

FIXED/RECURRING DEPOSIT



	Т	D001							
Type of Account: Fixed Deposit Recurring Deposit *Cannot be closed prior to maturity	Tax Saver FD FD	Plus*		РНОТО					
Branch Name	Brai	nch Code:							
Scheme Code	Date	e: D D M M Y Y							
		35mm X 35mm							
	Customer Onboarding	g Section - Primary Appli	cant						
Name* PREFIX F R S T			MIDDLE						
THE			MIDDELL						
L A S T									
* Individual or HUF	*	**If PAN is not available, please	ill up Additional declaration Fo	orm 60 or 61					
Date of Birth*#	Gender* MFT Minor	** Y N Married* Y N 1	Nationality						
# If minor/ senior citizen, please provide proof of DC	B **If minor please fill Minor Dec		or 'third gender'						
PAN***		Father's Name*							
ADDRESS DETAILS									
Communication / Residence Address*									
			City						
Landmark*			City*						
Pin code* State*			Country*						
Residence Type* Owned Rented/Leased	Ancestral/Parental	Company Provided							
	E.G.	RKADAM@GMAIL.COM							
Mobile No	Email Address								
	Please	e ensure to furnish correct email ID.							
Tel. No.(R)	Tel. No. (O)								
Permanent Address* Same as communicatio	n address Please note th	ne address below							
Landmark*			City*						
Pin code* State*			Country*						
Residence Type* Owned Rented/Leased	Ancestral/Parental	Company Provided Pref	erred Language of Communi	ication*					
CUSTOMER INFORMATION		#Please m	ention occupation codes as applicat	ble for Non Individuals in case of HUF					
	out Sector Rusiness Pro	fessional Self Employed	Patirad Housewife O	coungtion Code*#					
Student									
Annual Salary Income (?lakhs)* <1	>1-5 >5-10	>10-15 >15		50					
Salaried* If Yes*, Employer Name		Job Role	Designat	rion					
KNOW YOUR CUSTOMER*									
Account opening through e-KYC (Aadhaar) 📉 🔃	Transaction ID		To be filled by the Branch	1					
If No, please provide KYC documents (Attach pho	ocopies of the following docur	ments and produce the original	copies of these documents for	or verification)					
*Identity Proof Document Type *ID N	ssue								
*Address Proof Document Type *ID N	ssue								
FD/RD Account Opening Section									
MODE OF OPERATION* *I would need Fixe	ed Deposit in the form of (Tick	one): Receipt Phy	sical Advice e-Advic	е					
Self	Either/ survivor	Former/ survivor		Anyone/ survivor					
Jointly by all	Minor A/C operated by Guar	dian Others							
JOINT APPLICANT DETAILS Please mention	no. of Joint Applicants 0								
1st Joint Applicant: PREFIX F I R S T		MIDDLE	LA	ST					
2nd Joint DDEELY ELDCT		MIDDLE		ISITI					
Applicant:		1 1 1 2 2 2 1 2	11111						

