



ACCOUNT OPENING FORM (Savings/Current Account - For Resident Individuals)

Date SOL ID Account No. CKYC No. Existing Relationship New AccountAccount type * Savings CurrentSegment * Pearl Seniors TASC Saving Corporate Salary Classic**Please fill the form in BLOCK LETTERS. All fields marked '*' star are mandatory.**

NAME OF APPLICANT/S as per ID* (Leave a Space between first, middle and last name)

<input type="text"/>	<input type="text"/>	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>	Last Name

In case the applicant is a minor, please write parent / guardian's name (as an applicant) below the Minor's name

PERSONAL DETAILS *Mode of Operation* Single Either or Survivor Former or Survivor Anyone or Survivor Jointly (Debit Card/ not applicable) Minor operated by GuardianCustomer Type* General Senior Citizen Staff Minor Politically Exposed PersonAadhaar No.* (Enter only Last 4 digits of Aadhaar No.)PAN No.* Form 60 (If PAN is not available, please fill up additional declaration Form 60)Date of Birth* Place of Birth* **In case of minor / senior citizen please provide proof of DOB
**If Minor please fill minor declaration formGender* Male Female Third GenderMarried* Yes NoMother's Maiden Name* First Name Middle Name Last NameFather/Spouse Name* First Name Middle Name Last NameNationality* Religion* Hindu Muslim Christian Sikh Zoroastrian Others _____Category* General OBC SC ST Others _____Education* Non-Graduate Graduate Post Graduate Others _____Annual Income* 0-5 lakhs 5-10 lakhs 10-50 lakhs 50 lakhs-1 Crore >1 CroreOccupation Type* Service Private Public Sector Government Sector Professional Self Employed
 Retired Home Maker Student Business Farmer Others _____Are you a physically challenged person ? Yes No. If yes, please select Blind Incapacitated Physically Handicapped Autism/Cerebral Palsy Mentally retarded (If customer is differently abled and/or not able to sign, accounts needs to be opened in Joint Ownership)Services Required Debit Card (Not applicable for Minors) Cheque Book SMS Alert E-StatementName as per Debit Card Mobile No.* (This will be preferred mobile number for all the communications sent from the bank. Bank will send transaction alert, critical information, OTP, etc. on this mobile number)Email Id* **MAILING ADDRESS ***Address Type* Residence OfficeResidence Type* Owned Rented/Leased Company Provided Others (Please specify) _____Line 1* Line 2 Landmark* City* State* District* Country* Pin code* **PERMANENT ADDRESS *** Same as Mailing address ? Yes No (If No, Please fill below details)Line 1*

Line 2 [REDACTED]

Landmark* [REDACTED] City* [REDACTED]

State* [REDACTED] District* [REDACTED] Country* [REDACTED] Pin code* [REDACTED]

Tax Residence of INDIA ONLY Yes No (If No, Please fill Additional declaration FATCA form)

DOCUMENTS REQUIRED

Proof of Identity* Passport Driving License Aadhaar Card Voter Id NREGA Card National Population Register

[REDACTED]
OVD NUMBER

Proof of Address (OVD) Passport Driving License Aadhaar Card Voter Id NREGA Job Card

[REDACTED]
OVD NUMBER

Proof of Address (deemed OVD) Utility Bill* Property/Municipal Tax Receipt Pension Payment Orders (PPOs)

Letter of allotment of accommodation* Leave and License agreements*

*In case of Joint Holders please fill PI Form Separately (For existing customers PI Sheet to be filled in case of any change in Demographic data).

*Please note only Electricity bill, Telephone bill, Post-Paid mobile phone bill, Piped Gas and Water bill will be accepted as utility bill.

*Issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies.

INITIAL PAYMENT DETAILS

Deposit Amount for Savings A/c. (in INR) [REDACTED]

Payment Mode Cash Cheque Internal Fund Transfer NEFT/RTGS (From self A/c. only)

If Cheque, provide details : Cheque No. [REDACTED] Date [REDACTED] REF/Txn./UTR No. [REDACTED]

Cheque should be crossed A/c. Payee and drawn payable to " _____ " <Applicant Name>

Drawn on _____ Bank _____ Branch _____ Signature _____

NOMINATION DETAILS*

Nomination Under Section 45 ZA of the Banking Regulation Act, 1949 and Rules 1985 in respect of bank deposits.

