



ONBOARDING OF CUSTOMER SERVICE POINT (CSP)
CSP code* : Service required* : x DMT x AEPS 🗸 Indo-Nepal Remittance
Device Information (for AEPS) IMEI no. :
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*: Paste Photo
5. Spouse Name : (sign across
6. Category : General OBC SC ST photograph)
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: D D M M Y Y Y Y (9b & 9c to be filled only if any course selected)
10. Name of Establishment:
11. Business Location Address (Operational areas)*:
State* : State Sta
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 : D D M Y Y Y
12. Residential address* :
State*:
Country*: I N D I A PIN Code*: Tel no.: Mobile no.*: Image: Comparison of the text of
Proof of Address : Voters ID 🗸 Aadhaar Card Telephone Bill Drivers License NREGA Card Passport Electricity Bill
ID number : ID
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:

Ac No:																	IFSC code:			
• * Fields wit	h aste	erix a	are o	com	plus	ory	to I	be f	illeo	d in.										



١.	DECLARATION							
	Applicant / CSP	Partner						
	1	I've met applicant/CSP and the originals of all documents produced have						
	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	been seen & verified by me. Signature of the Partner (with official seal)						
	Applicant/CSP signature*							
		Name:						
	Name* :							
	Date* :	Date:						
	I request you to appoint me to act as a Customer Service Point in the location of							
I	. I hereby submit following declarations as an applicant/CSP of	who is a						
	 a. I have not been found/pronounced to be of unsound mind by any competer court; b. I have not been found guilty of any criminal offence by any court of competer. I have neither been found guilty of any criminal offences in the course of a dishonesty or misrepresentation against anyone. d. I have not violated the code of conduct of any bank or declared a willful dee. I promise not to share the customer details with others and use only for th f. The RBL Bank Limited Business Facilitator/Business Correspondent scheme 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 iable to be rejected if it does not satisfy internal verification of the Bank as pedeclaration, RBL Bank may in its sole discretion terminate the CASH POINT bu n. I have all the necessary permission and I am legally allowed to do business. I hereby irrevocably and unconditionally undertake to indemnify and keep t expenses, penalties and charges that may be incurred by and/or caused to RB Point of RBL Bank. 	any investigation nor have I participated in or connived at any fraud, defaulter by any bank or/financial institution. the purpose of canvassing business of RBL Bank Limited. he shared by						
		Data						
	Signature of the Applicant*							
	Name	Place:						
	FOR PARTNER USE / LOC	AL INTELLIGENCE FORM						
:	 a. Applicant(s) interviewed for the purpose of approving the applicant(s) to a b. Particulars of identification verified with the originals and copies obtained KYC Documents (Submit self-attested documentation proof for one of eac Identity Proof: Passport, Pan Card, Voter ID, Aadhaar Card, Driving License, Address Proof: Passport, Voter ID, Aadhaar Card, Driving License, Latest E Shop & Establishment form : Yes / No	: h of three below) e, Others (specify) Bank Statement, Latest Electricity Bill, Others (specify) e hereby confirm the Identity of CSP and address of establishment has necessary permission and legally allowed to conduct business in be liable to indemnify RBL Bank and its officials from any unforeseen events business including but not limited to business registration certificate such H POINT business form the above mentioned location.						
N	ame:	Designation: Employee ID no:						

Date:_____

Τo,

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.: