# ICICI Bank

## Channel Registration Form for Current Account Customers (For all customer types)

**Please write in CAPITAL letters and use black ink pen.**

(For ICICI Bank Use - Form to be considered within 2 months of the date) D D M M Y Y Y Y

### Account details (All communications will be sent to the address mentioned in our records)

Account Name

Account Number

### Applicant Details (Please ✓ tick mark the appropriate box)

| Photograph | Signature** | CIB | Cards | Phone Banking |
|---|---|---|---|---|

**USER 1**

Stick recent passport size photograph here (Not applicable for Govt. Departments)

View | Transaction | Debit Card | Inquiry Card

Existing ICICI Bank Account No: (For KYC)

*User Name : Mr./Mrs./Ms. F I R S T   N A M E      L A S T   N A M E

*Email ID :

*Mobile : +91

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**USER 2**

Stick recent passport size photograph here (Not applicable for Govt. Departments)

View | Transaction | Debit Card | Inquiry Card

Existing ICICI Bank Account No: (For KYC)

*User Name : Mr./Mrs./Ms. F I R S T   N A M E      L A S T   N A M E

*Email ID :

*Mobile : +91

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**USER 3**

Stick recent passport size photograph here (Not applicable for Govt. Departments)

View | Transaction | Debit Card | Inquiry Card

Existing ICICI Bank Account No: (For KYC)

*User Name : Mr./Mrs./Ms. F I R S T   N A M E      L A S T   N A M E

*Email ID :

*Mobile : +91

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**USER 4**

Stick recent passport size photograph here (Not applicable for Govt. Departments)

View | Transaction | Debit Card | Inquiry Card

Existing ICICI Bank Account No: (For KYC)

*User Name : Mr./Mrs./Ms. F I R S T   N A M E      L A S T   N A M E

*Email ID :

*Mobile : +91

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\* Mandatory Details to be filled.

**KYC:-** If the above users are not authorized signatories and are not ICICI Bank account holders, submit any one of the following documents as Identity Proof:
1. Valid Passport 2. Voter's Identity Card 3. Income Tax/Wealth Tax Assessment Order 4. PAN Card/PAN Intimation Letter 5. Driving License. 6. Arm's License 7. Pension Book 8. Freedom Fighter's Pass 9. Letter from Existing Banker 10. Aadhaar Card
\*\* Signatures of the user above should match those in the documents submitted

**CIB:-** 1)  View Access includes : Account Statement, Account Balances, FD Opening, Stop Cheque Payment, Cheque Book Request
2) Transaction Access includes: 1. Fund Transfer (Own Account Transfer - Within ICICI; Third Party Transfer - Within ICICI, NEFT, RTGS, Cardless Cash Withdrawal, UPI) 2. Bulk Transfer 3. Bill Payments 4. Tax Payments   and any other facility that the Bank may add from time to time

**Phone Banking:-** Access will be given to all users with CIB Transaction access and users with Debit Card access by default. This access includes: Account Information , Hot listing of  Card, Opening of F D  (maximum of up to Rs.15 lakhs), Stop Payment, Request for Cheque book, Request for DD/PO maximum up to Rs.1.5 Lakhs and any other facility that the Bank may add from time to time

**Cards:-** 1)  Business Banking Inquiry Card will be mandatorily issued for availing Phone banking access and  CIB transaction access (if the user has not request for a Debit Card)
2) Escrow, Bullion, Interest, Dividend, Settlement, EEFC, TASC and HUF accounts and accounts with cash credit/overdraft facility will not be issued Debit Card

![ICICI Bank logo]

## CIB MODE OF OPERATION (Work Flow Matrix - Please ✓ tick mark the appropriate box

**Singly :** ☐ Yes ☐ No          **Jointly :** ☐ Yes ☐ No          **Workflow Based :** ☐ Yes ☐ No
(In Case of this selection please fill the below)          (In Case of this selection separate annexure to be attached)

1. For CIB, the work flow rules would be common for all transaction types.
2. The approvers mentioned should be registered users in CIB.
3. For work flows having more than two approvers, please mention in supporting document.
4. In case of Jointly, both users should have same mode of Operation.

| | | | | |
|---|---|---|---|---|
| **Corporate ID**<br>(existing if any) | Corporate ID | | | |
| **User ID**<br>(existing if any) | Existing User ID | Existing User ID | Existing User ID | Existing User ID |
| **Account No. to be linked to Corporate ID & User ID** | | | | |
| **Maker Name** | | | | |
| **Approver's Name***<br>Please maintain user order for approval (approver should be a user in CIB with same access option)<br><br>Please give approvers name only, do not sign | 1<br><br>2 | 1<br><br>2 | 1<br><br>2 | 1<br><br>2 |
| **Approver Maximum Transaction Limit -**<br>For Tax Payments (in ₹.)*<br>(Not applicable for individuals, proprietors, partnership firms and HUF) | | | | |
| **Approver Maximum Transaction Limit -**<br>For all payments other than Tax (in ₹.)* | | | | |

