

CUSTOMER CONSENT FORM - FOR SALARY ACCOUNT

Corporate Name: _____ Corporate Code: _____ Application Date

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1. I hereby confirm that the bank official has explained to me the terms and conditions of the account/product that I propose to open and I shall further ensure the same is done for future accounts/products that I shall open with the bank. I also confirm that the same has been done for the features and charges as per bank's General Schedule of Features, Interest and Charges as applicable to the account/ product proposed to be availed by me now or in the future.
2. I understand and agree that I shall receive all relevant documents/details/ terms and conditions on my registered email ID post availing to the account/ product, and all such documents/ details/ terms and conditions received by me shall be binding on me from a legal and contractual purposes unless I dispute the same in writing.
3. I hereby confirm that I will be bound by and abide by the bank's general terms and conditions available as applicable to various services, products, accounts that I avail from time to time on the bank's website www.fincarebank.com
4. I shall keep the bank continuously updated regarding my citizenship/ tax status, including my compliance to FATCA

MOST IMPORTANT TERMS & CONDITIONS:

- I specifically understand, agree and accept the following:
1. I have applied for opening of bank account/ loan account/ other products offered by Fincare Small Finance Bank Ltd. using the electronic account opening form I have read, understood and agree with the general schedule of features, interest, eligibility, procedure, documentation and charges as applicable to the relevant bank account/ loan account/ other products as being availed by me.
 2. I understand that the Bank reserves the right to revise its general schedule of features, interest, eligibility, procedure, documentation and charges as laid down in the bank's website in www.fincarebank.com as applicable.
 3. I understand and agree that the bank account/ loan account/ other products should be used as per the fair usage policy as defined in the bank's website and also used in a regulatory compliant framework defined by RBI/ law . The Bank reserves the right to decline/reverse transactions and freeze/close the bank account/ loan account/ other products if this the fair usage is violated or if there is any noncompliance to regulations.
 4. I authorize Fincare Small Finance Bank Ltd. to link my Aadhaar to one of my bank account with Fincare Small Finance Bank Ltd. on a continuous basis (until I specifically request to delink the same in writing) which can be shared with any government department or NPCI for direct transfer of subsidies/benefits.
 5. I authorize Fincare Small Finance Bank Ltd. to conduct my credit history verification with any credit bureau or any other agency and acknowledge that Fincare Small Finance Bank shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to Fincare Small Finance Bank.
 6. I give my consent to receive information in respect of account maintenance, alerts, payments due, updates on existing and new products, servicing of account for sales, marketing or servicing my relationship with Fincare Small Finance Bank Ltd. its group companies/associates or agents through Telephone/Mobile/SMS/Email etc. Further, I understand that my consent to receive calls/communications shall be valid and shall prevail over my current or any subsequent registration of my number for NDNC and shall continue to be treated as my consent/acceptance. I understand that in case I do not wish to receive such calls I need to visit the Fincare Small Finance Bank website on and fill the requisite form and submit the same online or to the nearest Bank Branch.
 7. I understand that whenever I avail any bank account/ loan account/ other products offered by Fincare Small Finance Bank Ltd. through electronic or non-electronic medium/ channel, notwithstanding any electronic communication received by me from fincarebank.com or fincare.com only communication received from alerts@fincarebank.com will be binding on me

FOR SALARY ACCOUNT

1. In case there is no salary credits in my account, the Bank at its own discretion may withdraw all the benefits provided for salary account holders without any further notice. I understand that any benefits under Salary Account will stand true till the time the account is eligible under this category. I also authorize Fincare SFB to convert my Salary Account to Savings Account, basis confirmation received from my employer. Also, Bank has the discretion to convert my Salary Account to a regular account in case there are no salary credits in my account for 3 consecutive months or the Salary Account proposition is withdrawn at the employer level with due notice. In case I fail to comply with Bank's requirement, Bank may suspend operations or close the account without further notice. I confirm that I will not dispute and raise any legal action against Fincare SFB towards such remittance/ conversion of account status.
2. I/ We consent / do not consent to receive information/ service updates and product updates etc. for Marketing purposes through Telephone/ Mobile/ SMS/ Email by the Bank/ its agents. I/ We here by give consent to receive information from Central KYC Registry through SMS/ Email on the above registered contact number/ email address. I/ We confirm that I/ We have read and understood the above Declaration, and that the contact details provided on the form are correct.

FOR SALARY RELATIONSHIPS

I/ We confirm the identity, photo, address and signature of our employee _____ as mentioned in the form and Authorize Fincare Small Finance Bank to open salary account
 Name of the Corporate: _____ Name of Authorised Signatory: _____
 Address: _____

Date: _____ Signature of Authorised Signatory with Company Stamp _____

FATCA DECLARATION

Yes - FATCA:CRS submitted separately No

I confirm that I am not a citizen of country other than India (dual/ multiple, including Greencard) and not a tax resident of any other country other than India. I also confirm that my country of birth is India and I am not a POA mandate holder or have any address/ telephone number outside India.

Name of the Customer: _____ I confirm that the customer signed in my presence
 Aadhaar Number: _____ Name of Official: _____
 Employee Code: _____ Employee ID of Official: _____
 Customer Signature: _____ Signature of the Official: _____