Nomination Required* : Yes (Please fill DA1 form separately)

No (The facility of nomination has been explained to me/us and I/we do not wish to make a nomination)

CREDIT FACILITIES (To be filled if Current Account is opened)

I/We hereby declare and confirm as follows:

1. I/We declare that I/We, have not availed any type of credit facility from any bank/s. In case I/ We, avail any credit facility, I/We shall immediately inform the bank to enable it to comply with extant regulation issued by RBI.
2. I/We declare that I/We have availed CC/OD facility for a sum not exceeding Rs. 5 crores either individually or cumulatively, from the below mentioned bank/s.
3. I/We declare I/ We have availed CC/OD facility for a sum equal to or exceeding Rs. 5 crores, either individually or cumulatively, from Bank/s as per details below.
4. I / We declare that I/We, have availed credit facility (other than CC/OD) of less than Rs. 5 crores from the below mentioned bank/s. In case my/our credit facility exposure exceeds Rs 5 crores, I / We shall immediately inform the bank to enable it to comply with extant regulation issued by RBI.
5. I / We declare that I/We, have availed other credit facility (other than CC/OD) of Rs. 5 crores & above but less than Rs. 50 crores from the below mentioned bank/s. I understand USFB as lending bank, can open my/our current account and as a Non-lending bank open only collection account.
6. I / We declare that I/We have availed other credit facility (other than CC/OD) of Rs. 50 crores & above from other bank/s. I understand USFB being one of the lending banks, can open only collection account, from which all debits from the account will be remitted to current account maintained with lending bank as per the joint declaration from me/us and my lender/s.

Below details to be provided if you have ticked either Sr. No. 2 or 3 or 4 or 5 or 6

Bank Name & Branch	Type of Facility	Sanctioned Amount (in Rs. Lacs)

I / We undertake that above details are correct and in case bank comes to know that I am/We are having CC / OD or of my/our exposure above, at any point in time, after opening of the account with USFB, you shall have absolute right to restrict operations in the account or close the account without any intimation to us as per extant regulation of RBI without any recourse against or liability to you.

I/We hereby voluntary give my/our consent to validate the aforesaid details by extracting information available with Credit bureaus to compute my/our aggregate exposure for the purpose of opening and/or continuing with the current account as per RBI guidelines.

Authorized Signatory

Authorized Signatory

Authorized Signatory

MINOR DECLARATION

Type of Guardian* Father Mother Court Appointed Testamentary Guardian

Full Name of Guardian* Prefix First Name Middle Name Last Name

I hereby declare that the date of birth of the minor who is my _____ is ____ / ____ and I am his/her natural and lawful guardian / guardian appointed by court order dated ____ / ____ (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I Indemnify the bank against the claim of the above minor for any withdrawal / transactions made by me in his / her account.

Signature of Guardian*

(i) AADHAAR

I/We hereby submit voluntarily at my/our own discretion, the physical copy of Aadhaar card/physical e-Aadhaar / masked Aadhaar / offline electronic Aadhaar xml as issued by UIDAI (Aadhaar), to Unity Small Finance Bank for the purpose of establishing my/our identity / address proof and voluntarily give my/our consent to open account / process instructions for the said purpose with Unity Small Finance Bank in my/our name/s individual capacity/ies using my/our Aadhaar or as an authorized signatory in non-individual accounts and; hereby consent to Unity Small Finance Bank for verification of my/our Aadhaar to establish its genuineness as per UIDAI or under any Act or law from time to time. The consent and purpose of collecting Aadhaar has been explained to me/us in local language. Unity Small Finance Bank has informed me/us that my/our Aadhaar submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law. Bank has informed me/us that this consent and my/our Aadhaar will be stored along with my /our account details within the bank. I/We hereby declare that all the information voluntarily furnished by me/us is true, correct and complete. I/We will not hold Unity Small Finance Bank or any of its officials responsible in case of any incorrect information provided by me/us.

