CUSTOMER SERVICES MENU

AU SMALL FINANCE BANK

Date D D M M Y Y Customer ID Branch Name_____ Branch Code (For office use only)

Customer Name PREFIX FIRST MIDDLE LAST NAME

A/c No. **OR** Loan A/c No.

SELECT INSTRUCTION(S)

Please tick the relevant box

1. **Account Statement :** from D D M M Y Y to D D M M Y Y
2. **TDS Certificate** for F.Y -
3. Above mentioned account number's **Interest Certificate** for F.Y -
4. Above mentioned account number's **Balance Confirmation Certificate** D D M M Y Y

SERVICING INSTRUCTION(S) : ASSETS

1. **Repayment Schedule**
2. **Part Prepayment**
3. **Welcome Letter / sanction letter**
4. **Repayment Mode Change / Swapping**
5. **Foreclosure statement**
6. **RPDC/ACH/SI Submission**
7. **Foreclosure Payment**
8. **List of Documents/Property Papers submitted**
9. **Loan Closed - NOC/Property Papers not received**
10. **Refund issuance of excess amount**
11. **Duplicate NOC**
12. **NOC Special Case : Without removal of hypothecation**
13. **Change in EMI/ ROI**
14. **Change in Demography Details (Registered Mobile number)**
15. **Any other instruction : Please specify:** _____

SERVICING INSTRUCTION(S) : ACCOUNTS & DEPOSITS

1. **Signature Verification** required on enclosed document
2. **Stop Payment :** Cheque No. _____, Date of Cheque (If Any) D D M M Y Y Amount
   Beneficiary Name _____ Reason for Cheque stop payment _____
3. **Dormant/Inactive Account Activation** Reason for Dormancy _____
4. **Issue Passbook** for my/our Account
5. **Debit/Credit Advice :** D D M M Y Y Amount
6. **Duplicate Advice :** Term Deposit Recurring Deposit
7. **Account transfer:** from branch to branch Existing Branch Name:_____ to New Branch Name:_____
   Customer ID transfer required to the above branch Yes No If yes, then Customer ID _____
8. **Sweep-in :** TD to be linked
9. **Premature withdrawal/closure of TD/RD** A/c No.
   Credit the proceeds into A/c No. mentioned above Issue DD in favour of the deposit holder(s)
   RTGS / NEFT Account No. _____ Bank Name _____ IFSC Code _____
10. **Issue Debit Card :** First Card Replacement Card (Old Card No. Last 4 digits
    Card Replacement Reason Card Lost Card Damaged Product Changed Short Name FOR NEW CARD
    Salutation is not to be included.
11. **Standing Instruction** to be set on account number mentioned above for INR . Nature of Standing Instruction Funds Transfer NEFT RTGS
    Beneficiary Details: A/c No. IFSC Code Account Type : Resident Non-Resident
    Description appearing in your account
    Frequency Daily Weekly Fortnightly Monthly Quarterly Half Yearly Yearly
    Beneficiary Mobile Number CODE NUMBER Start Date (min. 3 days from instruction date) D D M M Y Y End date D D M M Y Y
12. **Channel Access Instruction :** (Please select - FOR ALL CHANNELS : <'**B**'-Block> <'**UB**'-Unblock> <'**DA**'-Deactivation> <'**RP**'-Reissue Password> . FOR DEBIT CARD ONLY : <'**PIN**'-Reissue PIN> <'**PB**'-Permanently Block Card> <'**TB**'-Temporarily Block Card>)

    Account Type Savings Account Current Account Overdraft Account

    If Current Account, specify: Authorised signatory 1 Customer ID (Auth. 1)
    Authorised signatory 2 Customer ID (Auth. 2)
    Authorised signatory 3 Customer ID (Auth. 3)

    Debit Card Number (if applicable)

Channels	Individual	Auth.1	Auth.2	Auth.3
Internet banking - transaction rights				
Internet banking - view rights				
Phone banking				
Mobile banking				
Debit card				

13. **Account holder(s) related Instruction :** Details of Account holder(s) to be added/deleted :

Addition	Deletion	Customer ID	Customer Name
			Prefix First Middle Last Name
			Prefix First Middle Last Name
			Prefix First Middle Last Name

New Mode of Operations Same as before Singly Jointly Either or Survivor Anyone or Survivor Former or Survivor Latter or Survivor

Cheque Book Issue with new names Unused cheques enclosed (Serial No. _____ to _____) Confirmation of having destroyed unused cheques

Debit Card (In case of deletion of A/c holder only) Concerned A/c holder's Debit Card enclosed Confirmation of having destroyed concerned account holder's Debit Card

13.a. Consent for Premature repayment of Fixed / Term Deposit - Applicable for Accounts with Operating instructions - Either or Survivor / Anyone or Survivor / Former or Survivor / Later of Survivor to the Account No. _____

This clause is applicable in the event of death of any of the joint depositors prior to the maturity of the deposit.

