

Customer ID:

Account No.:

FIELDS WITH * (STAR) ARE MANDATORY

Application No.:

Segment Code

RM / CSE / RO (Code): _____

Account Sourced By (Code): _____

Relationship Form (DCB PayLess Card / Account / Term Deposit)

Branch: _____ Branch Code:

Date: / /

Kindly fill all the details in **CAPITAL LETTERS** only.

"I / We hereby apply for a relationship with your Bank under which I / we will have access to DCB PayLess Card / Account linked to DCB Term Deposit"

(A) Applicant Details

Personal Details*

Existing Customer ID (If Applicable): Staff: Yes No If yes, Employee No.:

First Applicant:

Title First Name Middle Name Surname

Occupation: Salaried Self-employed Self-employed Professional Housewife Retired Student
 Others (please specify):

Short Name: (up to 19 characters)
 (This name would appear on the DCB PayLess Card)

Date of Birth: / / Sex: Male Female Mother's Maiden Name:

Marital Status: Single Married Nationality: Indian Other (please specify):

Permanent Account Number (PAN): (If not available, please fill up Form 60 in this booklet)

Email ID: (Required for e-mail Statement of Account):

Communication Address*:

Flat No. & Bldg / Rd.:

Landmark:

City: State:

Pin: Telephone: STD Code: Res.:

Fax.: Mobile:

Permanent Address*:

Flat No. & Bldg / Rd.:

Landmark: City:

State: Pin: Telephone:
 STD Code:

Res.: Fax.: Mobile:

Joint Applicant Yes No (If Yes, please go to page no.2)

(B) Financial Details / Expected Account Activity*

1. Name of Employer:

2. Designation:

3. Line of Business / Industry: (Please provide details)

4. Monthly Income: Less than ₹ 60,000 ₹ 60,000 - ₹ 1,00,000 ₹ 1,00,001 - ₹ 5,00,000 ₹ 5,00,001 - ₹ 15,00,000 ₹ 15,00,001 and above

5. Source of Funds: Salary Personal Savings / Investment Rental Income Business Income
 Others (please specify)

6. Estimated Net worth (₹): 7. Expected Annual Turnover (₹):

8. Expected number of monthly transactions:

(C) Enrollment for Alternate Service Delivery Channels

Please note that you are being enrolled for the following free services offered by the Bank. However, if you DO NOT wish to avail any / either of these facilities, kindly indicate accordingly with a tick mark in the box against the respective service

DCB Phone Banking DCB Mobile Banking DCB Mobile Alerts DCB Personal Internet Banking

(F) Form 60 (to be filled by those who do not have either PAN or GIR). In case of Agricultural Income, please fill up Form 61 separately.

- Are you a Tax Assessee: Yes No
- If Yes, a) Details of Ward / Circle / Range where the last return of income was filed: _____
b) Reason for not having PAN / GIR No.: _____

I, _____ do hereby declare that what is stated is true to the best of my knowledge and belief.

Verified at _____ this the _____ day of _____ 20

Signature of the declarant

(G) Tax Deduction at Source

TDS to be deducted if applicable: Yes No

If no, TDS Exemption Reference No. _____ (Form 15G / 15H, etc. to be submitted at the beginning of every financial year and while making fresh deposits during the year).

TDS Exemption submission date:

D	D	/	M	M	/	Y	Y	Y	Y
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(H) Credit Facility Details

Type of facility: Overdraft Amount of facility: ₹ _____ (capped to 90% of the Fixed Deposit amount)

Period of facility: 3 years Interest rate: Base Rate (_____) + (_____) = _____ per annum

