UNITY Small Finance Bank

ACCOUNT OPENING FORM FOR NON-INDIVIDUALS

Sol ID Branch

Account No.

Date CKYCR No. Customer No. (if existing Customer)

Please open my/our Account, ☐ Current ☐ Savings ☐ Fixed Deposit ☐ Recurring Deposit

Product Name : _____

BUSINESS DETAILS *

Name of the Account

Line of Business ☐ Manufacturer ☐ Finance ☐ Retailer ☐ Trader ☐ Export/Import ☐ Service Provider

Customer Category ☐ H.U.F. ☐ Trust ☐ Association ☐ Government ☐ Pvt. Ltd. ☐ Public Ltd. ☐ Proprietor ☐ Partnership ☐ Limited liability Partnership ☐ Section 25/Section 8 ☐ Society ☐ Others _____

Sub Type of Entity

Government ☐ Local (Gram Panchayat/Municipality) ☐ State ☐ Central ☐ PSU ☐ Others _____

Public/Pvt. Ltd. Company ☐ HFC ☐ NBFC ☐ Others _____

Bank ☐ Scheduled Commercial Bank ☐ Regional Rural Bank ☐ Cooperative Bank ☐ Others _____

Trust ☐ Private ☐ Charitable ☐ Religious ☐ Educational ☐ Provident Fund ☐ Others _____

Others ☐ University ☐ Trade Union ☐ Political Party

Business Type ☐ Advertising / Marketing ☐ Government ☐ Entertainment / Media ☐ Apparel ☐ Construction / Real Estate ☐ Agriculture ☐ Call Center / BPO ☐ FMCG ☐ Chemicals / Petrochemicals ☐ Automobile ☐ Antique / Art Dealer ☐ Aviation ☐ Banking / Financial Services ☐ E Commerce ☐ Charity / NGO ☐ Education ☐ Money Changer / Forex Dealer ☐ Pharmaceuticals ☐ Gems & Jewellery ☐ Electronics ☐ Stock Broker / Commodity Broker ☐ Arms Dealer ☐ Hotel / Restaurant ☐ Textile ☐ Professional (CA, Doctor, Consultant) ☐ Transportation ☐ Courier / Cargo ☐ Telecom ☐ IT Services ☐ Travel & Tourism ☐ Medical / Healthcare ☐ Others _____

Source of Funds ☐ Business/Commission/Fees ☐ Investment ☐ Agriculture ☐ Donations

Date of Incorporation Place of Incorporation _____

Annual Turnover ☐ < 10 lacs ☐ 10 lacs -25 lacs ☐ 25 lacs -<50 lacs ☐ 50 lacs -<1Cr ☐ 1Cr -<5Cr ☐ >=5Cr

Annual Cash Transactions ☐ < 10 lacs ☐ 10 lacs -25 lacs ☐ 25 lacs -<50 lacs ☐ 50 lacs -<1Cr ☐ 1Cr -<5Cr ☐ >=5Cr

Annual Transactions ☐ < 50 ☐ 50 – <500 ☐ 500 – <1000 ☐ >1000

LEI Code GSTIN/Regn. No.

PAN No. (In the name of Company) FORM 60 (Pls. provide Form 49A if applied)

REGISTERED ADDRESS

Address 1

Address 2

City Pincode

State District Country

COMMUNICATION ADDRESS

Address 1

Address 2

City Pincode

State District Country

CONTACT DETAILS

Tel. 1 Tel. 2

Email Id* Mobile No.*

MODE OF OPERATION

☐ Singly ☐ Jointly ☐ As per Board Resolution ☐ Authority Letter ☐ Proprietor ☐ Other _____

AUTHORISED SIGNATORY / BENEFICIAL OWNER DETAILS (If Beneficial Owner/s identified, KYC Documents of BO to be submitted)

Account may be operated by following signatories as per mode of operation specified above

Signatory 1

Customer Id Mother's Name

Gender ☐ Male ☐ Female ☐ Transgender Date of Birth Nationality

Aadhaar No. Other OVD Identification No. _____ PAN No.

Address 1

Address 2

City District Pincode

State Country

Marital Status ☐ Married ☐ Single ☐ Others _____

Education ☐ Post Graduate ☐ Graduate ☐ Under Graduate ☐ Others _____

Email Id Mobile No.

CKYCR No.

