomer* These Costomer* Data of Starting										D10																		
Setting Customer: Wisk: Carboner: 10 Contact details opdation required ::::::::::::::::::::::::::::::::::::				Custon	ner Or	nboar	rding	Sectio	n - Jo	int /	Appli	cant /	' Gu	ardia	an / F	Kart	a											
<pre>stature Customer * _ *********************************</pre>	Name* P R E F X	FIRST															MI	D	DL	Ε.								r 61
Control details updation required 1 Na, please proceed to filing the decleration Trade details updation required 1 Na, please proceed to filing the decleration Trade details updation required 1 Usual of therwise, lake reserves the right to consolidate the context state gives below, enders and using the decleration of the two declerations and using the decleration declerations and using the declerations decleration and using the decleration decleration and using the declerations decleration and using the decleration declerat		LAST																		T	T							Form 60 o
If in the information and income	Existing Customer* Y	If Yes, Cust	omer ID																									eclaration
Exclange delta & Applicable forme outcome or gravy for Modification (a reacting continues de calls present being woll a guided and account hed with the tank in the interview of th	Contact details updation re-	quired	If No	, please	procee	ed to t	filling	the dec	laratic	n																		ditional d
Date of Birth* Image: A model Image							-																		1		h [.)	fill up Ad
If trained/sector clines, places provide proof of COS [®] "If minor places fill Man Declaration Section "I stands for "third gender" PA************************************			omers of		_							-	tact	_				WIII	be up	odate	ed in a		coun	t held	With	1 the	bank)	, please
PAN** orOND 40/1 ""If PAN is not available, please till up Additional declaration Form 60 or 61 Address Cells			YYY										Y				Ĺ	,										available
Communication Address*	Address Details																											
Landmak*				Sai	me as p	primar	ry holo	der				Ple	ase	note	the a	ddre	ss be	elow	' 									
Pin code	Communication Address*																											
Pin code																												
Reideline: Type' Owned Rented/Leased Ancestral/Parental Company Provided EG. BKADAM@GMAIL.COM EG. BKADAM@GMAIL.COM Mobile No Email Address' Prease ensure to furrish correct enail ID. Tel. No. (R) Tel. No. (Q) Prease note the address below Internation address' Prease note the address below Undmark* Internation address Prease note the address below Lundmark* Internation address Construct Previded Construct Previded Residence Type* Owned Rented/Leased Ancestral/parental Company Provided Residence Type* Salaried Student Housewife Others Occupation Code*# Residence Type* Salaried Student Housewife Others Occupation Code*# Note Credits in Riakhpi* Transaction ID Yot Y Frease note deasage Fread Is	Landmark*														City*													
E.G. RKADAM@GMALLCOM Mobile No Email Address Tel. No. (R) Tel. No. (R) Person enter the address below Intervention City Pin code* Stame as communication address Pin code* State* Occupation* State* Customer Profile (State one softed) Occupation* State* Customer* Others Occupation* State* Customer* To the filed by the Branch If No. (No Transaction ID Customer* To the filed by the Branch If No. (Decomment Type ID No. Dectarction S Signature Joint Applicant Emp No. Dother Dother	Pin code*	Sta	te*												Coun	try*												
Mobile No	Residence Type* Owned	Rented	/Leased		Ances	stral/F	Parent																					
Proceensarie to fundor correct entral ID. Permanent Address** Same as communication address Please note the address below Indianark* Landmark* Indianark* Indianary Indinore on one fuel produce the original copies	Mohile No				Em	ail Ad	droce		KADA	M@	GMA	L.COM	1															
Permanent Address** Same as communication address Please note the address below Indmark* Please note the address below Landmark* City* Pin code* State* Pin code* State* Cocupation* Salaried Cocupation* Salaried Salaried Self Employed Business Retired Student* Please mention accupation accupation Salaried Self Employed Business Retired Student* Housewife Others Occupation Cocupation* Salaried Salaried Self Employed Business Retired Student* Housewife Others Occupation Code*# Annual Turnover/Income 1<>1.5<>5.510<>>0.52<>>25.50 Vet Credits in Rukho!* Transaction ID Cocupation compation To be filed by the Beach If No, please provide KYC documents (Attach photocopies of the following documents and produce the original copies of these document for verification) Cectaration & Signature O beach Deductory Document Type D						iali Au	iui ess		ensure	to fu	rnish c	orrect e	mail	ID.														