(I) Declaration

I / We have read and understood the "Terms and conditions as applicable to my / our account" set forth on the Development Credit Bank Limited (the "Bank" or "DCB Bank") website at www.dcbbank.com. I / We accept to be bound by the said terms and conditions and to any changes made therein. I / We understand that access to any changes / update in terms and conditions applicable to this relationship shall be available on the Bank's website only. I / We do hereby declare that information furnished in this form is true and correct to the best of my / our knowledge and belief. I / We confirm that I / We am / are the sole / joint account holder(s) or have the required mandate to operate this account and the facility offered by the Bank in this account. I / We have completed 18 years of age. I / We hereby authorise issuance of DCB Debit / PayLess Card and provision of DCB Phone Banking, DCB Mobile Alerts, DCB Personal Internet Banking, DCB Mobile Banking and Bill Payment Services. I / We are aware of Charges Applicable for various services offered and I / We affirm, confirm and undertake that I / We have read and understood the "Terms and Conditions" and "Disclaimer" for usage of the DCB Phone Banking, DCB Mobile Alerts, DCB Personal Internet Banking, DCB Mobile Banking and Bill Payment Services of the Bank as set forth on the Bank's website www.dcbbank.com and that I / We agree on my behalf, or as the mandate holder on behalf of joint account holders, to adhere to all terms and conditions of opening / applying / availing / maintaining / operating (as applicable) for usage of these services of DCB Bank as may be in force from time to time. I / We further authorise the Bank to debit my / our DCB Card / PayLess Account(s) towards any applicable fees, interest and charges for any / various service / services provided as applicable from time to time and updated on the Bank website www.dcbbank.com and the same need not be intimated to me separately. I / We understand and undertake that the usage of the DCB Debit / PayLess Card shall be strictly in accordance with the Exchange Control Regulation and in the event of any failure to do so, I / we shall be liable for action under the Foreign Exchange Management Act, 1999 and the amendments thereof stipulated by the Reserve Bank of India. I / We further undertake that I / we shall surrender my / our DCB Debit / PayLess Card before proceeding overseas on permanent employment and / or emigrating and / or changing my / our nationality.

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 certain particulars given by me / us are required by the operational guidelines governing banking companies. I / We agree and undertake to provide any further information as and when the Bank may require. (b) That I / we have had no insolvency proceedings initiated against me / us nor I / we have ever been adjudicated insolvent. (c) That I / we have read the application form and brochures and am / are aware of all the terms and conditions of availing finance or service or products from the Bank. (d) I / We agree and understand that the Bank reserves the right to reject any application without providing any reason and reference to me / us. I / We agree and understand that the Bank reserves the right to retain the application forms, and the documents provided therewith, including photographs, and shall not return the same to me / us. (e) To inform the Bank regarding change in my / our residence / employment immediately and to provide any further information as and when the Bank may require from time to time. (f) I / We agree that in the case of joint account, both the applicant and joint applicant are singly and jointly liable for overdraft if any, even if the application cum demand promissory note is signed by the applicant alone. (g) I / We agree, undertake and authorise: The Bank or their agents to make reference and enquiries which the Bank considers necessary in respect of or in relation to information in this application / further applications. The Bank to exchange, share or part with all the information, data or documents relating to my / our application to any other bank / financial institutions / credit bureaus / agencies / statutory bodies and such other persons as the Bank may deem necessary or appropriate as may be required for use or processing of the said information / data by such person(s). (h) I / We agree and understand that I / we have to complete further application for specific liability products / services from the Bank as prescribed from time to time, and that such further applications shall be regarded as an integral part of this application (and vice versa), and that unless otherwise disclosed in such further forms as prescribed, the particulars and information set forth herein as well as the documents referred or provided herewith are true, correct, complete and up-to-date in all respects. (i) I / We agree and understand that such further applications will require incorporation of the application form number, and / or such details as the Bank may prescribe, to facilitate data management. (j) I / We authorise the Bank to issue a Debit cum ATM Card under the DCB PayLess program to me / us. (k) I / We acknowledge that the issue and usage of the DCB PayLess Card is governed by the terms and conditions as in force from time to time and I / we agree to be bound by the same. (l) I / We accept that the terms and conditions of DCB PayLess card are liable to be amended by the Bank from time to time. (m) I / We further unconditionally and irrevocably authorise the Bank, to debit my / our Account annually with an amount equivalent to the fees and charges for use of the DCB PayLess card. (n) I / We, the joint holder(s) hereby authorise the first holder to access the DCB Internet Banking, DCB Phone Banking and DCB Mobile Banking channels as provided for viewing of and transaction from the Account and the First Holder confirms the said appointment. (o) I / We, the Joint Holders, hereby state that if I / we Joint Holder(s), wish to revoke the above authorisation, I / we Joint Holder(s) shall duly issue a letter of revocation ("the Revocation Letter") to the Bank in this regard. I / We hereby agree that such authorisation, as aforesaid, shall come to effect after ten clear working days after receipt of such Revocation Letter (p) I / We, the Joint Holder(s), agree, that in case of death of any or more of the joint depositors, the balance proceeds may be paid, at the Bank's discretion, on request before due date, subject to penal clause for premature payment (as may be stipulated from time to time), as per mode of operations indicated above. (q) I / We also understand that continuation of the account with the Bank is at the sole discretion of the Bank and in case the Bank is dissatisfied with the conduct of the Account, the Bank has the right to close the Account, after giving me / us one month's notice, or withdraw the concessions, into or any service granted to me / us or charge the Bank's applicable rates for such services (r) I / We understand, that the Bank may, at its absolute discretion, discontinue any of the services, completely or partially, without any notice to me / us. (s) I / We agree that on receipt of written application, from any of the Joint Holders and / or Survivor(s) of us, the Bank, at its sole, absolute discretion & subject to such terms and conditions grant a loan / advance against the security of the term deposit(s) issued in individual / joint name(s). (t) I / We accept full responsibility for my / our DCB Debit / PayLess Card and agree not to make any claims against the Bank, in respect thereof. Apart from this, the current Schedule of Charges has been received by me / us and I / we agree with the same.