TYPE DEPOSIT ACCOUNT	
Deposit/Installment Amount: Period:	Months Days Period of RD should be only in multiples of 12 months
Interest Payout (Tick one): Cumulative (Reinvestment) Monthly (MIC) Quart	erly (QIC)
Auto Renewal: Y N (No auto renewal for Recurring Deposits and FD Plus)	No. of times :
Auto Closure: Y In If Yes, please fill "INTEREST PAYMENT/MATURITY PROCEED	S" Section.
Standing Instruction for RD: Kindly debit my A/C no.	on of every month.
TDS to be deducted: Y From SB/CA A/C No	OR FD
If No,TDS exempt reference No	TDS exempt submission date DDMMMYYYY
Form 15H/G Y N To be collected seprately by Branch wherever applicable.	
INTEREST PAYMENT/MATURITY PROCEEDS	
For Interest Payment/Maturity Proceeds:	
Credit My Axis Bank A/C No	
Issue PO	Signature
Note: 1) Interest payment is subject to RBI guideline from time to time. 2) Please refer the latest interest rate ch	Applicant Signature
INITIAL PAYMENT DETAILS	an arme branch or visit www.axisbank.com 3) interest payment is subject to tax deduction at source
Deposit Amount ₹ (in words)	
Mode of Payment: Cash Debit my/ our existing A/C A/C No.	(as per mode of operation)
To open account with cash, customer can deposit cash upto ₹ 49,999/- in account opening branch only	(as par mass ar operation)
Cheque No. Dated D D M M Y Y Y Y Che	eque should be crossed A/C payee and drawn payable to "Axis Bank Ltd. A/c <applicant name="">"</applicant>
Drawn on Bank	Branch Signature
	Applicant Signature
Office use only: Initial Deposit Tran ID Value D	MIC D D M M T T T T T
NOMINATION (DA1 FORM)* (Only one individual nominee permitted and to be signed also in a	ase of no nomination)
Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule2 (1) of I/We (Name) (Address)	Print Nominee Name: N N Print Nominee Name: Y N Print Nominee Name: N N Print Nominee Name: N N N N N N N N N
Nominate the following person to whom in the event of my/our/minor's death the amou	nt of deposit in the above account may be returned by AXIS BANK LTD.
Name	Address: Same as Primary Applicant
If different from Primary Applicant	
Relationship with depositor, If any Age	Years If nominee is Minor, Date of Birth DDMMMYYYYY
As nominee is minor I/We appoint (name)	Relationship with minor
Address: Same as Primary Applicant If different	
to receive the amount of deposit on behalf of the nominee in the event of my/our/ mino Signature of Witness***	r's death during the minority of the nominee Signature of Primary Applicant**
Name	Name
Address	Address Signature of the Joint Applicant(s)
	of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.
*Strike out if nominee is not a minor **** In case of thumb impression, nom INFORMATION ON OTHER PRODUCTS & OFFERINGS*	nation to be filled in as an annexure
I hereby agree to Axis Bank/Subsidiaries/Affiliates/Agents contacting me for vario information from time to time.	us other product updates, marketing promotions, special offers or any such
I do hereby give my consent to receive such information through Email 📉 🔃 St	AS Y N Phone Calls Y N Signature
Additional Declaration	s (Tick as applicable)
FORM 60 [Please fill the latest version of Form 60 as separate <u>annexure</u>]	
Form of declaration to be filed by a person who do and who enters into any transact	ion specified in rule 114B
Full name and address of the declarant	
4. Are you assessed to tax? Yes / No 5. If yes, (i) Details of Ward/Circle/Range where the	
(ii) Reasons for not having PAN	
6. Details of the document being produced in Support of address in column (1) Verificat	
I, do hereby declare that what is stated	
day of20	
Date, Place	Signature

I am a tax res	sident of India and no	•	country OR 🔲 I am a	tax resident of the countr	•	e table below:		
Please indica City of Birth*	te the country/ies in w	which the entity is a resic	lent for tax purposes c	and the associated Tax ID Address Type for Tax Pu		al Business Registered Office		
,	Tax Identificatio		fication Type	Address For Tax Purpose*				
Country#	Number%		er, please specify)%	Communication Add	dress Permanant Ad	dress Please note the address below		
				A	Landmo	nul.		
				Pin Sta	ite	Country		
FATCA- CRS Cer	rtification: I have und	lerstood the information	requirements of this F		FATCA/CRS Instruction	ole, kindly provide functional equivalents and Terms & Conditions) and hereby		
CUSTOMER	PROFILE					Signature		
Status* Blind	Physically Challer	nged Pardanashi	n Normal	Is the account opened fo	ace to face* 🖺 🔃			
Education* Belo	ow SSC SSC SSC	HSC Graduate	Masters Prof	fessional (CA, CS, CMA, C	Others)			
Source of Funds	* Salary B	usiness Inheri	tance Invest	ments Others, p	olease specify			
Monthly Income	!(₹)*		Ne	et worth(₹lakhs)*:				
Business/Self En	nployed* 📉 🔃 If Yes	s, Line of Activity						
	s Turnover (₹lakhs)* <		>5-10 >10	-15 > 15-25	>25-50 >	>50-100		
	RATION & MANDA ned, for ourselves an				s Manager/Karta and	d Ejaman of the family, also guardian of		
*	inea, for ourselves and		st you to take notice th	nat we are members of Hi				
The joint fan	nily/firm is carrying bu	usiness under the name	and style of M/s		, wh	nich is our joint family trade		
The Hindu U	Individed Family is en	gaged in		activity/occupation no	t in the nature of the l	business or trade.		
We, the undersig	ned, hereby authorize	e (Karta/Manager)		to operate upon the Bank	account severally, joi	ntly and all transactions entered into		
-			-	•	done to comply with	Bank's rules which are in force or as		
	me to time in the mat as a mandate from		conduct of such accou	ints will be binding on us.				
			s/ECS/RTGS/NEFT /in	struments issued in favour	r of	, being the karta in the account in		
-		of						
We hereby under				enalty/charges etc suffered	d by the Bank, on acc	ount of our aforesaid instruction/mandate.		
Place:		ate				Signature		
Place:		ate	Name: - Name: -			Signature		
Place:		ate	Name:			Signature		
*Here state the name	e of the children of each of	the family members stating th	neir parentage and state als	o the name of guardians by who	om they are represented.			
MINOR DEC								
Type of Guardian	n: Father Mot	her Court Appointe	ed Testamentary C	Buardian				
Full Name of Gu	ardian Mr. Ms.							
I hereby declare the court order, dated	hat the date of birth of t		is _ epresent the said mino			ad lawful guardian/ guardian appointed by above account until the said minor attains		
majority. I indemn	ify the Bank against the	claim of the above minor	for any withdrawal/tra	nsactions made by me in his	s/her account.	Signature		
				Regulations		_		
		•			a discounted rate as	prescribed under the IBA guidelines.		
		rly Interest Certificate i			nanad/ranawad an	or after May 1, 2014 (including Flexi		
						od the deposit has remained with the		
						om the date of booking of the deposit		
interest rate sh	all be rate applicab	ole for the period the	deposit has remain	ed with the bank or the	contracted rate, w	hichever is lower. b. For Rupee Term		
						the date of deposit, as applicable for		
						e applicable on Rupee Term Deposits ompletion of the minimum period of 7		
						re termination and payment of Term		
Deposits held i	n 'Either or Survivo	r' or Former or Surviv	or' or 'any one' bas	sis shall be allowed to	survivor /s. Such po	ayment to survivor/s shall give valid		
						the rate applicable for the period the		
						tions being 'Either or Survivor' and a lest the bank, to allow either of us to		
						coceeds of such deposits to either one		
						bank from making the payment from		
						Survivor, in the event of the death of		
						the survivor, if he / she so request the		
						deposit holder, the bank is entitled to harge of the bank's liability provided.		
						at the survivor would be receiving the		
payment from t	the bank as a trustee	e of the legal heirs of	the deceased depos	itor and that such paym	ent to him/her shall	I not affect the right or claim that any		
						nature withdrawal is required by the		
						tled to prematurely withdraw the said of the proceeds of such deposit to the		
						bank as a trustee of the legal heirs of		

the deceased depositor and that such payment to him/her shall not affect the right or claim that my legal heirs may have against the nominee to whom the payment is made.

