

ONBOARDING OF CUSTOMER SERVICE POINT (CSP)

CSP code* : Service required* : DMT AEPS Indo-Nepal Remittance
 Device Information (for AEPS) IMEI no. : Type :
 Entity Type* : Sole Proprietor Partnership Firm Individual

APPLICANT/CSP INFORMATION

1. Name of applicant / CSP* :
 2. Gender* : Male Female Transgender
 3. DOB* :
 4. Father Name* :
 5. Spouse Name :
 6. Category : General OBC SC ST
 7. Physically Handicapped : YES NO
 8. Highest Edu. Qualification* : Under 10th 10th 10th 12th Graduate Post Graduate Others
 9. a. Course* : IIBF Advance IIBF Basic Certified By Bank None
 b. Institute Name :
 c. Date of Passing: (9b & 9c to be filled only if any course selected)



10. Name of Establishment:
 11. Business Location Address (Operational areas)* :
 Country* : I N D I A PIN Code* : Tel no.:
 Mobile number* : Email* :
 Proof of Address : Shop License Rent Agreement Telephone Bill Electricity Bill Others (specify)
 ID number : Expiry Date :

12. Residential address* :
 Country* : I N D I A PIN Code* : Tel no.: Mobile no.*:
 Proof of Address : Voters ID Aadhaar Card Telephone Bill Drivers License NREGA Card Passport Electricity Bill
 ID number : Expiry Date :

13. a. Alternate Occupation Type* : Government Public Sector Self Employed Private Other None
 b. Alternate Occupation Description: (if selected others)

14. Aadhaar Card Number :
 15. PAN No.* :
 16. Operating Time* : From 0 8 0 0 TO 2 0 0 0
 17. Weekly off* : Day : None

18. Device Name* : Laptop Hand Held
 19. a. Connectivity Type* : LandLine Mobile VSAT
 b. Provider:

20. If you are having similar arrangement with any other Bank, Society or Business Correspondent please provide relevant details:

21. Banking information* : Bank: A/c type:
 Ac No: IFSC code:

* Fields with asterisk are compulsory to be filled in.

I. DECLARATION

Applicant / CSP	Partner
<p>I _____</p> <p>hereby declare that all the statements made by me in this application form are true and complete to the best of my knowledge. I also declare that signature below belongs to me</p> <p>Applicant/CSP signature* _____</p> <p>Name* : _____</p> <p>Date* : <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/></p> <p>I request you to appoint me to act as a Customer Service Point in the location of _____</p>	<p>I've met applicant/CSP and the originals of all documents produced have been seen & verified by me.</p> <p>Signature of the Partner (with official seal) _____</p> <p>Name: _____</p> <p>Date: <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 15px; border: 1px solid black;" type="text"/></p>

- II. I hereby submit following declarations as an applicant/CSP of _____ who is a Business Correspondent of RBL Bank Ltd.
- a. I have not been found/pronounced to be of unsound mind by any competent authority and declared/adjudicated as insolvent by any competent court;
 - b. I have not been found guilty of any criminal offence by any court of competent jurisdiction;
 - c. I have neither been found guilty of any criminal offences in the course of any investigation nor have I participated in or connived at any fraud, dishonesty or misrepresentation against anyone .
 - d. I have not violated the code of conduct of any bank or declared a willful defaulter by any bank or/financial institution.
 - e. I promise not to share the customer details with others and use only for the purpose of canvassing business of RBL Bank Limited.
 - f. The RBL Bank Limited Business Facilitator/Business Correspondent scheme shared by _____ has been read by me and I/We accept the same as binding upon me.
 - g. I hereby declare that all the information provided is true and correct to the best of my knowledge and belief. I understand that my application is liable to be rejected if it does not satisfy internal verification of the Bank as per the Bank norms. Notwithstanding anything contained in this declaration, RBL Bank may in its sole discretion terminate the CASH POINT business from the above location as and when RBL Bank deems fit.
 - h. I have all the necessary permission and I am legally allowed to do business at the above mentioned address/premises.
 - i. I hereby irrevocably and unconditionally undertake to indemnify and keep the RBL Bank indemnified against all or any loss, damage, cost, expenses, penalties and charges that may be incurred by and/or caused to RBL Bank arising out of appointing (Name of CSP) as a Customer Service Point of RBL Bank.

Yours faithfully,

Signature of the Applicant* _____ Date: _____

Name _____ Place: _____

FOR PARTNER USE / LOCAL INTELLIGENCE FORM

- a. Applicant(s) interviewed for the purpose of approving the applicant(s) to act as Business Facilitator/Business Correspondent on _____
- b. Particulars of identification verified with the originals and copies obtained :
 KYC Documents (Submit self-attested documentation proof for one of each of three below)
 Identity Proof: Passport, Pan Card, Voter ID, Aadhaar Card, Driving License, Others (specify) _____
 Address Proof: Passport, Voter ID, Aadhaar Card, Driving License, Latest Bank Statement, Latest Electricity Bill, Others (specify) _____
 Shop & Establishment form : Yes / No _____
- c. I/we have met the above CSP in Person and visited the establishment. I/we hereby confirm the Identity of CSP and address of establishment mentioned in this form is as per the documents submitted by the CSP. CSP has necessary permission and legally allowed to conduct business in premises mentioned above.
- d. I/we have done thorough due diligence of above specified CSP and shall be liable to indemnify RBL Bank and its officials from any unforeseen events and consequences arising due to CSP not having valid permission to run its business including but not limited to business registration certificate such as 'Shop and Establishment License' etc.
- e. CSP is operating this business for last _____ months/Years and have been found suitable to conduct the RBL Bank CASH POINT business form the above mentioned location.

Signature of the Partner (Official) _____

Name: _____ Designation: _____ Employee ID no: _____

Date: _____

To,

The Manager
Prabhu Money Transfer
New Delhi

Subject: Request for registration of CSP ID _____ with Prabhu Money Transfer.

Dear Sir/Ma'am,

This has reference to my CSP registration request attached with this letter. I am currently working with _____ and now I want to activate my CSP ID here _____. I would request you to make necessary changes to activate my CSP with the company on an immediate effect basis.

In case required, I authorise Prabhu Money Transfer to cancel all my existing CSP IDs registered with other partners.

Regards

SIGN HERE

Name:

Mob No.: