

KYC UPDATION CUM CUSTOMER SERVICE REQUEST FORM (INDIVIDUALS)
CRF-1 A (CPC)

(Office use only)	Branch Code	Date dd/mm/yyyy	Ref. No.:
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KYC-Update Request (Individual)

 Client ID:
Instructions

1. Please fill in BLOCK letters only and leave one box blank between words. Tick (✓) the appropriate boxes 2. Please tick mark and fill relevant sections relating to the change/update request only. 3. This form may be submitted to the base branch where the account is maintained or at any CSB branch 4. Submit self attested documentary proof, wherever applicable 5. Submit Individual KYC updation form for each joint holder, in case of joint account(s) 6. The existing data in the bank's record shall be replaced with the relevant client information furnished in this request form

Please update my KYC data in the Bank's records as per details furnished below

(If your account is inoperative/frozen, please perform a credit/debit transaction in the account within 7 working days from submission of this request, to activate the account)

Title Code	<input type="checkbox"/> Mr.	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Others	<input style="width: 100%;" type="text"/>	<input type="checkbox"/> Resident	<input type="checkbox"/> Non Resident
Name of Customer	<input style="width: 100%;" type="text"/>					
Father's Name	<input style="width: 100%;" type="text"/>					

Present Address Updation

← Please tick here and furnish details below, if you need to update your present address

 • Resident customers to submit valid proof for either Present or Permanent Address
 • NRI customers to submit valid proof for Present and Permanent Address

Line - 1	<input style="width: 100%;" type="text"/>										
Line - 2	<input style="width: 100%;" type="text"/>										
Line - 3	<input style="width: 100%;" type="text"/>										
City	<input style="width: 100%;" type="text"/>					District	<input style="width: 100%;" type="text"/>				
State	<input style="width: 100%;" type="text"/>							Pin/Zip	<input style="width: 100%;" type="text"/>		

Permanent Address Updation

← Please tick here and furnish details below, if you need to update your permanent address

 Tick (✓) if Same as Present Address

Line - 1	<input style="width: 100%;" type="text"/>										
Line - 2	<input style="width: 100%;" type="text"/>										
Line - 3	<input style="width: 100%;" type="text"/>										
City	<input style="width: 100%;" type="text"/>					District	<input style="width: 100%;" type="text"/>				
State	<input style="width: 100%;" type="text"/>							Pin/Zip	<input style="width: 100%;" type="text"/>		

Preferred Mailing Address

 All deliverables to be sent to: Present Address Permanent Address

KYC Document Submitted - ID/Address Proof Details

 PAN No. OR Form 60/61 ◀ If PAN is not available please submit form 60/61
Present Address Proof:

KYC Document Type:	<input type="checkbox"/> Aadhaar Card/Aadhaar Letter	<input type="checkbox"/> Voter's ID Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> Passport	<input type="checkbox"/> NREGA Card
	<input type="checkbox"/> Govt. ID/Others (Specify) <input style="width: 100%;" type="text"/>				
KYC Document No.:	<input style="width: 100%;" type="text"/>				
Issued By:	<input style="width: 100%;" type="text"/>		Issue date.:	<input style="width: 100%;" type="text"/>	
Place of Issue:	<input style="width: 100%;" type="text"/>		Expiry date:	<input style="width: 100%;" type="text"/>	

Permanent Address Proof:

KYC Document Type:	<input type="checkbox"/> Aadhaar Card/Aadhaar Letter	<input type="checkbox"/> Voter's ID Card	<input type="checkbox"/> Driving License	<input type="checkbox"/> Passport	<input type="checkbox"/> NREGA Card
	<input type="checkbox"/> Govt. ID/Others (Specify) <input style="width: 100%;" type="text"/>				
KYC Document No.:	<input style="width: 100%;" type="text"/>				
Issued By:	<input style="width: 100%;" type="text"/>		Issue date.:	<input style="width: 100%;" type="text"/>	
Place of Issue:	<input style="width: 100%;" type="text"/>		Expiry date:	<input style="width: 100%;" type="text"/>	

P.T.O.