Signatory 2

Customer Id Mother's Name

Gender ☐ Male ☐ Female ☐ Transgender Date of Birth Nationality

Aadhaar No. Other OVD Identification No. _____ PAN No.

Address 1

Address 2

City District Pincode

State Country

Marital Status ☐ Married ☐ Single ☐ Others _____

Education ☐ Post Graduate ☐ Graduate ☐ Under Graduate ☐ Others _____

Email Id Mobile No.

CKYCR No.

Signatory 3

Customer Id Mother's Name

Gender ☐ Male ☐ Female ☐ Transgender Date of Birth Nationality

Aadhaar No. Other OVD Identification No. _____ PAN No.

Address 1

Address 2

City District Pincode

State Country

Marital Status ☐ Married ☐ Single ☐ Others _____

Education ☐ Post Graduate ☐ Graduate ☐ Under Graduate ☐ Others _____

Email Id Mobile No.

CKYCR No.

Signatory 4

Customer Id Mother's Name

Gender ☐ Male ☐ Female ☐ Transgender Date of Birth Nationality

Aadhaar No. Other OVD Identification No. _____ PAN No.

Address 1

Address 2

City District Pincode

State _____ Country _____

Marital Status ☐ Married ☐ Single ☐ Others _____

Education ☐ Post Graduate ☐ Graduate ☐ Under Graduate ☐ Others _____

Email Id _____ Mobile No. _____

CKYCR No. _____

Affix latest photograph with signature across photo	Affix latest photograph with signature across photo	Affix latest photograph with signature across photo	Affix latest photograph with signature across photo
Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression
Signatory 1 _____	Signatory 2 _____	Signatory 3 _____	Signatory 4 _____

Attested by Bank Official _____

FIXED DEPOSIT

Deposit Amount _____ Period _____ Months _____ Days Rate of Interest ___ . ___ %

Type of Deposit ☐ Re-investment ☐ QIC ☐ MIC ☐ Recurring ☐ Other

Interest Payment : Credit my/our account _____ with you.

Remit electronically to my bank account with _____ Bank, account no. _____ IFSC _____ by PO/DD to mailing address.

Maturity Instruction: ☐ Auto renew Principal & Interest ☐ Auto renew Principal & Redeem interest ☐ Redeem Principal & Interest

Pay proceeds/interest to my/our account _____ with you.

Credit to my/our account no. _____ IFSC _____ held with _____ Bank.

TDS : ☐ YES ☐ NO (If NO, furnish 15H/15G or attach IT Exemption Letter)

RECURRING DEPOSIT

Monthly Instalment (in Rs) : _____ Period : ____ Months (in multiples of three months). Date of instalment every month : _____

INITIAL PAYMENT DETAILS

Initial Deposit Amount _____

Payment Mode ☐ Cheque ☐ Internal Transfer ☐ Cash

Cheque dated _____ Cheque number _____ Drawn on Bank _____

Debit my/our existing account _____ with you.

DECLARATION FOR SOLE PROPRIETORSHIP FIRMS

I, the undersigned hereby inform you that I am the sole proprietor of the firm M/s _____ and I am solely responsible for the liabilities thereof. I undertake to inform you in writing of any change that may take place in the constitution of the firm and will be liable to you on any obligations which may be standing in the firm's name in your books till I receive from the Bank an acknowledgment of the change in constitution and until all my obligation with the Bank are discharged.

Personal Signature _____ Yours faithfully

Full Name _____

Documents submitted for Photo identification _____

Documents submitted for address Proof _____ (Signature on behalf of the firm)

NOMINATION DETAILS * (only for Proprietorship Firms)

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

Nomination Under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank deposits.

I/We _____ nominate the following person to whom in the event of my/our/minor's death, the amount of deposits, particulars whereof, may be returned by UNITY SMALL FINANCE BANK LIMITED _____

_____

(Name & Address of the branch / office in which the deposit held)

DETAILS OF DEPOSIT

Type of Deposit ☐ Current ☐ Savings ☐ Fixed Deposit ☐ Recurring Deposit

DETAILS OF NOMINEE

Name Prefix First Name Middle Name Surname Name

Relation with the Depositor Age Date of Birth

Email Id Mobile No.

Address

City/Village Pincode State

As the nominee is a minor on this date, I/we appoint Shri/Smt. _____

Age _____ years, residing at (address) _____

to receive the amount of deposit on behalf of nominee in the event of my/our/minor's death during the minority of the nominee.