I hereby consent to be contacted for marketing offers from all/any of the companies/associates/subsidiaries/affiliates thereof under DCB Bank, or any third parties. I hereby authorise any exchange, disclosure, sharing of my information with companies/associates/subsidiaries/affiliates thereof under DCB Bank and third parties. I understand that I will continue to receive account statements, important advices, service and operational alerts and communications critical to my DCB PayLess Card.

I do not wish to be contacted for any marketing offers from any/all of the companies/associates/subsidiaries/affiliates thereof under DCB Bank. I understand that I will continue to receive account statements, important advices, service and operational alerts and other communication including but not limited to communication/contact relating to any outstandings/due or other aspects critical to my DCB PayLess Card.

Signature of Applicant

Signature of Joint Applicant 1

Signature of Joint Applicant 2

(In case of joint account holders, all applicants should sign.)

(J) KYC Certification

I have met Mr. / Ms. _____ Mr. / Ms. _____

and Mr. / Ms. _____ (in case of joint accounts) in person and hereby confirm the identity and

address as filled in the relationship form which has been filled in my presence.

Name of the Bank official authorising opening of the account _____

Employee No. _____

Name & Signature of Bank Official

(K) Nominations Form DA1

Nomination under section 45ZA of the Banking Regulation Act, 1949 and rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of bank deposits.

I / We

Name(s) and address(es) of the depositor(s)

Nominate the following person to whom in the event of my / our / minor's death, the amount of deposit in the account(s) particulars whereof are given below, may be returned by Development Credit Bank Limited Branch.