- 4) All encashment or withdrawals of Fixed Deposit with repayment instruction as direct credit to the linked account can be executed at any Axis bank branch. 5) (i) For Recurring Deposits opened on or after 9th August, 2016, in case of delay in payment of any instalment/s beyond the calendar month, the depositor /s shall be liable to pay a penalty at Rs. 10 per Rs. 1000 per month for the period of delay. (ii) For Existing Recurring Deposit Customers, in case of delay in payment of any instalment/s beyond the calendar month, the depositor /s shall be liable to pay a penalty at the existing Business Prime Lending Rate +4% for the period of delay. (iii) Fraction of a month will be treated as full month for the purpose of calculating such penalty i. e. if the instalment due on 31.05.2011, is paid on 02.06.2011 the delay shall be treated as one month. (iv) Please note that standing instructions for Instalment dates 28th/29th/30th/31st will not be available at the time of Recurring Deposit Account opening. (v) The penalty so leviable shall be deducted from the total payment payable at the time of maturity of the Recurring Deposit.
- 6) For all new Reinvestment Term Deposits to be opened on and after 1st August, 2013 and all existing Reinvestment Term Deposits that may be renewed on and after 1st August 2013, interest reinvested would be net of TDS and hence the maturity value would vary to that extent.
- 7) Minimum deposit amount for opening of FD Plus account is greater than ₹15 lacs.
- 8) FD Plus Deposits cannot be closed prior to date of maturity. Premature withdrawal is not permissible under this scheme except for exception cases which include bankruptcy/winding up/directions by court/regulators/receiver/liquidator/deceased cases. Premature closure arising out of afore mentioned scenarios in the above cases will result in the change of applicable interest rate from the FD Plus rate to that of Normal Fixed Deposit rate (as per the prevailing rate) and will include application of penalty.
- 9) In case of minor, minor declaration needs to be filled in.

met and has signed in my presence. Kindly process the request

- 10) An overdue term deposit or its portion may be renewed from the date of Maturity, provided the overdue period from the date of maturity till the date of renewal does not exceed 14 days. The rate of interest payable on the amount of the deposit so renewed shall be the appropriate rate of interest for the period of renewal as prevailing on the date of maturity. If the overdue period is more than 14 days and if the depositor places the entire amount of overdue deposit or at least the principal amount of deposit as a fresh term deposit, interest may be paid for the overdue period on the amount so placed as a fresh deposit at the rate decided by the Bank which at present is simple interest at Savings Bank interest rates.
- 11)Personal Information: a. Any updation of my details including personal information, change of address etc. will be provided by me to the bank, along with documents of proof within 2 weeks of such change. I agree to indemnify Axis Bank for any fraud, loss or damage, due to my providing wrong information or not updating the information that may occur to me and to Axis Bank and based on which the bank may act as true and correct. b. All information provided by me of any nature (including personal & sensitive information) will be used in the provision of services or facilities, facilitation of transactions, providing information and updates (including value-added services), research and analytics, credit scoring, verification, participating in telecommunication or electronic clearing network as may be required by law/customary practice by the bank c. All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement with Axis Bank for business purpose and on need to know basis. Axis Bank shall always strive to comply with the rules and regulations as applicable from time to time on this context in accordance with the bank's Privacy policy. If I intend to revoke my consent to the sharing of the data, the products/services available to me, pursuant to the consent provided earlier, shall no longer be available to me, and I shall be required to initiate closure of such products/services.

12)FATCA-CRS Terms and Conditions: The Central Board of Direct Taxes has notified on 7th August 2015 Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies/ withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e. within 30 days.

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.⁵ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

I do hereby solemnly de	eclare that the information provided above is up to date and correct a Signature of Primary Applicant	nd I hereby submit my recent photograph and sel	
(Please do not sig	gn this form if it is BLANK. Please ensure all relevant sections and c		
	Signature of 2rd Joint Applicant Signature of Bank Official in whose presence signed FOR OFF	Date DD	M M Y Y Y Y
A/C No. SE Code A/C Label 1		er unt opened face to facê Y N	For Axis Bank Limited Branch Head / Authorized Signatory
Camp. Code DECLARATION BY T I hereby certify that this ac Bank and RBI (as amende	Camp. Reference Number	peen obtained as per the KYC guidelines of the the customer.	Name of Official: Designation: S. S. Number:



	Custome	r Onboar	ding Se	ction - Jo	oint Ap	plica	nt / Gu	vardi	an / K	Cart	a									
Name* PREFIX F R	ST								\ \	۱ I	D	D	L	Е		\top				
LAS	Т									Ť	T	Ì		П	Ť	Ť	Ť	T	T	Ť
xisting Customer* If Yes, C	ustomer ID																			
ontact details updation required 🛚 🔻	N If No, pled	se proceed	to filling th	ne Declarat	tion															
not existing customer, I confirm if found o	therwise, bank	reserves the	right to co	onsolidate t	he custo	mer IDs	s as it mo	ay deci	de, with	nout	any	prior	not	ice to	o me)				
Following fields Are Applicable for new cust	omers or any KY	C Modificatio	ns Only (fo	or existing c	ustomers	addres	s, contac	t details	given k	belov	v will	be u	pdat	ted in	all o	accon	nts he	eld wi	th the	ban
Date of Birth*#		ender* M				\arried			ionality											
# If minor/ senior citizen, please provide	proof of DOB						^T stan	ds for '	third ge	ende	r'						_	Т		
PAN*** ADDRESS DETAILS		or FOR	M 60/61	Fathe	r's Nam	e*		_									<u> </u>			_
ADDRESS DETAILS		Same as pr	imary hol	lder		F	Please n	ote the	addre	ess b	elov	٧								
Communication / Residence Address*																\top	\top			
								Ť		Ť	T	T		П	T	寸	寸	T	T	T
Landmark*									City*	$^{+}$	t	$^{+}$			$\overline{}$	\pm	\pm		\exists	\pm
								= .		+	+	_			\pm	\pm	\pm	_	+	\pm
	ite*								ountry'	L										
Residence Type* Owned Rente	d/Leased	Ancestra	I/Parenta	I Co E.G. RKAI	mpany															
Mobile No		Email	Address	E.G. KNAL	JAM@C	FIVIAIL.	COM													
				Please ensu	re to furni	sh correc	t email ID).												
Tel. No.(R)		Tel. 1	No. (O)																	
Permanent Address* Same as com	munication add	dress	Please n	ote the ad	ldress be	elow														
											Т					\Box	\top			Т
										Ť	Ť				$\overline{}$	士	十		$\overline{}$	
1								=	·:*	$\frac{\perp}{1}$	\pm				\pm	\pm	\pm	\perp	_	\pm
Landmark*									City*	+	+	<u> </u>			_	\pm	\pm		_	+
Pin code*									ountry	*						ᅷ				
Residence Type* Owned Rente	d/Leased	Ancestra	I/Parenta	I Co	mpany	Provide	ed 🔲 🛭	Preferr	ed Lan	gua	ge o	f Co	mm	unic	atio	n*				
CUSTOMER INFORMATION				_			#Pleas	se menti	on occu	patio	n cod	les as	арр	licabl	e for	Non I	ndivid	uals ii	case	of H
Occupation* Private Sector Public Sec Student	ctor Govt. S	Sector B	usiness	Profession	onal	Self En	nployed	Re	tired _	_ H	ouse	wife	Ш	Oc	cupo	noitg	Cod	e*#		
Annual Salary Income (?lakhs)*	<1	>1-5	>	5-10	>10-			15-25	i 🗌	>2	5-50			>5						
Salaried* If Yes*, Employer	Name				J	ob Rol	e					D	esig	natio	on _					
KNOW YOUR CUSTOMER*	VVVV T	15								. ,	CII I									
Account opening through e-KYC (Aadha		ansaction ID					المانية مانا	۔۔ ادد:				by th				.:t:	4: \			
No, please provide KYC documents (A *Identity Proof Document Type	*ID No.	nes or me re	ollowing (aocumenis		g Auth		inai cc	pies oi	ine	se a					iiica	lion)			
*Address Proof Document Type																				
DECLARATION & SIGNATURE																				
do hereby solemnly declare that the i	nformation pr	ovided abo	ve is up	to date ar	nd corre	ct and	I hereb	y subi	mit my	rec	ent	phot	ogr	aph	and	l self	-atte	sted	pho	tocc
he KYC documents.														Г						
Signature of Joint Applicant																	PH	ОТО		
Joignatore of John Applicant		_			Signatu	e of al	l other h	nolders	;				_							
		F/	MP No.				ate D	D	M M	Y	Υ	ΥΙ								
Signature of Bank Official in whose prese	nce signed	Li	1,0.													35	mm	X 35	mn	n
INFORMATION ON OTHER PRODU	JCTS & OFFE	RINGS*																		
I hereby agree to Axis Bank/Subsidia information from time to time.	ries/Affiliates/	'Agents cor	ntacting r	me for var	rious ot	ner pro	oduct up	odates	, mark	ketin	g p	rom	otio	ns, s	spec	cial c	offers	or	iny s	such
	1	ان ن		4 17 15 T	Chic E	150	DI	~ '' '	V 15-1			_								
do hereby give my consent to receive	e such intorm	ation throu	ıgh Ema	il Y N	SMS Y		Phone	Calls	YN			Si	gna	ture_						

