Credit Card Application Form

LIC CARDS | IDBI BANK — Bank Aisa Dost Jaisa

Please complete all sections in BLOCK LETTERS ☑ Boxes where appropriate and write N.A. if not applicable.
Fields marked with (*) are mandatory.

Card Applied For ☐ Eclat ☐ Lumine

1. For Bank Use *SOL ID *Source Code 4 0 0 0 0 *Application Date *Plastic Code
*Promo Code *Product Code *Fee Code *Risk Category

2. For LIC-CSL Use *LIC Office Code *LIC-CSL Area Office Code *Sales Rep. Code
*CSM/ CCSA/ DSA Code *Area Manager Code *Channel Code *Surrogate Code
*Campaign Code

3. Relationship with LIC ☐ Normal ☐ Pre-approved

☐ **Policy Holder**
*Policy No
*Policy Type ☐ Single ☐ Regular
*Premium Amount ₹ _____
*Date of commencement

☐ **LIC Employee/ Employee of LIC Subsidiary**
*Cadre _____
*SR No.
*Company Name _____
(Applicable in case of Employee of LIC Subsidiary)

☐ **LIC Agent**
*Agent Code _____
*Agency Since
*Agency Club _____

4. Relationship with IDBI Bank Existing IDBI Bank Customer ☐ Yes ☐ No.
If Yes, Customer ID | Saving/ Current/ Fixed Deposit/ Loan A/c/ Debit Card No. | CKYC No.

5. Personal Information
First Name | Middle Name | Surname
*Name Mr Mrs Ms Dr
*Your name on the card (No aliases)
*Maiden Name *Mother's Maiden Name
*Father's/ Spouse Name *Mother Name
*Date of Birth *Gender ☐ Male ☐ Female ☐ Third Gender
*Marital Status ☐ Single ☐ Married *No. of dependents
*Educational Qualifications ☐ Under Graduate ☐ Graduate ☐ Post Graduate ☐ Professional ☐ Others _____
*Mobile No. *Nationality ☐ Resident Indian ☐ Non-Resident Indian
*Alternate Mobile No. Relationship with Alternate contact person
*E-mail Id
*PAN Aadhaar No.

Primary Applicant
Please paste recent Passport size colored Photograph here
Sign Across

6. Permanent Address Details*
Line 1*
Line 2
Line 3
City/Town/Village* District* Pin/Post Code*
State/U.T State/U.T Code* Country ISO 3166 Country Code*

7. Current Address Details ☐ Same as above mentioned address (In such cases address details as below need not be provided)
Line 1*
Line 2
Line 3
City/Town/Village* District* Pin/Post Code*
State/U.T State/U.T Code* Country ISO 3166 Country Code*

8. Deemed Proof of Address - Document Type code (Please refer instruction given below)
Line 1*
Line 2
Line 3
City/Town/Village* District* Pin/Post Code*
State/U.T State/U.T Code* Country ISO 3166 Country Code*

Document Code	Description
01	Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
02	Property or Municipal tax receipt.
03	Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings , if they contain the address.
04	Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings , scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.

9. Proof of Identity and Address

I) Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)

- ☐ A - Passport Number ☐ B - Voter ID Card
- ☐ C - Driving License
- ☐ D - NREGA Job Card
- ☐ E - National Population Register Letter
- ☐ F - Proof of Possession of Aadhaar

II) E-KYC Authentication III) Offline verification of Aadhaar

10. Tick if Applicable (✓) Residence for tax purpose in Jurisdiction(s) outside India. ☐ Yes ☐ No

ADDITIONAL DETAILS REQUIRED* (Mandatory only if above is Yes)

ISO 3166 Country Code of Jurisdiction of Residence* Country

Tax Identification Number or Equivalent (If issued by jurisdiction)*

Place / City of Birth* Country of Birth ISO 3166 Country Code of Birth*

Country / Countries of tax residency	Address in the jurisdiction for Tax Residence	Tax Identification No.(TIN)/ Functional equivalent No.	TIN/ Functional equivalent Number Issuing Country	Validity of documentary evidence provided

10.1. ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES*

(Applicable if section 10 is yes)

☐ Same as Permanent Address Details as in Section 6 ☐ Same as Current Address details as in Section 7

Line 1*

Line 2

Line 3

City/Town/Village* District* Pin/Post Code*

State/U.T State/U.T Code* Country ISO 3166 Country Code*

11. Employment Details

*Organisation Name

*Nature of Employment ☐ Salaried ☐ Self-employed ☐ Self-employed Professional ☐ Retired