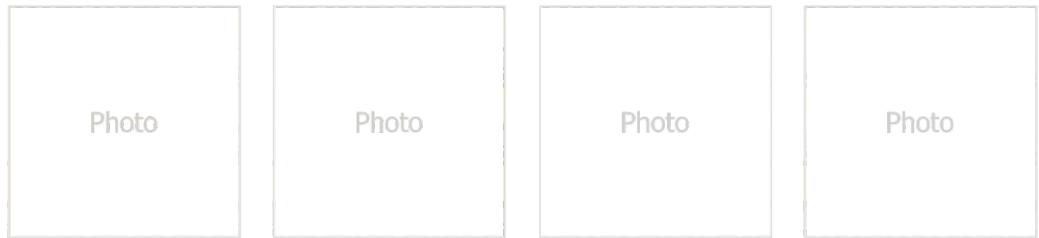
(ii) DECLARATION

I/We (In this context, "I", "We", "my", "me", "our" and "us" refers to all holders of the account) have read and/or understood the rules and regulations of the product(s) / service(s) opted for and agree to abide by the terms and conditions relating to the conduct thereof as also any changes brought about therein from time to time. A copy of the Saving Bank/Current Account rules and regulations have been made available to me/us. Further, I/We agree that rules and regulations of the product(s) / service(s) those relating to and those relating to various services offered by the Bank including but not limiting to Debit Card/ Internet Banking/SMS Banking/Mobile Banking (as and when made available by the bank) and other facilities. I/We agree to abide by the same as they are in force now and also by those as would be amended further from time to time through Circulars/Notice Boards/Websites etc. I/We agree that the transactions and request executed in above mentioned account through Internet, Mobile banking (as and when made available by the bank) and Kiosk Banking under my/our User ID and Password will be legally binding on me/us and I/We are responsible for maintenance of secrecy and confidentiality of the information passed on to me/us by the Bank through Mobile / Email. I/We hereby understand that in case I/We apply for Debit Card, I/We agree to the terms and conditions that are mentioned on the Bank's website. I/We mandate from other joint holder to view / enquire/operate the joint account mentioned above. I/We understand that I need to maintain Average Monthly Balance ("AMB") as prescribed for your savings / current account as prescribed by Bank from time to time. If applicable, the respective account package may be modified as per Bank's discretion and the Bank shall provide a notice, in advance, before carrying out the applicable changes in the schedule of charges as mentioned on the Bank's website. I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I/We also give my/our consent for receiving product, service and other Bank-related information from the Bank on the registered modes of correspondence. I/We hereby undertake to inform the Bank on any change in my/our communication address or constitution and I/We shall submit address proof in case of transfer of address proof towards the compliance of KYC norms under the PMLA 2002. I/We hereby agree that the Bank may verify the same with the UIDAI and authorize the UIDAI expressly to release the identity and address authentication by the Bank. (Applicable only where accounts are opened with Aadhaar). In case of physical disability/person with autism, cerebral palsy, mental retardation, mental illness and mental disabilities, a legal guardian can open and operate the bank accounts as long as she/he remains the legal guardian. A parent of the person with the disability or a relative or even a registered organization may make an application to the Local Level Committees ("LLC") for the appointment of a legal guardian.

(iii) UNDERTAKING AND TERMS & CONDITIONS

I/We (In this context, "I", "We", "my", "me", "our" and "us" refers to all holders of the account) have read and/or understood the terms and conditions and understand that any changes to the terms and conditions will be available on the Bank's website. **Account opening/service provision:** All services, including opening of the account are subject to verification of information/documents provided by me/us. In the event this account is not opened, if I/We have initially funded the account in cash for Rs. 20,000 or more, it will be refunded to me/us in the form of a DD/Fund Transfer or PO only. **Services:** All services will be provided by the Bank on a best effort basis. The complete list of services available to me/us are available on Bank's website. **Fees & Charges:** Fees and Charges that will be applicable on my/our account and for other services availed by me/us will be available on the Bank's website. Service Taxes and other statutory imposts as applicable from time to time will be levied on all fees. **Interest Payment:** The Bank shall pay interest on a monthly basis or as decided by the bank in the Savings Account. **Change In Fees & Charges, Services, and Interest Rate:** Any change/discontinuation of Fees & Charges, Services, or Interest Rate will be intimated to me/us at least 7 (seven) days in advance through letter/SMS/website/email or other means. **Recovery:** If no funds are available in the account to pay fees & charges, I/We authorize the Bank to set off any available credit, including amounts flowing into the account from collection proceeds or any future receivables. **Dormant Account:** No transactions induced by me/us in the account for a period of 2 (two) years or more is treated as a Dormant account. **Account Freeze:** I/We authorize the Bank to freeze my/our account in the following circumstances, with intimation to me/us except where specified otherwise (a) When a minor, who is the holder of the account, attains majority (b) If it is suspected by the Bank that transactions in my/our account are not initiated by me/us (the Bank will not assume any liability for the transactions already executed) (c) If it is suspected that my/our account is being misused as a money mule or as a channel for unauthorized money pooling or a conduit for any illegal activity. (I/We will not receive a notice in this case) **Account Closure:** I/We authorize the Bank to close my/our account, with prior intimation to me/us, in case of (a) Balance in the account remains zero for 3 months or more, (b) High occurrences of dishonoured payments from my/our account, (c) I/We fail to submit the full KYC for purpose of KYC updation, failing which there will be a freeze placed on the account and later on account shall be closed. **Transactions:** Any instructions to the Bank regarding the account, both of a financial/non-financial nature (eg: Issuance of Cheque book/card, financial transactions, updation of personal details etc.) will be provided by me/us through the authorized channels only, which will be specified by the Bank, based on regulatory guidelines prevailing at that time. **Channel Facilities:** All channel facilities provided by the Bank including Unity Small Finance Bank Kit: ATMs, Debit Cards, Internet Banking, Mobile Banking (as and when made available by the bank) etc. are subject to specific guidelines and terms and conditions that are provided on Bank's website. I/We acknowledge that the issue, usage of Bank's Internet Banking facility is governed by