- I/ We wish to allow premature repayment of the fixed / term deposit having operating instructions as "Either or Survivor", "Anyone or Survivor", "Latter or Survivor" or "Former or Survivor" in line with this survivor clause instructions of the deposit. (Please note that this clause is valid only when all the joint account holder consent to the Account opening).
- In case of joint fixed / term deposits having operating instructions as "Either or Survivor", "Anyone or Survivor", "Latter or Survivor" or "Former or Survivor", the Bank shall repay the deposits before the maturity of the deposit/s in case such an instruction is received in accordance with this survivor clause instructions of the respective deposit/s, along with relevant documents as may be specified by the Bank from time to time.
- Any such repayment before maturity shall constitute a valid discharge of the Bank's obligations against all concerned including but not limited to the nominee / legal heirs of the depositors or anyone claiming under them.

Thumb impression / Signature of First Applicant | Thumb impression / Signature of Second Applicant | Thumb impression / Signature of Third Applicant

Name_____ **Name**_____ **Name**_____

Tear Off **Please Turn Overleaf for Declarations & Signature(s)** Tear Off

AU SMALL FINANCE BANK LTD. CUSTOMER ACKNOWLEDGMENT SLIP - CONSOLIDATED CUSTOMER INSTRUCTION FORM (for Bank use)

Received From _____ A/C No.

Service Instruction No. _____ Service Instruction Details _____

Date D D M M Y Y

Branch Name & Stamp

Signature of Bank Official

SERVICING INSTRUCTION(S) : ACCOUNTS & DEPOSITS

14. LEI (Legal Entity Identifier) Valid upto: _____

15. Register for digital statement frequency Daily Bi-Monthly Monthly Yearly Note: Once opted for digital statements, physical statements to be discontinued

16. Account Conversion Product code from to Account Conversion Product name from _____ To _____ *For any program related changes (ivy/Royale/ Platinum) program form to be obtained.*

17. TDS Deduction from CASA for FDs held under Cust ID _____ Account No. for deduction_____ (Deduction applicable for FDs held as primary holder)

18. Any other instruction(s) : _____

SELECT DETAIL(S) TO BE MODIFIED

Please tick the relevant box

I/ We instruct AU Small Finance Bank Ltd. to update the below mentioned detail(s) across all my/ our relationship(s) with the Bank.

Section I - Personal Details

PAN

Name as per PAN PREFIX FIRST MIDDLE LAST NAME

DOB as per PAN DDMMYYYY Date of Birth DDMMYYYY Title

New Name of Applicant PREFIX FIRST MIDDLE LAST NAME

***Are you differently abled?** Yes No *If Yes, Disability Type _____ *Percentage of Disability *UDID Number

(To be mentioned from UDID)

Section II -Contact / Address

Mobile No. ISD

Landline No. CODE NUMBER

Email ID

I hereby confirm that I am holding the afore-mentioned banking relationship . I hereby confirm that my new mobile number may be updated in the Bank's records for sending any communication related to my mentioned banking details as well as transaction details. I also authorize the bank to contact me on the number provided for doing verification checks / call backs to confirm the veracity of any transaction, as deemed fit by the bank. I confirm that the said mobile number is held by me and is not in use by any other third party. I undertake that I shall duly and promptly inform the Bank if and when my mobile number changes.