Additional Declarations(Tick as applicable)								
FORM 60 [Please fill the latest version of Form 60 as separate annexure]								
Form of declaration to be filed by a person who does not have a permanent account number								
and who enters into any transaction specified in rule 114B								
1. Full name and address of the declarant								
2. Particulars of transaction: Opening of Saving/Current Account 3. Amount of the transaction:								
4. Are you assessed to tax? Yes / No 5. If yes, (i) Details of Ward/Circle/Range where the last return of income was filed?								
(ii) Reasons for not having PAN								
6. Details of the document being produced in Support of address in column (1)								
	haliaf Varifiad tadan, tha							
I, do hereby declare that what is stated above is true to the best of my knowledge and	belief. Verified foddy, the							
,								
, it is	ature							
FATCA- CRS DECLARATION Please tick the applicable tax resident declaration (Any one)*								
I am a tax resident of India and not resident of any other country OR I am a tax resident of the country/ies mentioned in the table	e below:							
Please indicate the country/ies in which the entity is a resident for tax purposes and the associated Tax ID Number below:								
City of Birth* Address Type for Tax Purpose*- Residential								
Country# Tax Identification Identification Type Address For Tax Pur								
Number% (TIN or Other, please specify)% Communication Address Permanant Address	Please note the address below							
Landmark Pin State Co	puntry							
# To also include USA, where the individual is a citizen/ green card holder of USA % In case Tax Identification Number is not available, ki	/							
FATCA- CRS Certification: I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions at	, · · · · · · · · · · · · · · · · · · ·							
confirm that the information provided by me/us on this Form is true, correct, and complete and hereby accept the same.	,							
Sign	ature							
CUSTOMER PROFILE								
Status* Blind Physically Challenged Pardanashin Normal Is the account opened face to face*								
Education* Below SSC SSC SSC Graduate Masters Professional (CA, CS, CMA, Others)								
Source of Funds* Salary Business Inheritance Investments Others, please specify								
Monthly Income(₹)* Net worth(₹lakhs)*:								
Business/Self Employed* \(\sum \) If Yes, Line of Activity								
Annual Business Turnover (₹lakhs)* <1 >1-5 >5-10 >10-15 >15-25 >25-50 >50-100 >100 >								
MINOR DECLARATION								
Type of Guardian: Father Mother Court Appointed Testamentary Guardian								

I hereby declare that the date of birth of the minor who is my _____ is ___/____ and I am his/her natural and lawful guardian/ guardian appointed by court order, dated ____/___ (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I indemnify the Bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account.

Signature _____

Signature

Full Name of Guardian Mr. Ms.