☐ I want the nominee name printed on the passbook. (Not applicable to Current Account)

Date Place

**[Signature(s)/Thumb Impression(s) Applicant(s)/Natural Guardian]

Name & Address _____	Name & Address _____
Signature of the 1st witness	Signature of the 2nd witness

** Attestation by two witnesses is required only for Thumb Impressions

DECLARATION FOR PARTNERSHIP FIRMS

As the firm of _____ and carrying on business as _____ at _____ and elsewhere (hereinafter referred to as the firm), have dealings with the Bank, we hereby inform you that we, undersigned are partners of the said firm. We are jointly and severally responsible to the Bank for Liabilities of the firm with the Bank. The Bank recover its claim from the estate of any or all Partners of the firm.

WHENEVER ANY CHANGE OCCURS IN THE CONSTITUTION of our partnership firm, we (Partners) under-take to inform the Bank immediately in writing and our individual responsibility to the Bank will continue until we receive from the Bank an acknowledgement of the letter and until all our liabilities with Bank are discharged.

Full names of all the Partners	Individual Signatures	Signatures on behalf of the firm

Documents submitted for Photo identification

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.

GBS

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 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

DECLARATION

I/ We, the undersigned, being customer of Unity Small Finance Bank Limited ('the Bank/ USFB') hereby confirm that I/We have read, understood and agree to abide and be bound by all the provisions of the Terms and Conditions ('T & C') as displayed on www.theunitybank.com ('Website') which govern, all of my/our accounts, present , past and future, maintained/opened/ to be maintained/to be opened with the Bank from time to time, and also provisions of the various services/facilities provided at present/that may be provided in future.

I/We understand that the Bank may, at its sole discretion subject to applicable regulatory /statutory / internal guidelines, at any time, and from time to time, add to, alter or modify any of the terms and conditions and that I/We hereby agree to abide and be bound by all such changes, as if they form part of the T & C as at present and that any transaction in my/ our account(s) with the Bank and / or usage of any services by me/us subsequent to such change shall be deemed and tantamount to my/our acceptance of all such changes. I/We 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 has been made available to me/us. Further I/We agree hereby agree to the rules and regulations of the product(s) / service(s) offered by the Bank including but not limiting to Debit Card/Internet Banking/SMS Banking/Mobile Banking and other facilities. I/We agree to abide by the same as they are in force now and also to those as would be amended further from time to time through Circulars/Notice Boards/Web site etc. I/ We confirm that the authorized signatories as approved by me/ our Board/ partners/ members of the HUF/ Managing Committee, are authorised to operate the account, and any changes in regards to the same will be intimated in writing by me/us. I/ We understand that the above account will be opened on the basis of the declaration made by me/ us. II/We agree that the transactions and request executed in above mentioned Account through Internet, Mobile 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 Internet / Mobile / Email / Telephone. I/We mandate from other joint holder to view / enquire/operate the joint account mentioned above. Further, I/We agree that Bank has got all the rights to debit my/our account for any service charge or discontinue my/our account without any notice to me/us. I/We understand that it is mandatory 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 here by 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 will update the Bank in case of any change in my/related party/Beneficial Owner details provided at the time of opening the account which includes address change, change in industry, change of employment, etc. I/We hereby declare that the transactions relating to foreign exchange routed through your Bank do not involve and are not designed for the purpose of any contravention or evasion of the provisions of the aforesaid Act or of any rule, regulation, direction, or order made hereunder. I/We also hereby agree and undertake to give such information/documents as well reasonably satisfy you about the transactions in terms of the above declaration. I/ We here by agree that the Bank may verify the same with the UIDAI and authorize the UIDAI expressly to release the identity and address through biometric authentication to the Bank. (Applicable only where accounts are opened with Aadhaar). LEI is a mandatory requirement for all non-individual remitter / beneficiary for NEFT and RTGS transaction of Rs 50 crores and above.

I/We (In this context, "I", "my" and "me" refers to all holders of the account) have read and understood the T&C and understand that any changes to the T&C will be available on the Website.

The Account opening/service provision: All services, including opening of the account are subject to verification of information/documents provided by me.

Tear Off

UNDERTAKING / TERMS & CONDITIONS

I/We (In this context, "I", "my" and "me" refers to all holders of the account) have read and/or understood the T&C available on the Website and understand that any changes to the T&C will be available on the Website. 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 in the form of a DD/Cheque or PO only. Services: All services will be provided by USFB on a best effort basis. The complete list of services available to me/us are available on the Website.