Address Type of Address Communication Permanent / Registered

*Address Line 1

Address Line 2

Address Line 3

*Landmark

*District *City

*State *PIN Code Country

Section III - Signature Modification

Old Signature specimen of applicant (as per Bank records)

New Signature specimen of applicant (to be updated)

NOTES & DECLARATIONS

FOR PASSBOOK : I/We instruct you to issue a Passbook (First/Duplicate for above Account Number). I/we understand that the facility of getting account statement may be discontinued for passbook registered customer. I/We have read and agree to be bound by the Terms & Conditions of the Bank. I/we understand that there is a charge applicable for duplicate passbook issuance which would be debited to the Account number mentioned above

FOR ADHOC STATEMENT
For Adhoc statement at branch, the statements would be sent digitally to the customer's registered email id. Physical is sent only in case of bounced /no email statement. For duplicate statement requisition, charges are applicable as per SOC.

FOR DIGITAL STATEMENTS
Physical statement gets discontinued on registration of Digital statements. However, in case of undelivered Digital statements, physical statement would be sent half yearly.

FOR DEBIT CARD
In Joint MOP cases, Debit Card will not be issued to any holder.
Debit Card will not be issued to minors (below 10 years of age on date of card issuance).
I, am holding an Ivy, Eternity, Royale, or Platinum Savings Account or Current Account with sole ownership, or a Sole Proprietor Current Account, hereby instruct and consent to be enrolled in the 'M' circle program - exclusively designed for women customers. For more details visit https://www.au.bank.in/personal-banking/exclusive-offerings/m-circle .

FOR PREMATURE WITHDRAWAL/CLOSURE OF TERM DEPOSIT : I/We understand that as per the bank's process the customer needs to surrender the original/renewed TD advice. However, and if applicable, I/we are in immediate need of the funds and hence instruct you to process the instruction for closure of the captioned account pending receipt of the renewed TD advice. I/we hereby agree and undertake that on receipt of the renewed advice already dispatched to me/us, I/we shall destroy the same at our end. This instruction for liquidation of the above referred TD would discharge the bank of the liability on the said fixed deposits towards me/us and I/we will have no right of any claims on the bank on the said term deposit. The interest rate applicable for premature closure will be lower of the base rate of the original/contracted tenure for which the deposit has been booked or the base rate applicable for the tenure for which the deposit has been in force with the bank. The base rate is the rate applicable to deposits of less than INR 1 crore as on the date of booking the deposit. For deposit more than INR 5 crore the base rate is the rate applicable for INR 5 crore deposits as on the date of booking of the deposit. For such premature withdrawals including sweep-in, the bank can levy a penalty as per the applicable rates. **Note :** Premature withdrawal instruction of the term deposit needs to be signed by all deposit holders. Please note that for the services required, charges may apply. Please refer the applicable Schedule of Charges

FOR STANDING INSTRUCTIONS (1) I/We undertake to keep sufficient funds in the funding account on the date of execution of the standing instruction. (2) I/We hereby authorize the Bank to debit my account & execute the standing instruction as per instruction provided above. (3) I/We authorize the bank to debit my account for the standing instruction set-up or execution charges as per laid down tariff & fees of the bank. (4) I/We understand that a maximum of 3 attempts shall be made to execute the standing instruction; after which no further action shall be taken. (5) I/We understand that the Bank will not be held responsible for execution of standing instruction/s in case of changes to the operating mandate in the future, unless specifically communicated in writing by me/us. (6) I/We understand the standing instructions shall automatically expire on the "End Date" as given above. (**NOTE:** In case of "Joint" operating mandate, all a/c holders need to sign)