terms and conditions in force from time to time as set forth on the Bank's website and agree to abide by the same. I/We am/are aware that Bank does not seek any information relating to login ID/Password in any form including through e-mails from its customers. I/We further agree and confirm that Bank shall not be liable for any losses arising from my/our sharing/disclosed of login ID, password, cards, card numbers or PIN (personal identification number) to anyone, nor shall make claims on the Bank for any unauthorized use. I/We shall take all precautions to protect my /our account details so as to avoid any unauthorized use. **Personal Information:** (a) Any updation of my/our details including personal information, change of address etc. will be provided by me/us to the Bank, along with documents of proof immediately. I/We agree to indemnify the Bank for any fraud, loss or damage, due to my/our providing wrong information or not updating the information that may occur to me/us and to the Bank and based on which the Bank may act as true and correct. (b) All information provided by me/us of any nature (including personal & sensitive information) will be used in the provision of services or facilities, facilitation of transactions, providing information and updates (including value-added services), research and analytics, credit scoring, verification, participating in telecommunication or electronic clearing network as may be required by law/customary practice by the Bank. Additional Information: All relevant policies including Code of Commitments to Customers and Grievance Redressal Policy are available at the branches and on the Bank's website. Deposit Insurance and Credit Guarantee Corporation (DICGC) insurance cover is applicable in all Bank's deposits, such as savings, current, fixed, recurring etc. up to a maximum amount of Rs. 5 (five) lakh including principal & interest both (for exceptions and details please refer <http://www.dicgc.org.in/>). I/We am aware that the products and services of the Bank shall be provided subject to the applicable rules and regulations. I/We have received a copy of an acknowledgment from the Bank for the Application and Nomination Form submitted. "I/We agree to be bound by the above Terms and Conditions (T&C), instruction, declaration / undertakings etc., including the General terms and conditions, Savings Account terms and conditions , Current Account terms and conditions as displayed on the Bank's website and also by the rules of the Bank / regulators and any subsequent amendments)". I/We hereby declare that the information furnished is true and correct to the best of my / our knowledge. Terms and conditions are subject to changes from time to time as per regulators / Bank guidelines. I/We also confirm that my/our preferred language of communication is English unless confirmed otherwise. I/We declare & confirm that I/We is/are not engaged in cryptocurrency and/or AML in any form and manner.



I/We agree with points (i) (ii) (iii)

Signature

Signature

Signature

Signature

FOR BANK USE ONLY

Customer has signed / affixed the thumb impression in my presence. KYC Documents submitted by customer/s are verified with original and found correct.

I confirm that I visited the communication address mentioned in the account opening form on ____ / ____ / ____ and I met the applicant.

Branch _____

Branch Code _____

Line of Business (LOB) _____

Account Opened by : LG Code _____

LC Code _____

Scheme Code _____

Scheme Name _____

BC / BF Code _____

BC / BF Name _____

Promo Code _____

COCO Code _____

Checked By _____

Signature _____

Authorised By _____

Signature _____

BM _____

Signature _____

GBS

Tear Off

UNITY Small Finance Bank Ltd. (Acknowledgement / Customer Copy)

We thank you for banking with us and acknowledgement receipt of your Savings/Current Account Application form.

Customer Name _____

Name of bank official _____

Signature of bank official

Date _____

Nomination Received: Yes No

(with seal of Bank)

Your account will open within 7 working days