Fees & Charges: Fees and Charges will be as applicable on my account and for other services availed by me shall be as displayed on the Website. Service Taxes and other statutory imposts as applicable from time to time will be levied on all fees. Interest Payment: The Bank pays monthly interest on Day-end balance basis in 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 at least 30 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 authorize USFB 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 in the account for a period of 2 years or more is treated as a Dormant account. Account Freeze: I authorize the Bank to freeze my account in the following circumstances, with intimation to me 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 account are not initiated by me (the Bank will not assume any liability for the transactions already executed) (c) If it is suspected that my account is being misused as a money mule or as a channel for unauthorized money pooling or a conduit for any illegal activity. (I will not receive a notice in this case) Account Closure: I authorize the Bank to close my account, with prior intimation to me, in case of (a) balance in the account remains zero for 3 months or more (b) high occurrences of dishonoured payments from my account. (c) I fail to submit the full KYC for purpose of KYC updation, failing which there will be a freeze placed on the account and latter on account shall be closed. Transactions. Any instructions to the Bank regarding the account, both of a financial/non-financial nature (e.g.: Issuance of Cheque book/card, financial transactions, updation of personal details etc.) will be provided by me 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 USFB including USFB Kit: ATMs, Debit Cards, Internet Banking, Mobile Banking etc. are subject to specific guidelines that are provided on website and as per the T&Cs handed over to me. "I/We acknowledge that the issue, usage of USFB Internet Banking facility is governed by terms & conditions in force from time to time as set forth on the website and agree to abide by the same. I/We am/are aware that the 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 the Bank shall not be liable for any losses arising from my/our sharing/disclosing 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 details including personal information, change of address etc. will be provided by me to the Bank, along with documents of proof within 2 weeks. I agree to indemnify the Bank for any fraud, loss or damage, due to my providing wrong information or not updating the information that may occur to me and to the Bank and based on which the Bank may act as true and correct. (b) All information provided by me 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/on the website. Deposit Insurance and Credit Guarantee Corporation (DICGC) insurance cover is applicable in all Bank's deposits, such as savings, current, fixed, recurring etc. upto a maximum amount of Rs. 5 lakh including principal & interest both (for exceptions and details please refer http://www.dicgc.org.in/). I am aware that the products and services of the Bank shall be provided subject to the applicable rules and regulations. I have received a copy of the Rules & Regulations and 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 T&C, Savings Account T&C, Current Account T&C, Term Deposit T & C, Recurring Deposit T & C as displayed on the Bank's Website and also by the rules of the Bank/ RBI and any subsequent amendment(s)". I/We here by declare that the information furnished is true and correct to the best of my / our knowledge. I/ We further agree to indemnify USFB and their successors or assignees if any of the representation and declarations made hereunder by me / us is incorrect, false or misleading in any of its particulars. Terms and conditions are subject to changes from time to time as per RBI / Bank guidelines. I/We also confirm that my/our preferred language of communication is English unless confirmed otherwise.

Dated _____ this _____ day of _____ 20

Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression	Signature with Seal/Thumb Impression

Other Special Instructions _____

1. All accounts are insured by DICGC upto Rs. 5 lakhs

FOR OFFICE USE / ATTESTATION

Whether self certification & documents received as part of account opening process have been verified and found correct, YES/NO. (Branch to proceed with account opening only when certification is (YES). Certified that the implications and conditions for the operations for the operations of the account have been explained to the depositor (only in case of illiterate / visually handicapped applicant)

In person verification carried out and signature of the applicant verified by:

Employee Name _____ Designation _____

Date _____ Employee Code _____

Signature

Lead Generator Code _____ Promo Code _____

Lead Converted by : Name _____ Emp. Code _____ Signature _____

RM Emp. Name & ID _____ Signature of Manager Operations or Branch Manager _____

(Affix Branch round stamp)

GBS

Tear Off

UNITY SMALL FINANCE BANK LIMITED (Acknowledgement / Customer Copy)

We thank you for banking with us and acknowledge receipt of your Current/Savings/Fixed Deposit/Recurring Deposit Account Application Form

Customer Name _____ Name of Bank official _____

Date _____ Nomination Received: ☐ Yes ☐ No Signature of Bank official (with seal of Bank) _____