Rules & Regulations (Customer Copy)

- 1)The payout of interest on Term Deposits under Monthly Interest Certificate scheme, takes place at a discounted rate as prescribed under the IBA guidelines. 2)The payout of interest for Quarterly Interest Certificate is applied on Simple Interest basis.
- 3) Premature Encashment: a. For Rupee Term Deposits of a contracted amount less than Rs 5 Crores opened/renewed on or after May 1, 2014 (including Flexi deposits), interest rate shall be 1.00% below the card rate, prevailing as on the date of deposit, as applicable for the period the deposit has remained with the bank or 1.00% below the contracted rate, whichever is lower. However, for Rupee Term Deposits closed within 14 days from the date of booking of the deposit interest rate shall be rate applicable for the period the deposit has remained with the bank or the contracted rate, whichever is lower. b. For Rupee Term Deposits of a contracted amount of Rs 5 Crores and above, interest rate shall be 1% below the card rate prevailing as on the date of deposit, as applicable for the period the deposit has remained with the bank or 1% below the contracted rate, whichever is lower. This would also be applicable on Rupee Term Deposits closed within 14 days from the date of booking of the deposit. c. In case the term deposit is closed prematurely, before completion of the minimum period of 7 days, no interest shall be paid for the said term deposit. d. In the event of the death of one of the depositor, premature termination and payment of Term Deposits held in 'Either or Survivor' or Former or Survivor' or 'any one' basis shall be allowed to survivor /s. Such payment to survivor/s shall give valid discharge to the bank. Such premature withdrawal shall not attract any penal charge. However, the interest rate shall be the rate applicable for the period the deposit has remained with the bank or the contracted rate, whichever is lower. e. In the event of 'With disposal' instructions being 'Either or Survivor' and a premature withdrawal is required by either of the joint holder even when both are alive: In case either one of us request the bank, to allow either of us to prematurely withdraw the said deposit, the bank is entitled to honour the same. We further affirm that the payment of proceeds of such deposits to either one of us represents a valid discharge of the bank's liability, provided there is no order from a competent court restraining the bank from making the payment from the said account to either of us. f. In case the mode of operation is 'Either or survivor' or 'Former or Survivor' or 'Anyone or Survivor', in the event of the death of one of the deposit holder, premature withdrawal is required by the survivor: In the event of the death of either one of us, the survivor, if he / she so request the bank, to prematurely withdraw the said deposit without seeking the concurrence of the legal heirs of the deceased joint deposit holder, the bank is entitled to honour the same. We Further affirm that payment of the proceeds of such deposit to the survivor represents a valid discharge of the bank's liability provided. (i)There is no order from a competent court restraining the bank from making the payment from the said account. (ii) That the survivor would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that any person/s may have against the survivor to whom the payment is made. g.Where the deposit is held singly and premature withdrawal is required by the nominee in the event of death of the deposit holder. (i) In the event of my death, the nominee named for the deposit is entitled to prematurely withdraw the said deposit, if he/she so requests the bank, without seeking the concurrence of my legal heirs. I further affirm that payment of the proceeds of such deposit to the nominee represents a valid discharge of the bank's liability (ii)That the nominee would be receiving the payment from the bank as a trustee of the legal heirs of the deceased depositor and that such payment to him/her shall not affect the right or claim that my legal heirs may have against the nominee to whom the
- 4) All encashment or withdrawals of Fixed Deposit with repayment instruction as direct credit to the linked account can be executed at any Axis bank branch. 5) (i) For Recurring Deposits opened on or after 9th August, 2016, in case of delay in payment of any instalment/s beyond the calendar month, the depositor /s shall be liable to pay a penalty at Rs. 10 per Rs. 1000 per month for the period of delay. (ii) For Existing Recurring Deposit Customers, in case of delay in payment of any instalment/s beyond the calendar month, the depositor /s shall be liable to pay a penalty at the existing Business Prime Lending Rate +4% for the period of delay. (iii) Fraction of a month will be treated as full month for the purpose of calculating such penalty i. e. if the instalment due on 31.05.2011, is paid on 02.06.2011 the delay shall be treated as one month. (iv) Please note that standing instructions for Instalment dates 28th/29th/30th/31st will not be available at the time of Recurring Deposit Account opening. (v) The penalty so leviable shall be deducted from the total payment payable at the time of maturity of the Recurring Deposit.
- 6) For all new Reinvestment Term Deposits to be opened on and after 1st August, 2013 and all existing Reinvestment Term Deposits that may be renewed on and after 1st August 2013, interest reinvested would be net of TDS and hence the maturity value would vary to that extent.
- 7) Minimum deposit amount for opening of FD Plus account is greater than ₹15 lacs.
- 8) FD Plus Deposits cannot be closed prior to date of maturity. Premature withdrawal is not permissible under this scheme except for exception cases which include bankruptcy/winding up/directions by court/regulators/receiver/liquidator/deceased cases. Premature closure arising out of afore mentioned scenarios in the above cases will result in the change of applicable interest rate from the FD Plus rate to that of Normal Fixed Deposit rate (as per the prevailing rate) and will include application of penalty.
- 9) In case of minor, minor declaration needs to be filled in.
- 10) An overdue term deposit or its portion may be renewed from the date of Maturity, provided the overdue period from the date of maturity till the date of renewal does not exceed 14 days. The rate of interest payable on the amount of the deposit so renewed shall be the appropriate rate of interest for the period of renewal as prevailing on the date of maturity. If the overdue period is more than 14 days and if the depositor places the entire amount of overdue deposit or at least the principal amount of deposit as a fresh term deposit, interest may be paid for the overdue period on the amount so placed as a fresh deposit at the rate decided by the Bank which at present is simple interest at Savings Bank interest rates.

