

Application Number : DSA/DSE No.:



ICICI BANK TAG APPLICATION FORM

PLEASE FILL IN THE DETAILS IN BLOCK LETTERS: (Fields marked with * are mandatory)

Passport Size Photograph For Individual Customers

*Type of Account:	Corporate Inc	lividual		Date: D D M M Y Y Y
		CUSTOMER E	DETAILS	
lease fill as per the	account type)			
Corporate Name:				
pe of Company:	Private Ltd Partnership	Public Ltd Proprietorship	*Date of Incorpo	oration: D D M M Y Y Y Y
Customer Name: case of corporate account,	, enter details of the contact person)	t Name	Middle Name	Last Name
ender (Individual):	Male Female		*Date of Birth:	D D M M Y Y Y Y
other's Name:				
Please provide the fo	ollowing details if you hold an ac	count in ICICI bank)	ICICI Bank Cust	omer ID:
		CONTACT D	ETAILS	
lease provide the a	ddress on which you wish to rec	eive communications)		
Address:				
City:			*State:	
ountry	I N D I A	E	*Mobile:	
mail ID:				
ome Ph. No.:	STD Code		Office Ph. No.: (No.)	
ame: proof: AN Card/Aadhar Card/Pass	port)		ID proof No.:	
		KNOW YOUR CUSTO Please submit the following docume	nts as per the customer type	
	Public Ltd/Private Ltd/Par	Corporat		rietorship
Certificate o	of Incorporation/Partnership Deed/	100000000000000000000000000000000000000	PAN Card of Proprietor	Address Proof of the Proprietor
PAN Card of	f the corporate	Photo ID of signing authority	Shop Act or other Firm Proo	f
Address Pro	oof of the Organisation	List of Directors with addresses /Name and addresses of Partners		
		Individu	al	
Please submit ID	proof and Address proof docum	ents from the following list of valid d	ocuments	
Driving Lice	ense	PAN Card	Passport	Voter ID Card
Aadhaar Ca	rd ss mentioned)	(Can be used as ld proof only)		
	y Document Number:		*Address proof Document No.:	
		PAYMENT DE	TAILS	
nyment Mode:	Cheque Cash	Amount:	₹	
heque Details: heque No.: ank Account No.:		Cheque Date:	D D M M Y Y Y	
SC Code:		Transaction ID:		

				V	EHICLE [DETAILS				
Sr. No	*License Plate Number	*Vehicle Type / Vehicle Class	Year	Make, Model & Color	Mobile N	lo. Registered State	Tag Deposit Amount	Amount to be uploaded	*RC Copy Enclose	
1									Yes No	
2									Yes No	
3									Yes No	
4									Yes No	
5									Yes No	
otal	no. of tags app	lied for:				Total (₹):				
	nnexure if more than xure Used:	Yes	No	Annexure Number:	\perp	(If Annexur	e is used for listing ve	hicles)		
					DECLAR	ATION				
	re, confirm, and a	1966			DEGLAM	5.To inform ICICI Bank & its Gro				
hange ag we bout www.in .All the rovide ny into ompa .I und rovidi etain to .I auti	terforth in the product leaflet and the website www.icicibank.com. I understand that access to any nges/updates in the Terms and Conditions and Schedule of Charges applicable to the ICICI Bank would be available on www.icicibank.com only and I hereby agree that I shall keep myself updated ut any changes to these Terms and Conditions and Schedule of Charges as updated on w.icicibank.com from time to time. If the particulars and information given in this application form (and all documents referred or vided therewith) are true, correct, complete and up-to-date in all respects and I have not withheld information. I agree and undertake to provide any further information that ICICI Bank/its Group npanies may require from time to time. Understand that ICICI Bank Limited ("ICICI Bank") reserves the right to reject my application without viding any reason. I agree and understand that ICICI Bank/its Group Companies reserve the right to in the application forms, and the documents provided herewith and will not return the same to me. Buthorize ICICI Bank/its Group Companies or there agents to make references and enquires which I Bank/its Group Companies consider necessary in respect of or in relation to information in this lication.					6.1 authorize ICICI Bank/its Group Companies to exchange, share or part with all the information, or documents relating to my application with other ICICI Group Companies/ Banks/ Financial Instruc /Credit bureaus/Agencies/Statutory Bodies or any other persons as ICICI Bank/its Group Companies may deem necessary or appropriate or as may be required for use or processing of the information/data by such person or ICICI Bank/its group companies and shall not hold ICICI Bank Group Companies liable for the use/sharing of this information by either ICICI Bank or such t parties. 7.1 authorize ICICI Bank unconditionally and irrevocably to debit the relevant fees and chargapplicable to the ICICI Bank Tag (as mentioned in the "Terms and Conditions", "Schedule of Chargand "Product Leaflet") from the funds available in my ICICI Bank Tag Account. Please ensure that prior to submitting the application form you have received the ICICI Bank Tag Product Leaflet and have read and understood the: -Schedule of Rates and Charges -Terms and Conditions				
						Date:	DD MM	YYYY		
	Signati	ure of the authoriz	ed signatory	/ Individual Customer		Place:				
				FOR	OFFICIAL	USE ONLY:				
ICICI	Bank Tag Cust	omer ID:				Application Reference	Number:			
Total	Amount Receiv	/ed:	₹			Transaction Date:		DD MM	YYYY	
күс	Document Verif	ied with original	s: Ye	s No						
All d	ocuments scruti	nized and found	in order by	official at Agent location						
	ocumentation c submitted on:	ompleted	DD	MM YYYY		Sign	ature of the POS	Agent official.		