*Occupation ☐ CA/CS ☐ Doctor ☐ Consultant ☐ Banker ☐ Architect ☐ Engineer ☐ Services _____ (Please Specify) ☐ Others _____

*Employer Type ☐ Private ☐ Public Sector ☐ State Govt. ☐ Central Govt. ☐ Others _____ *Employee ID (Applicable for Salaried Customer only)

Grade in Company ☐ Jr. Management ☐ Middle Management ☐ Sr. Management ☐ Board ☐ Owner ☐ Partner

*Designation *Total Work Experience *Years in Current Employment

Net Monthly Income (₹) Net Yearly Income (₹)

*Office address

*City

*State *Pin code *Country

Phone (Office) (STD Code) Extn

Office E-mail ID

*Not mandatory for retired applicant.

12. Instructions

Preferred Billing/ Mailing/ Communication Address ☐ Current ☐ Office ☐ Permanent

*Preferred Mode of Statement ☑ Email ☐ Physical (Email & SMS alerts will be sent to your email & Mobile registered with IDBI Bank Limited.)

13. Add-on Cards

I would like to apply Add-on Card(s) for

*Applicant 1:

First Name Middle Name Surname

*Existing Customer ☐ Yes ☐ No If yes, Customer ID

*Name as you would like to have on your card

*Gender ☐ ☐ *Date of Birth (Applicant must be atleast 18 years of age)

*Relationship ☐ Spouse ☐ Parent ☐ Sibling ☐ Child *PAN Card No.

*Mobile No.

Add-on 1

*Applicant 2:

First Name Middle Name Surname

*Existing Customer ☐ Yes ☐ No If yes, Customer ID

*Name as you would like to have on your card

*Gender ☐ ☐ *Date of Birth (Applicant must be atleast 18 years of age)

*Relationship ☐ Spouse ☐ Parent ☐ Sibling ☐ Child *PAN Card No.

*Mobile No.

Add-on 2

14. Declaration

I/We, through this Application Form, do hereby request LICCSL / IDBI Bank Ltd. to grant me/us the credit card and add-on card(s) as mentioned hereinabove. I/We do hereby declare and confirm that I/We have personally read and understood and interpreted in vernacular, in full, before execution of all terms & conditions that have been received by me/us. It is my/our responsibility to obtain the terms and conditions applying to Co-branded LIC Credit card powered by IDBI Bank and add-on card separately and read the same. I/We shall be bound by the terms and conditions as may be in force from time to time. I/We undertake that the usage of the Primary Credit Card and the Add-on card(s) shall be strictly as per the Exchange Control Regulations of the Regulatory authorities/RBI as applicable from time to time which I/We undertake to keep myself/ourselves updated with and in any event of any failure to do so, shall be liable for action under the Foreign Exchange Management Act 1999, or its statutory or re-enactment thereof. I, being Primary Card Applicant, understand that I am liable to honour all the charges incurred on Primary Card & Add-on card(s) as applicable from time to time and I shall be billed for the add-on card(s) in my monthly statement I/We agree that it will be my/our responsibility to provide identity and address or any other additional documents and/or information of the Add-on Cardholder(s) that may be required by LICCSL / IDBI Bank Ltd. in future. I/We accept that the use of the Add-on-card(s) by the add-on-card(s) holder(s) constitutes acceptance of the terms of the use of the cardholder(s) Terms and Conditions as amended from time to time. I/We understand and agree that OTP/ Intimation Message for the transactions relating to Add-on Card(s) be sent on the registered mobile number(s) of the respective Add-on cardholder(s) as well as the Primary Cardholder. I/We accept that the facility of an add-on-card(s) will stand automatically terminated in case of termination of membership of the Primary Cardholder.

I/We understand that Goods & Services Taxes (GST) as applicable from time to time will be levied on fees, interest and other charges. Credit limit on my/our card(s) account may be reviewed as per the Bank policies specified from time to time and the Bank will be entitled to cancel my/our application/ Primary Card / Add-on card(s)/alter the credit/cash limit/product upgrade at any time without assigning any reasons.