Nomination for deposit account no. including renewal thereof (only for fresh deposits)

Nominee's Name : _____
Relationship with Applicant : _____
Address (with Pincode) : _____
Date of Birth (only if minor)⁺⁺ : _____

Minor Nominee Guardian Details

Guardian's Name : _____
Relationship with Nominee : _____
Address (with Pincode) : _____

Witness(es)⁺⁺⁺

First Name : _____
Signature⁺⁺⁺ : _____
Address : _____
Place : _____
Date : _____

Signature(s) / Thumb Impression(s) of depositor(s)

Second Name : _____
Signature⁺⁺⁺ : _____
Address : _____
Place : _____
Date : _____

⁺⁺Minor Nominee Guardian details mandatory. ⁺⁺⁺Thumb impression(s) shall be attested by two witnesses & signature will be attested by one witness. All the above fields are mandatory and in absence of any of the above mandatory fields the nomination stands rejected. Nomination: Yes / No (If No, I / We hereby declare that benefit of nomination facility has been explained to me / us and I / We am / are not interested to avail the nomination facility.

(L) Signatures and Photographs

Please affix a recent photograph. Please sign in black ink within the box.

Signature

Signature of Bank official in whose presence signed

Date: / /

Please Paste photo of Applicant and sign across

Signature

Signature of Bank official in whose presence signed

Date: / /

Please Paste photo of Joint Applicant 1 and sign across

Signature

Signature of Bank official in whose presence signed

Date: / /

Please Paste photo of Joint Applicant 2 and sign across

For use at NPC: Opened by _____

Verified by _____ Date _____

Approved by BM / BOM (Name and signature with signature code)

From

To
Development Credit Bank Limited
_____ Branch

Dear Sir(s),

Reg.: DCB Debit / PayLess Card / other credit facilities granted / to be granted to Mr. / Mrs. _____ (“Applicant”)

Development Credit Bank Limited (the “Bank”) has granted / agreed to grant / proposed to issue DCB Debit / PayLess Card up to a limit of ₹ _____ to _____ (Applicant) or such other facility as may be granted by the Bank or availed by the Applicant (hereinafter referred to as the “Credit Facility(ies)”)

I / We hereby state and confirm that I / we are holding the Fixed / Term Deposits to the extent of ₹ _____ placed with the Bank and also placing Fixed / Term Deposits from time to time with the Bank. I / We hereby confirm and undertake that as security / collateral security for the due repayment of the liability arising out of the aforesaid Credit Facility(ies) and the ultimate liabilities due / that may become due to the Bank from the Applicant and / or me / us, in addition to the Bank’s right of general lien and set off, the Bank shall also have right at any time and without prior notice or reference to me / us and without my / our consent to adjust, appropriate, or to set off any credit balance or any part thereof due to me / us in my / our current / savings / any other deposit account or any account whatsoever including the Fixed / Term Deposit Receipt(s) Account No (s) _____ and any other term deposit placed with the Bank in future, at any of the Bank’s branches in my / our name(s) (“Deposit”) with or without joint names of any other persons on or before the dates of maturity thereof towards the satisfaction or part satisfaction of outstanding balance of loan, overdraft / cash credit or of the amounts due to or to become due to me / us or by aforesaid borrower to you in any account including under the Credit Facilities at any of the Bank’s branch / branches whatsoever.

The said deposit shall continue to be available to the Bank as Security as such even if any overdraft facility runs into credit / is reduced or extinguished or the credit facilities are renewed at any time or from time to time and the Bank is authorised to renew the said Deposit without further notice or consent from me / us or the Borrower.

That in case of default or credit facility(ies) not repaid on demand, the Bank may take all necessary steps to prematurely encash the Fixed / Term Deposit to itself or set off or uplift the securities / Fixed or Term Deposits hereby offered or held at any time or transfer / assign or reassign the same considered to be reasonable by the Bank and appropriate the net amounts towards discharge of all my / our liabilities in the account(s) with the Bank in any of its branch(es). Should there be any shortfall, I / we hereby undertake and promise to pay the same along with interest at the rate specified in the DCB Debit / PayLess card application / sanction, on demand by the Bank without any demur and pretest and the Bank may reserve its right to initiate appropriate proceedings against me / us for recovery of its dues from me / us.

The security held on the terms of the Letter shall act as continuing security for ultimate balance of all monies that may be due from me / us, from the Applicant to the Bank. Neither the said security nor this Letter shall be considered as terminated by reason only of the repayment of any particular Credit Facility or by any change in the constitution or by death / retirement (in case of partnership) or otherwise and shall be fully binding on my / our legal representatives, heirs, executors, administrators and assigns.