Image: Signature of Bank Official in whose presence signed Image: Signature of Bank Official in whose presence signed	Tel. No. (R)				Te	el. No.	. (O)																					
Pin code* State* Ancestral/parental Company Provided Preferred Language of Communication Customer Profile (select one option) Cocupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*#	Permanent Address** Sar	me as commu	nication	address	5	F	Please	note th	e add	ress	below	,																
Pin code* State* Ancestral/parental Company Provided Preferred Language of Communication Customer Profile (Select one option) Cocupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*#																												
Pin code* Residence Type* Owned _ Rented/Leased _ Ancestral/parental _ Company Provided _ Preferred Language of Communication																T	T	T	Ī					T	T	T		
Residence Type* Owned Rented/Leased Ancestral/parental Company Provided Preferred Language of Communication Customer Profile (Select one option) Occupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*# Annual Turnover/Income <1	Landmark*					\square									City*		T	Ť	Ē					T	Ť	T	\square	
Residence Type* Owned Rented/Leased Ancestral/parental Company Provided Preferred Language of Communication Customer Profile (Select one option) Occupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*# Annual Turnover/Income <1		Stat	e*													untr	 v*							\pm	+	+		
Occupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*# Annual Turnover/Income <1	Residence Type* Owned				Ances	stral/p	arent	al 🗌	Con	npan	y Prov	/ided		Pret	ferred	l Lar	, iguas	ge of	f Cor	nmu	inica	tion				_		
Occupation* Salaried Self Employed Business Retired Student Housewife Others Occupation Code*# Annual Turnover/Income <1							Custo	omer P	rofile	(Sele	ect one	option		ī														
(Net Credits in Rlakhs)* #Please mention occupation codes as applicable for Non Individuals in case of HUF Know Your Customer* Account opening through e-KYC (Aadhaar) \[\text{N}] \[\text{Transaction ID} \[\text{Transaction ID} \] If No, please provide KYC documents (Attach photocopies of the following documents and produce the original copies of these document for verification) Identity proof Document Type ID No. Identity proof Document Type ID No. Issuing Authority Place of Issue Declaration & Signature Identity solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents Imp No. Imp No. Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.	Occupation* Salaried	Self Em	ployed		Busines	_	-							ouse	wife		C	Dthe	rs [0	ccup	atior	ו Cod	le*#			
	Annual Turnover/Income		<1		> 1	-5		> 5-10		> 1	LO-15			> 15	-25		> 2	25-5	io [>	50 [
Account opening through e-KYC (Aadhaar) Image: Transaction ID If No, please provide KYC documents (Attach photocopies of the following documents and produce the original copies of these document for verification) Identity proof Document Type ID No. Address proof Document Type ID No. Issuing Authority Place of Issue Declaration & Signature Id o hereby solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents Image: Signature of Joint Applicant Emp No. Image: Declaration on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.	(Net Credits in ₹lakhs)*												#PI	ease r	nentio	n oco	cupati	ion o	odes	as ap	plical	ole fo	r Nor	ı Indiv	iduals	s in ca	ise of	HUF
If No, please provide KYC documents (Attach photocopies of the following documents and produce the original copies of these document for verification) Identity proof Document Type ID No. Address proof Document Type ID No. Issuing Authority Place of Issue Declaration & Signature I do hereby solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents Image: Signature of Joint Applicant Emp No. Image: Declaration on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.						г	ł	Know Y	our C	ust	omer	*																
Identity proof Document Type ID No. Issuing Authority Place of Issue Address proof Document Type ID No. Issuing Authority Place of Issue Declaration & Signature I do hereby solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents Image: Signature of Joint Applicant Image: Signature of other holders Photo Signature of Bank Official in whose presence signed Image: Signature of other products & Offerings* Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time. Image: Signature of sum and such as a su				,		L																						
Address proof Document Type ID No. Issuing Authority Place of Issue Declaration & Signature I do hereby solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents					the fol	llowin	ig doc	uments	and p			-		opies	of the	ese	docu	mer										
Declaration & Signature I do hereby solemnly declare that the information provided above is up to date correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents Image: Signature of Joint Applicant Image: Signature of other holders Image: Signature of Bank Official in whose presence signed Image: Signature of Context and Context a																												\exists
Signature of Joint Applicant Photo 35mm x 35mm Photo 35mm x 35mm Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.																												