FOR ALL CHANNEL ACCESS INSTRUCTIONS : I/We declare that the above mentioned details are true and correct and the Bank is entitled to carry out the necessary verification before issuing the applicable Debit Card to me. I/We also declare that I/We have read and understood all of the necessary terms and conditions, charges, default limits, card variant, usage conditions etc... pertaining to the Debit Card applicable as per my account variant as well as of the services selected, and agree to abide by the same. I also declare that if there are any pending charges that I am liable to AU Small Finance Bank Ltd. due to my previous Debit Card (if applicable), the same can be collected from the account details mentioned above. AU Small Finance Bank Ltd. reserves the right to reject this application for the non-compliance of reasons stated above or any other verification based reason. I/We authorise the Bank to I/we hereby authorize the Bank to debit my/our Deposit Account(s)towards Service Charges (as per the applicable SOC) + Service Tax, as shall be applicable from time to time. The mobile number and e-mail address registered with the Bank will be used for all alerts sent by the Bank. Please note that mobile banking will be available by default for all customers registered for net banking or having a debit card. Customers having Deposit Account(s) with joint mode of operation will get only view or enquiry rights on Net Banking, Mobile Banking and Phone Banking and will not get Payment Gateway facility. All existing account(s) or to be opened in future will be linked to the Debit Card/Payment Gateway. Specific written instructions are required for delinking any account(s). This form should be accompanied with the Resolution of the Board / Managing Committee in case of Limited Companies, Trusts, Societies, Associations and Clubs. In case of partnerships, declaration letter duly signed by all the partners/ Distinct Board / Managing Committee Resolution and Partnership Letter is to be provided for each Deposit Account, as applicable. In case of Partnerships, Limited Companies, Trusts, Societies, Associations, and Clubs, person(s) with conditional mode of operation / authority will get only non-financial transactions on Net Banking / Mobile Banking and Phone Banking and will not get Payment Gateway access. In case of Authorized Signatories, all signatures should be accompanied by proper seal of the organization, as applicable. In case of Partnerships, Limited Companies, Trusts, Societies, Associations, and Clubs, Debit Cards will be issued only to person(s) with unconditional mode of operation / authority. Proprietor of a Proprietorship concern and Karta of an HUF will get both financial and non-financial transactions on Net Banking / Mobile Banking and Phone Banking. They are also eligible for Debit Cards and Payment Gateway access. Payment Gateway facility is provided as per the terms and conditions of the Bank and regulatory guidelines as applicable from time to time. The customer reiterates that he shall be governed by the applicable terms and conditions of the Bank. Bank reserves the right to modify these offerings with/ without prior notice.

FOR ADDITION & DELETION OF ACCOUNT HOLDER(S) : (1) The first / primary account holder cannot be deleted. (2) Addition of account holders is subject to the Bank's documentation requirements being fulfilled. (3) In case of minor, guardian to sign
I/We agree to the deletion as above. I/We hereby confirm that all other existing instructions shall remain the same. I/We understand that the terms of the account remain the same. I/We have read and understood the Terms and Conditions governing opening of an account with AU Small Finance Bank Ltd. and those relating to various services including but not limited to (a) ATMs (b) Phone Banking (c) Debit Card (d) Net Banking. I/We accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I/We understand the Bank may at its absolute discretion, discontinue any of the services completely or partially without any notice to me/us. I/We agree that the Bank may debit my/our account for any service charges as applicable from time to time. I/We hereby declare that the information furnished above is true and correct to the best of my/our knowledge.

FOR ALL CUSTOMER DETAIL(S) MODIFICATION INSTRUCTIONS :

