CORPORATE INTERNET BANKING (CIB) FORM
*Mandatory Details to be filled.

SHIVALIK
Shivalik Small Finance Bank

Entity Particulars

Entity Name*		(Please mention name as per Bank Records)

Customer ID*		CIB Corporate ID (for existing CIB customer)		CIB Setup*	☐ New ☐ Existing

Account(s) to be linked / delinked / modified	Account No. 1		☐ Link ☐ Delink ☐ Modify
	Account No. 2		☐ Link ☐ Delink ☐ Modify
	Account No. 3		☐ Link ☐ Delink ☐ Modify

Authorization matrix to be supported along with: Companies – Board Resolution signed by Directors or Company Secretary / Partnership Firm – Letter signed by all partners / Limited Liability Partnership – Letter signed by Designated Partners / Trust – Resolution signed by Trustees / Society or Association – Resolution signed by Managing Committee / Sole Proprietorship – Proprietor signature on form / Hindu Undivided Family – Karta signature on form.

Daily Transaction Limits (For All Payments) - If not specified, then default will be ₹ 50 lakh/day*   (Limit should be in Lakh)

In Figures:-	In Words:-

User Information (1)

☐ New User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID (if available)	
	Preferred User ID (Max 10 Characters)			
	Select User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Existing User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID	
	Existing User ID		☐ Modify Rights ☐ Delete User	
	If Modify select new User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Access to All Account	Specific Account	

User Information (2)

☐ New User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID (if available)	
	Preferred User ID (Max 10 Characters)			
	Select User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Existing User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID	
	Existing User ID		☐ Modify Rights ☐ Delete User	
	If Modify select new User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Access to All Account	Specific Account	

User Information (3)

☐ New User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID (if available)	
	Preferred User ID (Max 10 Characters)			
	Select User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Existing User OTP :– ☐ SMS Only ☐ Both - Email & SMS	User Name*		Customer ID	
	Existing User ID		☐ Modify Rights ☐ Delete User	
	If Modify select new User Role	☐ Viewer ☐ Maker ☐ Authorizer ☐ Self-Authorization ☐ Payroll		

☐ Access to All Account	Specific Account	

Notes:-
1. Viewer access includes – Viewing Account Details (including transactions and services) and Statement request.
2. Maker access includes - Initiate Payment Transactions (as opted) and Service Requests.
3. Authorizer access includes - Authorization rights for Payment Transactions (as opted) and Service Requests initiated by Maker.
4. Self-Authorization access includes - Payments/Requests can be initiated and authorized by the same user.
5. One can opt for Dual Role of Maker & Authorizer – If a Dual Role rights person is initiating as Maker, another Authorizer needs to approve the transaction/request.
5. Payment Transactions includes: a). Transfer Within Shivalik - Own Account, Third Party Transfer; b). Outside Shivalik - NEFT, RTGS, IMPS; c). Scheduled Payments; d. Bill Pay.
6. Service Requests includes: Stop Cheque, Cheque Book, Positive Pay, Deposit Booking/Closure and any other facility that the Bank may add from time to time.
7. The maximum limit for CIB during non-business hours and holidays (2nd & 4th Saturdays, Sundays and National Holidays will be - ₹ 25,00,000/- subject to the transaction mandate provided, whichever is lower
8. Default Fixed Deposit limit is ₹ 2,99,99,999/- which is not included in the Daily Transaction Limits.
• National Holidays - 26th Jan, 15th Aug and 2nd Oct   • Business Hours - 08:00 AM to 07:00PM   • Non-Business Hours - 07:01 PM to 07:59 AM

Authorised Signatory's Signature & Stamp	

ACKNOWLEDGMENT SLIP

SHIVALIK
Shivalik Small Finance Bank

Branch Name _____   Date [D][D] [M][M] [Y][Y][Y][Y]

Received the request for Corporate Internet Banking Setup ☐   Modification request ☐

Name of Customer _____

Received by _____ (Staff Name)   Signature _____   Bank Stamp _____

Declaration

I/We declare, confirm and agree that:

a. I/We have read, understood and hereby agree to be bound by the terms and conditions applicable to the Banking services selected by me/us for the operations of my/our account, as set forth on the website https://shivalikbank.com/regulatory-section/terms-and-conditions/internet-banking.