Acknowledgement (to be issued to the customer by the recipient branch)

Customer Name: _____

Date: _____ Client ID: _____

 Request received for updation of: Present Address Permanent Address Personal Details Photo & Signature

Seal & Signature of Bank Official/Marketing Officer

Customer Service Request Form for Individuals/Joint Individuals (Domestic and NRI customers)

Instructions

1. Please fill in BLOCK letters only. Please leave one box blank between words. Tick (✓) the appropriate boxes 2. Please tick mark and fill relevant sections relating to the change/update request only.
3. Request form can be submitted to the base branch where the account is maintained or at any CSB branch. Request for Transfer of Account has to be submitted either at the base branch or the destination branch 4. For joint accounts, alternate delivery channel (Debit Card, Net/Mobile banking) services will be provided to the primary account holder, linked to his/her Mobile Number/E-mail ID available in the Bank's records or as updated through KYC updation request form, from time to time

Account Information

Account No.:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	(for branch use only) Individual Client ID
Name of 1 st Account Holder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of 2 nd Account Holder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of 3 rd Account Holder	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please make the following changes in the records pertaining to my/our account with your bank

Alternate Delivery Channels (Alert Registration & Alert Change Request)

← Please tick here and furnish details below, if you need to activate any of the following service

1. Alerts

- i. Transaction Alerts Activation Mobile Alerts E-mail Alerts ii. Interactive Alerts Activation ← Special alerts like Term deposit due, Loan Installment/EMI due, ECS due, S.I. due, Account balance on month end, Chequebook issue alert, ATM card processing & dispatch alert
- iii. E-mail Statements Activation Daily Weekly Fortnightly Monthly Quarterly Half yearly

2. ATM Card/PIN

- i. Request Type New Card Add on Card* Renewal Card* Duplicate Card* Duplicate PIN Mailer* Unblock ATM PIN*

Secondary Account to be linked to the card*

*For addon/renewal/duplicate card, duplicate PIN, ATM PIN unblock or Secondary Account linking please provide existing ATM card number

Customer name to be printed on name embossed card

ATM/Debit card to be sent to: Customer's Mailing Address Customer's base branch ← ATM Pin mailer and Net/Mobile Banking passwords shall be sent to customer's mailing address only

3. Mobile Banking (Mobile Number can be furnished/updated in page 2 of this form)

- i. Mobile banking Activation ii. Link below mentioned A/cs under Mobile banking facility iii. Issue/Reissue MPIN

Accounts to be linked for Alternate channel services

← Only accounts with same client ID can be linked under this facility.

	Branch Code	Client ID	Product Code/No.
Account No. 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account No. 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account No. 3	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Internet Banking (Mobile Number & E-mail ID can be furnished/updated in page 1 of this form)

- i. Internet Banking Activation Viewing rights View and Transaction rights
- ii. Link above mentioned accounts under Internet banking facility
- iii. Reissue Internet/Mobile Banking User ID SMS E-mail Both
- iv. Reissue Internet Banking Login Password (In case of login password re-issue, both login and transaction password will be re-issued)
- v. Reissue Internet Banking Transaction Password

Security questions for Net/Mobile Banking user

Date of Birth (dd/mm/yyyy)

Mother's
Maiden Name

For Joint Account Only

Name of Joint holder authorised to operate Alternate Channel Services including Debit/ATM Card, Net/Mobile Banking:

Client ID of Joint Holder

P.T.O.