(a) PAN updation instruction will be processed provided your Name and Date of Birth in our record matches with the official NSDL website.
(b) An e-mail alert on the status of your instruction would be sent at your registered e-mail ID.
(c) I hereby confirm that I am holding the afore-mentioned banking relationship . I hereby confirm that my new mobile number may be updated in the Bank's records for sending any communication related to my mentioned banking details as well as transaction details. I also authorize the bank to contact me on the number provided for doing verification checks / call backs to confirm the veracity of any transaction, as deemed fit by the bank. I confirm that the said mobile number is held by me and is not in use by any other third party. I undertake that I shall duly and promptly inform the Bank if and when my mobile number changes.
(d) Signature of account holders must match the signature as per bank records. In case of mismatch in Signature, fill the Signature updation form
(e) The mentioned changes will be effective within 7 working days from date of instruction
(f) Please note that in the absence of contact details in our records, the above mentioned contact details will be updated in the Bank records
(g) In case you are able to replicate your old signatures, no proof of old signatures is required
(h) In case you are unable to replicate your old signatures, we advise you to submit one of the following documents:
(i). Any government issued self-attested photo identity document (Driving licence, PAN Card etc...) bearing the new signatures having a seal / stamp of a Government authority as a proof of the new signatures, duly attested by an Authorised Banker, Notary or the Indian Embassy. The signature on this form should match the signature on the concerned document
(ii). Declaration stating that "I hold an account with AU Small Finance Bank Ltd. Ltd., (name of city) branch and am unable to replicate my signatures. Kindly attest my signatures.", should be attested by an Authorised Banker, Notary or the Indian Embassy. The Authorised Banker/Notary/Indian Embassy can mention "verified with records" / "signed in my presence" / "signature verified" or equivalent
(iii). If self-attested copy of the Passport is notarized, the same can be submitted as proof of new signatures
(i) An email alert will be sent to the registered email id regarding the Signature change instruction
(j) Signature change instruction cannot be processed through an email instruction
(k) Please submit one of the below mentioned self-attested documents as proof of name change:
Self-attested marriage certificate with Marriage Registrar Seal or attested copy of Gazette for name change, reflecting old name and the new name
(l) I/We agree to update my email ID/contact numbers/ PAN mentioned above in the bank's records for any further correspondence
(m) I/We agree that if my account mentioned above is dormant/inactive, it will be activated on the basis of this instruction form.
(n) I/We agree that in case my/our Passport details are not available with the bank, photocopies of my/our passports submitted with this application will be used to update the records.
(o) I/We declare that all the details provided on the above form are correct and I/We undertake to inform the Bank of any subsequent changes in the above information including documents provided or KYC details within 30 days of such updates.
(p) I/we hereby confirm that for mobile number being deleted from my/our cust id, Bank will disable Ecom, Pos, Net Banking and Mobile Banking transactions rights.
(q) I/ we understand that my / our details/ credentials declared in this form will be updated in all the existing relationships(if any) with AU Small Finance Bank Limited. I/ we confirm that, there are no other change(s) in my / our KYC information apart from the change(s) instructed in this form.
(r) I/We hereby agree that we have read and understood the terms and conditions and instructions available at www.au.bank.in
(s) I/ We have been explained the terms & conditions for opening and operating the account along-with the facilities/ features available with this account".
(t) I/we hereby declare that I/we do not hold any Basic Savings Bank Deposit (BSBD) account(s) with AU Small Finance Bank or with any other bank, whether singly or jointly. I/we undertake to immediately inform the Bank if I/we open, or am/are found to have opened, any additional BSBD account(s) elsewhere.. I/we acknowledge that, in order to ensure compliance with applicable regulatory instructions, the Bank may, after giving due notice, take necessary steps including placing restrictions or closing any additional BSBD account(s), in accordance with RBI directions.
(u) **For TDS deduction from Current / Savings Account:**
1. I/ we hereby confirm that any balance from overdraft / linked sweep-in FD will not be considered for TDS recovery.
2. I/ we hereby instruct, in case of insufficient balance in Savings / Current account for TDS recovery, the shortfall amount if any will be recovered from FD. (FD having nearest date of compounding / payout cycle when recovering the TDS)
3. I / we hereby instruct, TDS recovery from Savings / Current account will be applicable for all existing and new FDs being booked in future.
4. I / we hereby instruct, in case of any manual recovery of TDS, bank reserves the right to recover the same from Savings / Current accounts held with the Bank.
5. I / we hereby instruct, in case of death of primary holder of FD, TDS will continue to recover from linked Savings / Current account, until instructed for modification by the claimant.
6. The TDS recovery from Savings / Current account is only applicable for Individuals only.

(v) **With regard to Name and/or Signature change instruction, if applicable, I/We confirm that:**
1. All cheques issued by me/us with the old signatures have been paid
2. All PDCs/ECS mandate issued with the previous signatures shall be cancelled by me/us and re-issued with the new signatures
3. Cheques drawn with the previous signatures, if presented in future, will be returned by the Bank
4. All cheques collected and paid in the future by the Bank in this account will be drawn in the same name / style / new signature as given in this format
5. I/We agree that any of my account(s) mentioned in the Customer ID is/are dormant/inactive, it will be activated basis this instruction form
6. LEI is a mandatory requirement for all non-individual remitters / beneficiary for NEFT and RTGS transaction of Rs 50 cr and above.

Thumb impression / Signature of First Applicant | Thumb impression / Signature of Second Applicant | Thumb impression / Signature of Third Applicant

Name_____ **Name**_____ **Name**_____

BANK USE SECTION

Declaration by Bank Official – I Confirm

I hereby certify that the customer's signature has been verified from Bank's records and is as per the operating mandate.

Connected with Customer on registered Mobile No _____ @__:___ AM/PM

Original Seen and Verified Customer Signed in my Presence.

UDID (applicable for Differently Abled)

Acknowledgement and service instruction no. provided.

Form Collected & verified by:
RM MO CSE CSM | Employee Code: _____
Employee Name _____
Signature _____

Form Approved by BM BOSM | Employee Code:_____
Employee Name _____
Signature _____

Version 3.5 March 2026

Tear Off

Tear Off