b. I/We acknowledge and accept the charges applicable to the selected banking services and hereby authorize Shivalik Small Finance Bank Limited ("Bank") to debit my/our account(s) for any such charges. for the selected banking services.

c. I/We declare that all particulars and information provided in this application form, along with any supporting documents, are true, accurate, and complete. I/We confirm that no relevant information has been withheld and undertake to provide any additional details as required by the Bank. Further, I/We affirm that the details mentioned in the form are correct and that the email ID and mobile number provided are official.

d. I/We hereby agree to promptly notify the Bank of any changes to the aforementioned details, including but not limited to the addition or removal of a user and any modifications to the information provided in the application form.

e. I/We acknowledge and confirm that the Corporate Internet Banking facility has been provided by the Bank solely at my/our request. I/We further understand and accept that the Bank shall not be liable for any loss, damage, or unauthorized transactions arising from hacking, phishing attacks, cyber-related crimes, or any other unauthorized access to my/our account during the tenure of the facility, resulting in the transfer of funds to any third party. While the Bank has implemented all reasonable security measures, I/We acknowledge that the risk of such attacks by third parties cannot be entirely eliminated. Accordingly, I/We agree to indemnify and hold the Bank harmless from any claims, losses, or liabilities arising out of such incidents. In addition, I/We expressly agree and confirm that if any One-Time Password (OTP), whether delivered via SMS or email, is shared, disclosed, or compromised by me/us or any of our authorized users, intentionally or inadvertently, the Bank shall not be held liable for any resulting unauthorized transactions, losses, or damages. I/We accept full responsibility for maintaining the confidentiality of all login credentials and OTPs and agree that any breach of this obligation shall be solely at my/our risk and cost.

f. I/we confirm that no insolvency proceedings have been initiated against me/us nor have I/we ever been declared insolvent by any competent authority.

g. I/We hereby agree, undertake and authorize the Bank to exchange, share or disclose any information, data or documents relating to my/our application to other Banks, Financial Institutions, Credit Bureaus, Agencies, Statutory Bodies, or any other persons as the Bank may deem necessary or appropriate. Such disclosure may be made for the purpose of processing, verification, or furnishing of processed information, data, or related products to banks, financial institutions, credit providers, or other registered users. I/We further agree that the Bank shall not be held liable for the use, processing, or disclosure of such information by the recipients.

h. I/We confirm that I/We are duly authorized, as per the applicable Board Resolution/Power of Attorney (POA)/ HUF authority Letter/Partnership Deed/ TASC Letter, to sign this form and authorize users to operate the accounts specified in the application form. In the event of any change in the Authorized Signatory of the constituent, I/We undertake to promptly update the Bank with the modified user access and relevant information. I/We further acknowledge that the Bank shall not be liable for any loss or damage arising from unauthorized or fraudulent transactions conducted by the authorized signatories of the constituent.

i. I/We acknowledge and accept the risks associated with a high transaction limit and agree not to hold Bank liable for any fraudulent transactions conducted through the corporate internet banking facility, including those arising from the compromise of login credentials by any employees, directors, authorized users, or officials associated with us.

j. I/We shall be solely responsible for any compromise, misuse or unauthorised use of the Corporate Internet Banking facility and shall not hold the Bank liable for any losses or transactions carried out using the internet banking facility on the Bank's website.

k. I/We shall bear full liability and responsibility for any losses, claims, demands, costs, charges, or penalties arising from the use of the Corporate Internet Banking facility, including but not limited to any transactions conducted through a mobile connection, SIM card, or mobile device used to access the facility. I/We further acknowledge, agree, and confirm that the Bank shall have no liability or responsibility whatsoever in this regard.

Authorised Signatory's Signature & Stamp	Authorised Signatory's Signature & Stamp
Name	Name
Title	Title
Date	Date

For Bank use only, SOL ID - [ ][ ][ ][ ] **Branch Name** _____ **Date** D D M M Y Y Y Y

☐ I hereby confirm that customer has signed in my presence   ☐ Signature Verified (For existing CIFs)

Certifying Staff Name		
Designation		Signature of Certifying Staff
Employee ID		
BOM/BH Name		Signature of BOM/BH
BOM/BH ID		
Designation		