

## CUSTOMER SERVICE POINT (CSP) REGISTRATION FORM

CSP Code:

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Applicant's recent  
Photograph

Nearest RBL Branch: \_\_\_\_\_

### A) APPLICANT INFORMATION

1. Name of Applicant:

\_\_\_\_\_

2. Gender  Male  Female

Education: \_\_\_\_\_ DOB: \_\_\_\_\_

3. Name of the Establishment:

\_\_\_\_\_

4. Outlet Address:

\_\_\_\_\_

Landmark: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

PIN \_\_\_\_\_ Tel no: \_\_\_\_\_ Mobile number \_\_\_\_\_ E-mail \_\_\_\_\_

Rented/Owned: \_\_\_\_\_

Years in Location(Proof to be attached): \_\_\_\_\_

(If CSP is an existing retailer of Oxigen for more than 6 months, then no proof required for verifying 'Years in Location').

5. Residential address:

\_\_\_\_\_

Landmark: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

PIN \_\_\_\_\_ Tel no: \_\_\_\_\_ Mobile number \_\_\_\_\_ E-mail \_\_\_\_\_

Rented/Owned: \_\_\_\_\_ Years in Location: \_\_\_\_\_

6. Reference 1: ( Name, Address, Contact Details)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Reference2: (Name, Address, Contact Details)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Business Information:

Description of services at present Outlet: \_\_\_\_\_

Applicant PAN no. \_\_\_\_\_ No. of people working at outlet: \_\_\_\_\_

Nearest Bank name: \_\_\_\_\_ Location: \_\_\_\_\_

Operating Hours: \_\_\_\_\_ Weekly off: \_\_\_\_\_

If you are having similar Arrangement with any other Bank, Society or BC please provide relevant details: \_\_\_\_\_  
\_\_\_\_\_

9. PAN No : \_\_\_\_\_

10. Banking information

A/c with bank \_\_\_\_\_ A/c type \_\_\_\_\_

A/c No: \_\_\_\_\_ IFSC Code \_\_\_\_\_

**B) KYC DOCUMENTS( submit self-attested documentation proof for one of each of three below)**

**Identity Proof**

- Passport
- PAN Card
- Voter ID Card
- Adhaar Card
- Driving License
- Other (Specify)

**Address Proof**

- Passport
- Voter ID Card
- Adhaar Card
- Latest Bank statement
- Latest Electricity Bill
- Diving License
- Other (Specify)

**Signature Proof**

- Passport
- PAN Card
- Driving License
- Bank attested signature
- Other (Specify)

**Declaration:**

I \_\_\_\_\_ hereby declared that all the statements made by me in this application form are true and complete to the best of my knowledge.

Applicant’s signature (with seal)

Authorized signatory (BC)

Name : \_\_\_\_\_

Name: \_\_\_\_\_

Date : \_\_\_\_\_

Date : \_\_\_\_\_

I /We request you to appoint me/us to act as a Business Facilitator/ Business Correspondent for a period of one year from \_\_\_\_\_to \_\_\_\_\_in the location of .....

**Declarations**

I am hereby submitting following declarations as an applicant of Business Correspondent Agent of Ratnakar Bank Ltd.

- I. I have not been found/pronounced to be of unsound mind by any competent authority and declared/adjudicated as insolvent by any competent court;
- II. I have not been found guilty of any criminal offence by any court of competent jurisdiction;
- III. I have not been found guilty of or to have knowingly participated in or connived at any fraud, dishonesty or misrepresentation against a banker or an insured in the course of any judicial proceeding relating to any bank or in the course of an investigation of the affairs of a Banker.
- IV. I have not violated the code of conduct specified of any bank or declared a wilful defaulter by any bank or/financial institution. – I promise not to share the customer details with others and use only for the purpose of canvassing business of The Ratnakar Bank Limited.
- V. The Ratnakar Bank Limited Business Facilitator/Business Correspondent scheme has been read by me and I/We accept the same as binding upon me.
- VI. I hereby declare that all the information provided is correct to the best of my/our knowledge and belief.
- VII. I understand that my application is liable to be rejected if it does not satisfy internal verification of Bank as per the Bank norms.

Yours faithfully,

Signature of the Applicant

Name:

Date:

Place:

**FOR CORPORATE BC'S USE**

1. Applicant(s) interviewed for the purpose of approving the applicant(s) to act as Business Facilitator/Business Correspondent on .....

2. Particulars of identification verified with the originals and copies obtained (As per Bank's KYC policy)

3. Recommendation

Signature of the BC Official.....

Name .....

Designation.....

Employee ID No.....