I/We confirm and undertake that all the particulars and information provided herein is true and correct to the best of my/our knowledge and nothing herein is suppressed or concealed. I/We further confirm that I am/We are not defaulter of any Credit Institution/bank and my/our repayments are regular. I/We agree and hereby authorise LICCSL / IDBI Bank Ltd. to exchange, share or part all the information, data or documents relating to my/our application with other IDBI Group of Companies/ Banks/ Financial Institutions/ Credit Bureaus/ Agencies/ Statutory Bodies/such other Persons as LICCSL / IDBI Bank Ltd. may deem necessary and I/We shall not hold LICCSL / IDBI Bank Ltd. liable for exchanging/sharing or parting with such information.

By signing this application form, I/We understand that for all the transactions effected through the Primary Credit Card / Add-on credit card(s), myself/ourselves including my/our successors, legal heirs, assignees shall be lawfully responsible for making payments of the same, as per the payment schedule in force from time to time. I, being Primary Card Applicant, further understand that merely disputing the transactions effectuated through my credit card and/or add-on card(s) shall not absolve my liability to defer/delay payment of my credit card and/or add-on card(s) dues as may be billed to me from time to time.

I/We have no objection to LICCSL / IDBI Bank Ltd., its group companies, agents/representative to provide me/us information on various products, offers and services provided by LICCSL / IDBI Bank Ltd. / its group companies through any mode (including without limitation through telephone calls/ SMSs/ emails) and authorise LICCSL / IDBI Bank Ltd., its group companies, agents / representative for the above purpose ☐ Yes ☐ No (Please tick Yes or No, as applicable)

I/we understand that LICCSL / IDBI Bank Ltd. will provide the credit card and the add-on card as per its internal policies and may issue a different card in case I am/We are not eligible, as per its policy for the card applied for.

I/We agree to abide by the terms and conditions as may be amended by the Bank from time to time, without giving notice to me/us. The most important terms & conditions as available on the website http://www.idbibank.in has been read by me/us and I/We agree to abide by them.

With regard to my credit card application, submitted to you for consideration, I hereby assure that there will be no default in payment against my Co-branded LIC Credit card powered by IDBI Bank bill. However, in the event of default in making payment of Credit Card dues, you are irrevocably authorized to debit any of my SBA / CA / other A/Cs maintained with you against the demand raised by IDBI Bank Ltd.

Applicant undertaking and FATCA / CRS declaration:

The account holder/(s) certify that:

a. The information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income tax Rules, 1962.

b. The information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.

c. I/We permit/authorize IDBI Bank to collect, store, communicate and process information relating to the Account and all transactions therein, by IDBI Bank and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.

d. I/We undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, it's supporting Annexures as well as in the documentary evidence provided by us or if any certification becomes incorrect and to provide fresh self- certification along with documentary evidence.

e. I/We also agree that our failure to disclose any material fact known to us, now or in future, may invalidate our application and IDBI Bank would be within its right to put restrictions in the operations of my/our account or close it or report to any regulator and/or any authority designated by the Government of India for the purpose or take any other action as may be deemed appropriate by IDBI Bank if the deficiency is not remedied by us within the stipulated period.

f. I/We hereby accept and acknowledge that IDBI Bank shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me/us to IDBI Bank.

g. It shall be my/ our responsibilities to educate myself/ ourselves and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules thereunder.

h. I/We also agree to furnish such information and/or documents as IDBI Bank may require from time to time on account of any change in law either in India or abroad in the subject matter herein.

i. I/We shall indemnify IDBI Bank for any loss that may arise to IDBI Bank on account of providing incorrect or incomplete information.

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. My personal/ KYC details may be shared with Central KYC Registry.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

X _____ X _____ X _____

Date ☐☐☐☐☐☐☐☐ Place _____

15. Attestation / For office use only

Documents Received ☐ Certified copies ☐ E-KYC data received from UIDAI ☐ Data received from offline verification ☐ Digital KYC Process ☐ Equivalent e-document ☐ Video Based KYC

KYC VERIFICATION CARRIED OUT BY (To be completed mandatorily)

Employee Name _____

Employee Code _____ **Employee EIN** _____

Designation _____

Branch _____ **Sol ID** _____

Date ☐☐☐☐☐☐☐☐

Employee Signature

Institution Details

Name I D B I B A N K L I M I T E D

Code I N 2 0 3 2

ACKNOWLEDGEMENT SLIP

Received application for Co-branded LIC Credit card powered by IDBI Bank, along with the requisite documents, from:

Mr./Ms. _____

Date ☐☐☐☐☐☐☐☐

Name of LIC-CSL SR _____

Signature of LIC-CSL Sales Representative

16. Nomination (Mandatory)

I,_____ (Name of Primary Card Applicant) do hereby assign the monies payable for the insurance under insurance policy(ies) as applicable on the issued card type, offered by Insurance company, as decided by IDBI Bank Limited from time to time, to_____ (Nominee Name) my_____ (Relationship).

