6.	tkarsh Small Finance Aapki Ummeed Ka Khaa		Service Requ Corporate Inte		Bar Code
Branch Sol ID	Branch Na	ame		Date D D M M	YYYY CRM No.
A. Entity Det	tails				
Entity Name:					
CIF ID:				Group ID	Login ID
Account No.:					
Type of Entity:	Sole Proprietorship			Trust/Club	Society
	Private Ltd. Company		Public Ltd. Company	Others (Please Specify)	
B. (i) I wish to	o update below contact in	formation	ı in	(Flease Specify)	
User	level Co	orporate/Firm	m Level		
1) Mobile No. a	& Alert Registration:				
2) Email ID:					
 Communica 					
Address:					
	City*		Village/Po*		District*
	Country*		State*		Pin Code*
(ii) Bankin					
4) Reset Login		5	5) Reset Authorization Pass	word: 6) Rese	end Login credentials:
	s: Request Type-	I L	Delete	Activation Deactivation	Locking Unlocking
	datory for existing customers)				
	Mobile No.*: +				
KYC - Pan				Aadhaar number: <u>X X X</u>	XXXXX
	or new customer)			(Please provide last 4 digits of	
	Rights (Corporate Level):		View Only View	v & Transaction of Funds	
,	insaction Limit (Corporate Level):			
10) Channel-wise Limit (Corporate Level): S. No. Transaction Type M		Maximum Limit Per Da	y (in ₹) in Figure	Maximum Limit Per Day in Words	
1	Own Account				
2	Within bank transfer				
3	NEFT				
4	RTGS				
5	IMPS				
11) Per Transact	ion Limit (User Level):				
	USER ID		iator/Approver Limit Per ransaction in Figures**	Initiating /Approving Limit Pe Transaction in Words	er No. of Authorization required*

* In case corporate opted for multi-level authorization **User who is an approver as role defined in the form will only be valid for approving Financial and Non-Financial Transactions

12) Channel-wise Limit (User Level):

S. No.	Transaction Type	Maximum Limit Per Day (in ₹) in Figure	Maximum Limit Per Day in Words
1	Own Account		
2	Within bank transfer		
3	NEFT		
4	RTGS		
5	IMPS		

(iii) Service Request			
13)	Link	Delink		
	(a) FD Account No.		(b) FD Account No.	
	Contract No.		Contract No.	
	(c) FD Account No.		(d) FD Account No.	
	Contract No.		Contract No.	
	(c) FD Account No.			
	Contract No.			
14)	Add	Delete		
	(a) New Deposit Request	(b) Deposit Statement	(c) Cheque Book Request	(d) Stop Cheque Request
	(e) Cheque Status Enquiry	(f) Bulk Upload	(g) Positive Pay	(h) Others
15) C	thers:			

(C) Declaration

I/We declare that all the particular and information given/filled in this form are true, correct and up to date in all respects and I/we have not withheld any information. I/We are aware of the fact that the Corporate Internet Banking facility is granted solely at our request and that the bank shall in no way be responsible for any kind of hacking and/ or phishing attacks and/ or cyber related crime, which may take place or happen in the account during the operation of the account and which may result in a loss due to the transfer of the funds from my / our account to the third party's account. I/We are also aware of the fact that while bank has taken all necessary available precautions, the chances of such attacks by third parties cannot be ruled out, in any view of the matter the bank shall stand indemnified from any such claims from our side. That the users are authorised by the Company / Organisation's Resolution to avail the Corporate Internet Banking (CIB) facility to the existing account with Utkarsh Small Finance Bank. I/we agree that the transactions and requests executed in the above mentioned account/s through 'Corporate Internet Banking under the User IDs and Password will be legally binding on the Company/Concern/Us/Me

To be sealed & signed by Authorized Signatory. In case the Mode of Operation in the Account is JOINTLY, all Authorized Signatories to sign.

Place:		
Name of Authorized Signatory		
Authorized Signatory Signature	Signature with Seal	CIF ID D M Y Y Y Date D M Y Y Y
Name of Authorized Signatory		
Authorized Signatory Signature	Signature with Seal	CIF ID Image: Comparison of the comparison o
Name of Authorized Signatory		
Authorized Signatory Signature	Signature with Seal	CIF ID
Name of Authorized Signatory		
Authorized Signatory Signature	Signature with Seal	CIF ID Image: Comparison of the comparison o
Name of Authorized Signatory		
Authorized Signatory Signature	Signature with Seal	CIF ID Image: Comparison of the comparison o

(D) For Office Use only

Certified that this Request letter is complete in all respect and all relevant documents are obtained and verified as per the mode of operation and signature of the account/Corporate Internet Banking platform. The request may please be processed. The CRF has been personally submitted by the customer. I have satisfied myself about identity of the customer by verifying his/her Debit Card/KYC document/account and also his/her signatures in Bank's record/identity proof provided by the customer. I have done proper due-diligence for updating the records of the customer on his/her request at home as well as non-home branch.

BANK INDUCED REQUEST		
Request received date:	Request processed date:	M M Y Y Y
Request accepted by:	EIN No.:	Signature:
Request certified by: BOM BH	EIN No.:	Signature:
		}
(E) Acknowledgement To Customer		
Customer Name:	CIF ID:	Date of Request:
Name Of Branch Official:	Branch Official Signature:	