Acknowledgement (to be issued to the customer by the recipient branch)

Account No.:

Date (dd/mm/yyyy)

Services requested: Alternate Delivery Channels Account Upgrade Account Transfer
 Conversion to Joint Account

Name & Designation of Bank Official/ Marketing Officer: _____

Seal & Signature of Bank Official/ Marketing Officer

Account Upgrade Request

AQB- Average Quarterly Balance
AMB- Average Monthly Balance

← Please tick here and furnish details below, if you need to upgrade your account

Please upgrade/move my Savings account to CSB Orange Savings A/c CSB Silver Savings A/c (Min. AQB Rs. 5,000) CSB Gold Savings A/c (Min. AQB Rs. 25,000) CSB Platinum Savings A/c (Min. AQB Rs. 1 lakh)

Please upgrade/move my Current account to CSB Orange Current A/c (Min. AMB Rs. 5,000) CSB Silver Current A/c (Min. AMB Rs. 25,000) CSB Gold Current A/c (Min. AMB Rs. 50,000) CSB Platinum Current A/c (Min AMB Rs. 1 lakh)

I/ We, have understood the features and terms & conditions governing the different product variants offered by the Bank and agree to abide by the same

Account Transfer (Portability) Request

Request for Transfer of Account has to be submitted either at the base branch or destination branch

← Please tick here and furnish details below, if you need to transfer your account from one CSB branch to another

Please transfer my account to (proposed branch)

Request for Conversion to Joint Account

← Please tick here and furnish details below, if you need to convert your account into a joint account

Please convert my account into a joint account with Mr./ Mrs./ Miss (Name) having Client ID (if existing client)

to be operated by Either or survivor Jointly Former or survivor

Relationship with joint holder, If any

Signature of Account Holder

Signature of Joint Account Holder

If the applicant joint holder is a new-to-bank client, Individual Customer Profile Form along with KYC Documents has to be submitted with this request

Terms & conditions/ Declaration

I/ We, the undersigned, being customer of The Catholic Syrian Bank Ltd. (hereinafter referred to as "Bank") hereby confirm that I/We have read, understood and agree to abide and be bound by all the provisions of the terms & conditions as displayed on the website: www.csb.co.in(details also available with all CSB branches) which govern, all of my/ our accounts maintained/ opened with the Bank from time to time and also the 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, at any time and from time to time, without prior or post intimation to me/ us, add, alter or modify any of the said terms and conditions and discontinue any of the services completely or partially without any notice to me/us. I/ We hereby agree to abide and be bound by all such changes as if they form part of the terms and conditions 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 be tantamount to my/ our acceptance of all such changes. I/We agree that the Bank may debit my account for service charges as applicable from time to time. I/We also understand that the Debit/ATM Card and Internet Banking facility will be issued/ enabled to the mentioned account/ mandate holders and any transactions done through them will be automatically debited to the corresponding accounts maintained by me/us with the Bank.

- Changes requested would be effected in the Bank's records by the Bank within the committed period from the date of receipt of the request at the Branch and the said changes would be effective in the systems from that date only.
- Depending on customer's choice, all deliverables will be sent to the base branch or the applicant/ mandate holder's (for mandate holder) mailing / communication address as per the latest records available with the Bank.

I/We hereby declare that the above mentioned information with respect to my/our bank accounts held with your bank is/are true & correct.

All joint holders should sign this request form, in case of joint accounts.

Signature of 1st Account Holder

Signature of 2nd Account Holder

Date

Signature of 3rd Account Holder

For Office Use

Verified the documents furnished with originals, as per KYC/AML guidelines and Identity of applicant/s found correct

Name of Bank Official

Designation Date

Seal & Signature of Branch Official receiving the request from customer for upload to CPC

Emp Code

For CPC Use

Entered by: Employee Code

Updated by: Employee Code

Date

Signature

Date

Signature

Terms & Conditions for service request

- Changes requested would be effected in the Bank's records by the Bank within the committed period from the date of receipt at the Branch and the said changes would be effective in the systems from that date only.
- Depending on customer's choice, all deliverables will be sent to the base branch or the applicant/ mandate holder's (for mandate holder) mailing / communication address as per the latest records available with the Bank.
- Necessary charges /Annual fee will be applicable for availing services like mobile alerts, interactive alerts.
- Mobile banking has lower financial transaction limits which may be revised as and when instructed by RBI.