I further declare that his/ her receipt shall be sufficient discharge to the insurance company. X

17. Auto Debit Facility

Re: Authority to Debit my SBA/CA against my Co-branded LIC Credit Card powered by IDBI Bank Dues

I have applied for Co-branded LIC Credit Card powered by IDBI Bank and I irrevocably authorize IDBI Bank Ltd. to debit my Saving / Current Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ maintained at IDBI Bank Ltd. towards

☐ **Total Amount Due (TAD)** ☐ **Minimum Amount Due (MAD)**

I, hereby also confirm that I am an authorized signatory of the above stated a/c & it pertains to me.

Yours faithfully,

X _____ **(In case of joint A/c, signatures of all joint A/c holders required.)** _____ _____

Name & Signature of Primary Card Applicant | **Name & Signature of Joint Holder 1** | **Name & Signature of Joint Holder 2**

Please Note: (1) Please attach the relevant income documents. (2) The LICCSL / IDBI Bank reserves the right to accept/ reject the application based on the information available to the Bank and the Bank's assessment of credit rating. (3) This application form does not constitute an offer for the card but is only an invitation to treat an offer. (4) The LICCSL / IDBI Bank reserves right to accept or reject this application without any reason and to issue card(s) with lower limits. (5) Add-on Card will be issued to applicant 1 in case of Lumine Credit Card.

18. For LIC-CSL Office Use Only

I declare that terms and conditions executed in favor of Co-branded LIC Credit card powered by IDBI Bank for the credit facilities have been read over and explained to the borrower's vernacular language and he/ she understood the content thereof subscribed to the terms and conditions. The original copies of all the documents, attached with this application form, have been seen & verified.

Attested documents received:

☐ Self-Certified ☐ True Copies ☐ Notary

Identity Verification ☐ Yes ☐ No

Date ☐☐☐☐☐☐☐☐

X _____ X _____

SR. Code:_____ **Employee Code:**_____

Date ☐☐☐☐☐☐☐☐ **Date** ☐☐☐☐☐☐☐☐

19. List of Documents to be attached with Application Form:

	LIC Employee/ Employee of LIC Subsidiary	LIC Agent	LIC Policy Holder	
ID Proof	☐ Employer's ID Card ☐ PAN Card	☐ Agency Status Report ☐ PAN Card	☐ Latest Premium paid Certificate or ☐ Policy Status Report or ☐ Latest Premium Receipt (Any one) ☐ PAN Card	
Residence Proof	☐ Aadhaar Card or ☐ Electricity Bill or ☐ Telephone Bill or ☐ Indian Passport or ☐ Driving License or ☐ Voter ID or ☐ Other_____ (Any one)			
Income Proof	☐ One Month Salary Slip ☐ Bank Account Statement for 3 months. (Reflecting salary credit)	☐ Latest 1 year ITR along with computation of income/ Form 16. ☐ Commission Income Bank Account Statement for 3 months.	**Salaried/ Retired** ☐ One Month Salary/ Pension Slip. ☐ Bank Account Statement for 3 months. (Reflecting salary/ Pension credit)	**Self-Employed** ☐ Latest 1 year ITR along with computation of income. ☐ Bank Account Statement for 3 months.
Other Documents	NA	NA	NA	☐ Business Entity Proof (GST Registration Certificate/ Government Business Registration Certificate etc.) ☐ Professional Certificate (Applicable in case of Self Employed Professionals)

• All documents must be self attested by the applicant. • All Original Seen and Verified must be done by CSMs/Class I or above officer of LIC clearly mentioning Name, Designation and Employee ID of Officer with stamp. • Bank account statement not required, if account is with IDBI Bank or the salary slip mentions the bank account number. • Business Entity Proof not required, if customer is mantaining Current Account with IDBI Bank for more than One Year. • In case of Pre-approved Applications, income proof documents not required.

Powered by

IDBI BANK

Bank Aisa Dost Jaisa

IDBI Bank Limited, Regd. Office: IDBI Tower, WTC Complex, Cuffe Parade, Mumbai – 400005.

Credit Card Customer Care Toll Free Number: 1800-425-7600, **Non-Toll Free Number:** 022-40426013.

Visit us: www.idbibank.in