Acknowledgement (to be Application form acknowledgement		
I have received Application no from		
for opening a FD/RD account with Axis Bank Branch		
Name of Bank Official		
Mobile no		
		Signature
Nomination acknowledgement		
I. We acknowledge receipt of nomination made by you in favour of:		
Name of nominee	Age:	year with respect to your application
no		
II. No nominee for the account since nomination facility not availed by the account hol	der.	
	Signature	of Bank Official

According to RBI's nomination guidelines, it is necessary to register a nominee on accounts opened under a single name. Appointing a nominee is beneficial for the following reasons:

- 1. If the account holder dies, the bank will easily pass on the funds in the account to the nominee
- 2. Hassle-free formalities for the nominee while claiming benefits

V1.0/FD Form/19-08-2

Rules & Regulations (Customer Copy) - Contd.

11)Personal Information: a. Any updation of my details including personal information, change of address etc. will be provided by me to the bank, along with documents of proof within 2 weeks of such change. I agree to indemnify Axis Bank for any fraud, loss or damage, due to my providing wrong information or not updating the information that may occur to me and to Axis Bank and based on which the bank may act as true and correct. b. All information provided by me of any nature (including personal & sensitive information) will be used in the provision of services or facilities, facilitation of transactions, providing information and updates (including value-added services), research and analytics, credit scoring, verification, participating in telecommunication or electronic clearing network as may be required by law/customary practice by the bank c. All information provided by me of any nature (including personal & sensitive information) can be shared with agencies/service providers who have an agreement with Axis Bank for business purpose and on need to know basis. Axis Bank shall always strive to comply with the rules and regulations as applicable from time to time on this context in accordance with the bank's Privacy policy. If I intend to revoke my consent to the sharing of the data, the products/services available to me, pursuant to the consent provided earlier, shall no longer be available to me, and I shall be required to initiate closure of such products/services.

12)FATCA-CRS Terms and Conditions: The Central Board of Direct Taxes has notified on 7th August 2015 Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies/ withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e. within 30 days.

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or green card holder, please include United States in the foreign country information field along with your US Tax Identification Number. It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.