Information on other products & Offerings* Information form time to time.	I do hereby solemnly declare th	nat the inform	ation pro	ovided a	bove is	s up to	o date	correct	and I	here	eby su	bmit n	ıy re	cent	photo	ogra	ph ar	nd se	elf-a	ttest	ed p	hoto	сору	of th	ne KN	YC de	ocum	ents
Information on other products & Offerings* Information form time to time.							Г																					
Information on other products & Offerings* Information form time to time.																												
Emp No. Date D M Y Y Y Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.	🖉 Signature of Jo	oint Applicant							4	് s	ignatı	ire of (othe	r holc	lers									F	Phote			
Signature of Bank Official in whose presence signed Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.																									n x 3			
Signature of Bank Official in whose presence signed Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.												1			·													
Information on other products & Offerings* I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.	Signature of Bank Official i	in whose preser	ce signed			Emp	o No.					Date		D	Μ	Μ	Y	Y	Y	Y								
I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for various other product updates, marketing promotions, special offers or any such information form time to time.					ln	form	natio	1 on ot	her n	rodu	icts/	. Offe	ring	2S*														
			iliates/A	gents co											g pron	noti	ons,	spec	ial o	offers	s or a	iny s	uch					
								1		1			F															
I do hereby give my consent to receive such information through Email Y N SMS N Phone Calls Y N Example Calls Signature	I do hereby give my consent to	o receive such	informa	tion thre	ough Ei	mail [YN	j sms	YN		Phone	e Calls	Y								Ľ	Sigi	natur	e				

Additional Declarations (Tick as applicable)

Form 60 [Please fill the latest version of Form 60 as separate annexure]

Form of Declaration t			dose not h	ave a permar	ent account	t number an	d who make	es payment in	cash in re	spect of	transaction
specified in clauses (a) t	to (h) of rule 114	4B.									

1. Full name and address of the declarant			
2. Particulars of transaction : Opening of Savi	ing/Current Account 3. Amount of the transac	tion:	
4. Are you assessed to tax? Yes / No 5. If yes,	(i) Details of Ward/Circle/Range where the la	st return of income was filed?	
(ii) Reasons for having PAN			
6. Details of the document being produced in	Support of address in column (1)		
	Verifi	cation	
I	, do hereby declare that what is stated	l above is true to the best of my k	nowledge and belief. Verified today, the
day of			
Date, Place			🖉 Signature
	Destantion (T. J. Cl. 11. J. B. Cl.		
	Declaration (To be filled by the applicant's		
			desirous of opening an account with your Bank is my
the below mentioned address:	ne / sne is res	laing with me since	(Month*) (year*) at
			City *
State*			City* Telephone Number*
The applicant dose not hold a documentary a			
	ress verification. I have no objection towards r	eceiving any correspondence for	
above-mentioned address. I enclose herewith		a a lala a tita a Dana a f	
1. Self-attested (Document Name*)			
2. Self-attested (Document Name*)			🖉 Signature
Name of the Declarant	Customer ID (If an existing customer		
Sign	ature Mismatch Declaration (in case of m	najor mismatch customer needs to	o submit an affidavit)
The signature on the ID proof / Address / Chee updated signature in your Bank records .	que provided is different form my signature in t	he Account Opening Form. Please	consider the signature on the Account opening Form as my
Old signature		New signature	
As per documents		as per account	
Existing Customer ID		opening form	
Existing Customer ID			
I agree to indemnify and keep indemnified the or omitted to be done on account of the above	-	ges document, penalties (including	g attorney fees) suffered and/or incurred by for any act done
	Minor I	Declaration	
Type of Guardian : 🗌 Father 🗌 Mother	Court Appointed Testamentary Gua	ardian	
Full Name of Guardian Mr. 🗌 Ms. 🗌			
his/her natural and lawful guardian/ guard I shall represent the said minor in all future tra	minor who is my is is is an appointed by court order, dated/ ansactions of any description on the above acc m of the above minor for any withdrawal/trai	/(copy enclosed). count until the said minor attains	🖉 Signature