SHIVALIK SMALL FINANCE BANK

CIF – SUP

CUSTOMER IDENTIFICATION FORM FOR RESIDENT INDIVIDUALS

(for Existing Customers only). Separate form to be filled up by each Person / Joint Holder)

Branch Name:

Affix Applicant's Photograph Sign. Part on Photo

Sign.

Date : ☐☐ ☐☐ ☐☐☐☐ Cust Id : ☐☐☐☐☐☐☐☐

The Branch Manager,
Branch : _____

Account No. : ☐☐☐☐☐☐☐☐☐☐☐☐
(Any one)

Sir/Madam,
I hereby submit my details for the purpose of opening of account(s) with you :

CUSTOMER DETAILS:

Type of Customer ☐ Staff ☐ Public ☐ Sr. Citizen ☐ Minor

PREFIX (Please fill the form in BLOCK LETTERS and leave one space between words)

NAME : ☐☐☐☐

FATHER/HUSBAND/GUARDIAN NAME :

MOTHER'S MAIDEN NAME :

PRESENT ADDRESS :

Use for communication ☐

STATE : PIN :

MOBILE : TEL :

E-mail ID :

PERMANENT ADDRESS :

Same as above ☐

Use for communication ☐

STATE : PIN :

(Please tick the appropriate box)

PAN NUMBER ☐☐☐☐☐☐☐☐☐☐ or FORM 60 ☐

GENDER M F T

MINOR** Y N

NATIONALITY INDIAN Other

RELIGION

DATE OF BIRTH# ☐☐ ☐☐ ☐☐☐☐

MARRIED Y N

DATE OF MARRIAGE ☐☐ ☐☐ ☐☐☐☐

_____ CATEGORY _____

☐ Gen ☐ SC ☐ ST ☐ OBC ☐ OTHERS

Senior Citizen, Minor will provide proof of Date of Birth

EDUCATIONAL QUALIFICATION

(Please tick the appropriate box) Please Specify

☐ Upto Primary ☐ Graduate ☐ Professional

☐ Upto Sec./Higher Sec. ☐ Post-graduate ☐ Other

OCCUPATION & INCOME DETAIL

(Please tick the appropriate box) Please Specify

☐ Agri/Allied activity ☐ Salaried ☐ Pensioner ☐ Self-employed

☐ Business/Trade ☐ Student ☐ Housewife ☐ Other Source

Employer/Business Address

ANNUAL INCOME Rs.

> **Annual Turnover (in case of Non-Salaried persons - Rs. in Lacs)** Domestic Foreign

> **Any Financial Interest in Foreign Countries/business relations abroad** ☐ No ☐ Yes. Please give details :

a. Nature/Type of business/financial relations and countries (Brief details)

b. Do you expect remittances/funds from abroad in this account ☐ No ☐ Yes. Please give details :

V_03_2025_1

IDENTIFICATION DETAILS (Attach self attested copies of one primary and one secondary document). *Please produce original for verification.*

PRIMARY DOCUMENTS

☐ Passport ☐ Driving License ☐ Voter ID Card ☐ Armed Forces ID Card ☐ NREGA Job Card

☐ PAN Card ☐ AADHAR Card ☐ ID Card of any Accredited Institution #

* Valid only if the account is being opened in the name of Primary Card Holder whose photo is in the Ration Card.

\# ID Card with Photo of an Accredited Institution including a letter from a recognized Public Authority or Public Servant verifying the identity & residence of the customer which can establish identity/residence proof, to the satisfaction of the Bank.

SECONDARY DOCUMENTS

☐ Utility Bills@ ☐ Certified Birth Certificate ☐ Form 16, TDS Certificate

☐ Ration Card ☐ Regd. Lease Deed ☐ Professional Licence with photograph

☐ Trade Licence ☐ Credit Card Statement (within last 30 days) ☐ Other Doc.#

☐ Certified Marriage Certificate ☐ Bank Statement (with in last 30 days)

@ Utility Bills viz, Electricity Bill, Telephone Bill (landline only). LPG connection receipt, Water Bill with name and address of the customer and pertaining to last three calender months. In case the utility bill or any other document accepted by the Bank as address proof is in the name of some close relative, i.e., wife, son, daughter, parents, etc. who live with their husband, father/mother and son/daughter as the case may be, is also acceptable as the address proof if it is accompanied by a declaration from the person with whom he/she is living that the person desirous of opening his/her account with the bank, is living with him/her.

\# Other Documentary evidence in support of residential address, correctness of which can be ascertained include a letter from any recognized Public authority or employer, to the satisfaction of Bank.

☐ **Aadhaar Consent: (Only in case customer has submitted physical copy of Aadhaar card/physical e-Aadhaar / masked Aadhaar)**
I hereby submit voluntarily at my own discretion, the physical copy of Aadhaar card/physical e-Aadhaar / masked Aadhaar as issued by UIDAI (Aadhaar), to Shivalik Small Finance Bank ("the Bank") for the purpose of establishing my identity / address proof.

I voluntarily give my consent using my Aadhaar to open account / customer id with the Bank in my name under individual capacity or as an authorized signatory in non-individual accounts and I hereby consent for verification by the Bank of my Aadhaar to establish its genuineness through Quick Response (QR) code embedded in the Aadhaar card or through such other acceptable manner as per UIDAI or under any Act or law from time to time.

The Bank has informed me that my Aadhaar submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.

The Bank has informed me that this consent and my Aadhaar will be stored along with my customer id and/or account details within the Bank.

I hereby confirm that the consent and purpose of collecting Aadhaar has been explained to me in local language.

Central KYC Registry (CKYCR)

a I/we give my/our consent to download my/our KYC Records from the Central KYC Registry (CKYCR), only for the purpose of verification of my identity and address from the database of CKYC Registry.

b I/we understand that my KYC Record includes my/our KYC Records / Personal information such as my/our name, address, date of birth / date of incorporation, PAN number etc.

c I/We agree that my / our personal KYC details may be shared with Central KYC Registry or any other competent authority.

I hereby declare that the information furnished above is true and correct to the best of my knowledge and nothing has been concealed therein.

Yours faithfully

(Signature/Thumb Impression of the Applicant) (Male-LTI and Female - RTI)

Witness (In case of Thumb Impression)

Signature of the Witness

Address :

FOR OFFICE USE ONLY

CUSTOMER DUE DILIGENCE :

Ultimate Beneficial Owners _____

Relationship : ☐ POA ☐ Partner ☐ Prop. ☐ Director ☐ Karta

☐ Co-parcener ☐ Secretary ☐ Treasurer ☐ President ☐ Other

All KYC documents checked and found complete ☐ **Yes** ☐ **No**

Threshold Limit Rs. Verified/Accepted

Classification of Account as ☐ High Risk (C-3) ☐ Medium Risk (C-2) ☐ Low risk (C-1)

Open the Account(s) ☐ **Reject** (Give Reasons) ☐

Signature of the Authorized Official

Emp. Code

Signature of the Branch Head

Emp. Code

V_03_2025_1