1) * Not to be filled if the Mode of Operation is as per Board Resolution; Details should match with supporting documents#
2) # Supporting documents: BR/Partnership/LLP/Proprietorship Letter/HUF Letter
3) In Case amount is not mentioned in BR or supporting document then transaction limits mentioned in the form above will be considered
4) In Case Approver Transaction Limit for Tax Payment is blank then this will be considered  same as mentioned in Approver Transaction Limit for all Other Payments
5) In Case Approver Transaction Limit for All Other Payment is blank then this will be considered  same as mentioned in Approver Transaction Limit for Tax Payments
6) If both the limits are not specified, left blank or marked as "unlimited", the default limit will be Rs. 10 lakhs per transaction for users other than companies and Rs. 05 crores for Companies
7) The minimum transaction limit for the user is nil

## DOCUMENTATION APPLICABLE

### SUPPORTING DOCUMENTS

| Type of Product | Channel Registration form | POA Letter | HUF Letter | Board Resolution | Partnership Letter with deed | Limited Liability Partnership Letter with deed | TASC Resolution | Co.Operative Regional Rural Bank Resolution |
|---|---|---|---|---|---|---|---|---|
| Individual | Y | | | | | | | |
| Proprietor / POA | Y | Y | | | | | | |
| Hindu Undivided Family | Y | | Y | | | | | |
| Public Limited Company | Y | | | Y | | | | |
| Private Limited Company | Y | | | Y | | | | |
| Partnership Firm | Y | | | | Y | | | |
| Limited Liability Partnership firm | Y | | | | | Y | | |
| TASC | Y | | | | | | Y | |
| Co-Operative / Regional Rural Banks | Y | | | | | | | Y |

# ICICI Bank

1. This CRF form is applicable to all types of customers - Individual, Proprietor, HUF, TASC, Special Saving Account customers of TASC, Co-operative banks Clients, Partnership Firms LLP and Companies
2. The Customer ID linked to the above account number mentioned will be linked for CIB access. Hence all accounts under the Customer ID will get CIB access

## Account linking for Corporate Internet Banking

The Bank while opening an account, opens the same under a customer ID. The client agrees that the account number specified or such account number that would get allotted pursuant to the request for opening the account, shall be used to identify the client's customer ID and the account linking for CIB would be carried out on the basis of such customer ID. In the event, at any point in time, a customer ID has accounts other than the above referred accounts linked to it, then the user shall be provided access to all such accounts and the Client hereby agrees to such access.

## Declaration

I/We have read, understood and hereby agree to the terms and conditiins as applicable to the banking services selected by me/us for the operations of my/our account as set forth on the website https://www.icicibank.com/managed-assets/docs/terms-condition/CIB_tnc.pdf and that I/we will adhere to all the terms and conditions applicable.

I/We are aware of charges applicable for banking services and I/we further authorize ICICI Bank Limited to debit my/our account(s) towards any charges for the selected banking services.

I/We declare, confirm and agree:

a. That all the particulars and information given in this application form (and all documents referred or provided therewith) are true, correct, complete and up-to-date in all respects and I/we have not withheld any information. I/We understand that certain particulars given by me/us are required by the operational guidelines governing banking companies. I/We and undertake to provide any further information that ICICI Bank Ltd. and its Group Companies may require.
b. That I/we have had no insolvency proceedings initiated against me/us nor have I/we ever been adjudicated insolvent

I/We agree, undertake and authorize ICICI Bank Ltd. / it's Group Companies to exchange, share or part with all the information, data or documents relating to my/our application to other ICICI Group companies /Banks/Financial Institutions/Credit Bureaus/Agencies /Statutory Bodies/ such other persons as ICICI Bank Ltd. / it's Group companies may deem necessary or appropriate as may be required for use or processing of the said information/data by such person/s or furnishing of the processed information/data/ products thereof to other Banks/Financial Institutions/credit providers/users registered with such persons and shall not hold ICICI Bank Ltd./it's Group companies liable for use of this information.

Notes: Only the person authorized by Board can sign on the Form.Board Resolution format is hosted on website as part of requisite form.

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Authorised Signatory
(RUBBER SEAL OF COMPANY REQUIRED)

## For ICICI Bank use only

### To be filled in by Solutions Manager / Branch Staff

Channel Staffware Case ID: .........................................................................................................................................................

Branch/SM Employee Name: ...........................................
.............................................................................................

Branch/SM Employee ID: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

Branch/SM Phone No.: [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

| Sourcing Details | Lead Generator Code | Lead Fulfiller Code | Acquisition Channel Code |
|---|---|---|---|
| [ ][ ][ ][ ][ ][ ][ ] | [ ][ ][ ][ ][ ][ ][ ] | [ ][ ][ ][ ][ ][ ][ ] | [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] |