Fixed Deposit Holder 1

Place _____

Date:

D	D
---	---

 /

M	M
---	---

 /

Y	Y	Y	Y
---	---	---	---

Fixed Deposit Holder 2*

Place _____

Date:

D	D
---	---

 /

M	M
---	---

 /

Y	Y	Y	Y
---	---	---	---

Fixed Deposit Holder 3*

Place _____

Date:

D	D
---	---

 /

M	M
---	---

 /

Y	Y	Y	Y
---	---	---	---

*To be signed in case of a Joint Fixed Deposit with mode of operation as “Joint”



ACKNOWLEDGEMENT

Sr. No.

Branch Name:	Customer ID:	
Applicant’s Name:		
Account Number:		

Signature of the Sales Executive: _____ Date:

D	D
---	---

 /

M	M
---	---

 /

Y	Y	Y	Y
---	---	---	---

(Customer to retain this acknowledgment for future reference till the account is activated)

Balance Transfer facility at 24% p.a. and waiver of 2% processing fee.

YOU SAVE

- More than 12% p.a. on the interest rate compared to your existing credit cards.
- Waiver of 2% processing fee on balance transfer amount

Date: / /

To
The Manager,
Development Credit Bank Limited.

Dear Sir,

I / We request Development Credit Bank Limited (the 'Bank'), to transfer the outstanding balance from my / our other Bank Credit Card, as per the details given below, to my / our DCB Debit / PayLess Card. Details of my / our other Bank's Credit Card from which the transfer is to be effected are:

Card Number

Expiry Date: / /

Name of the Issuing Bank (As shown on the other bank's Credit Card) _____

Amount to be transferred: ₹ _____

In words: Rupees _____

(to be more than ₹ 5,000 and less than or equal to 80% of the Fixed deposit amount linked to the DCB PayLess Account)

IFSC Code _____ (for NEFT transfer)

Branch Details _____

I / We enclose:

Self attested photocopy of the latest card statement (not more than 45 days old) of the other bank's Credit Card.

Signature of the Cardmember

Terms and Conditions

1. DCB Debit / PayLess Card member may make a single or multiple requests for Balance Transfer from one or many card issuing banks subject to the available credit limit assigned by the Bank to the cardmember, subject to the facility being available at that time.
2. The Balance Transfer request shall not be processed for amounts less than ₹ 5,000 or amounts greater than 80% of the Fixed Deposit linked to the DCB PayLess Account (or such amount as prescribed from time to time).
3. The Bank will transfer the funds to the credit card account(s) of the cardmember's bank through NEFT. It will be the cardmember's responsibility to provide the correct IFSC code and other details for a successful transfer.
4. The DCB Debit / PayLess account will be debited with the amount of balance transfer, at the prevailing rate of finance charges.
5. Cardmember(s) will be responsible to pay the finance charges levied on them by the issuing bank on account of payment of any dues that may be transferred to the card account along with the Balance Transfer.
6. The Bank may, at its sole discretion accept or reject the application form without assigning any reason whatsoever.
7. The Balance Transfer facility will be governed by the terms and conditions mentioned in the cardmember's agreement.
8. For customers who have signed up for a Balance Transfer at the time of application for a DCB Debit / PayLess Card, the Balance Transfer is subject to the DCB Debit / PayLess Card account opening on receipt of complete documentation. Any delay in completing the account opening formalities would lead to a delay in the Balance Transfer from the other bank card, for which the Bank will not be responsible.
9. The cardmember shall continue to make payments to the other issuers from which the transfer is to be effected until a confirmatory letter of approval



DCB 24-Hour Customer Care

Email customercare@dcbbank.com

Call 3281 1322 ■ Toll Free 1800 209 5363

Website www.dcbbank.com

DCB BANK