

For Bank Use only

Customer Number _____
Account Number _____
Date of A/c. Opening _____

**Account Opening Form
(Corporate Customer)**
CKYC No. : _____

Branch : _____

(Please use blue / black pen for filling the form and *fields are Non-Mandatory)
I/We hereby request to open the following account. Terms not otherwise defined in this Account Opening Form shall have the same meaning as in the general part of the Account Opening Terms & Conditions.

Type of Account (Please tick whichever is applicable)

Rupees Account	☐ Current	☐ Fixed Deposit
Foreign Currency Account	☐ EEFC	☐ USD ☐ EURO ☐ GBP ☐ JPY ☐ Other

SMAR & TS (Internet Banking Facility) Required ☐ Yes ☐ No **Chequebook Required** ☐ Yes ☐ No

Company Details

Customer Name

Date of Incorporation / Registration (DD/MM/YYYY)

LEI No.

Registered Office
Address

Pin Code

City

State

Country

Tel. No.

*Fax No.

Mailing

Address

Pin Code

City

State

Country

Tel. No.

*Fax No.

Email

PAN/ GIR No./ Tax Identification No.

*Importer Exporter Code

GSTIN

Constitution

- | | | |
|--|---|--|
| ☐ Sole Proprietorship | ☐ Private Limited Company | ☐ Trust |
| ☐ Public Limited Company | ☐ Society/ Clubs/ Associations | ☐ Foreign Entity
(e.g. SNRR/ PO/BO/LO) |
| ☐ Partnership Firm (Registered/ Unregistered) | ☐ Statutory Corporation | ☐ Others |

Nature of Business

- | | | | |
|---|---|---|---|
| ☐ Manufacturing | ☐ Finance/ Insurance | ☐ Agriculture/ Forestry/ Fishery | ☐ Telecommunication |
| ☐ Export/ Import | ☐ Service | ☐ Investment | ☐ Dealers in precious metal or stone |
| ☐ Trading | ☐ Retailing | ☐ Construction | ☐ Organisation of various kinds
(condominium residents, association, circle, social gathering etc.) |
| ☐ Consulting | ☐ Wholesale | ☐ NGO/ NPO | |
| ☐ Real Estate | ☐ Other | ☐ Transportation | |
| ☐ Law office/ judicial scrivener office/ admn. scrivener/ certified public accountant office/ licensed tax accountant office | | | |

Authorized Signature(s)

I/ We hereby sign below to signify my/ our agreement to the details provided and the Declaration below, the signature(s) of which I/ we agree shall also serve as my/ our specimen signature(s) for the selected Account to be held in the Bank's record.

1st Authorised Signatory's Details : (*fields are Non-Mandatory)

Name																						
*Father's/Spouse																						
Name																						
Designation																						
Gender	☒ Male	☐ Female	☐ Third Gender	Nationality																		
Mobile No.											Date of Birth						Physical Disability	☐ Yes	☐ No			
Address																						
City											State						Pin Code					
Country																						
*Landline No.											*Fax No.											
PAN						Passport/ Driving License No.																

PHOTOGRAPH

(Please paste the latest
Passport size colored
Photograph, signed across

Mode of Account Operation

- ☐ Singly Rs. /Unlimited
- ☐ Jointly Rs. /Unlimited (to be signed jointly with
- ☐ As per Board Resolution

Specimen Signature with Stamp

2nd Authorised Signatory's Details : (*fields are Non-Mandatory)

Name																						
*Father's/Spouse																						
Name																						
Designation																						
Gender	☐ Male	☐ Female	☒ Third Gender	Nationality																		
Mobile No.											Date of Birth						Physical Disability	☐ Yes	☐ No			
Address																						
City											State						Pin Code					
Country																						
*Landline No.											*Fax No.											
PAN						Passport/ Driving License No.																

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Mode of Account Operation

- ☐ Singly Rs. /Unlimited
- ☐ Jointly Rs. /Unlimited (to be signed jointly with
- ☐ As per Board Resolution

Specimen Signature with Stamp

3rd Authorised Signatory's Details : (*fields are Non-Mandatory)

Name																					
*Father's/Spouse Name																					
Designation																					
Gender	☐ Male	☐ Female	☐ Third Gender	Nationality																	
Mobile No.											Date of Birth						Physical Disability	☐ Yes	☐ No		
Address																					
City											State										
Country																					
*Landline No.											*Fax No.										
PAN						Passport/ Driving License No.															

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Photograph, signed across

Mode of Account Operation

- ☐ Singly Rs. /Unlimited
- ☐ Jointly Rs. /Unlimited (to be signed jointly with
- ☐ As per Board Resolution

Specimen Signature with Stamp

4th Authorised Signatory's Details : (*fields are Non-Mandatory)

Name																					
*Father's/Spouse Name																					
Designation																					
Gender	☐ Male	☐ Female	☐ Third Gender	Nationality																	
Mobile No.											Date of Birth						Physical Disability	☐ Yes	☐ No		
Address																					
City											State										
Country																					
*Landline No.											*Fax No.										
PAN						Passport/ Driving License No.															

PHOTOGRAPH

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Photograph, signed across

Mode of Account Operation

- ☐ Singly /Unlimited
- ☐ Jointly /Unlimited (to be signed jointly with
- ☐ As per Board Resolution

Specimen Signature with Stamp

Initial Funding Details

☐ Cheque No. _____

Date _____

Drawn on Bank _____

Amount _____

Amount (in Figures) _____

(Cheque should be crossed, A/C payee and payable to “Customer Name” and should be from own account with other bank. please ensure that the signature(s) on funding cheque match with the specimen signature(s) provided to the bank).

☐ Debit A/C No. _____

Amount _____

Amount (in Figures) _____

☐ Incoming Remittance / Transfer

Sender Bank _____

Amount _____

Amount (in Figures) _____

Special Instructions of Delivery of Statement

☐ Will collect personally

☐ Email

☐ Physical

KYC Details :

Purpose of Account Opening:

☐ Settlement of business activities

☐ Saving/Asset management

☐ Foreign Exchange

☐ Settlement of Goods or Services

☐ Loan

☐ Investment/ Loan/ Repayment of Loan

☐ Others : _____

Expected Source of Funds : _____

Shareholding pattern of the company

Name	Holding %	Country	Listed in Stock Exchange	Non-Listed
				☐
				☐
				☐
				☐
				☐
				☐

In case the shareholder holds 10% or more shares as stated above is Non Listed Company, please mention the shareholding pattern of such Non Listed Company.

Name	Holding %	Country	Listed in Stock Exchange	Non-Listed
				☐
				☐
				☐

Ultimate Beneficial Owner (UBO) :

- A. In case of corporate entities the “beneficial owner” is defined as the natural person(s) who ultimately own or control the legal entity directly/ indirectly through a shareholding or voting rights of 10% or having the controlling state in the entity whichever is less.
- B. In case of foundations & trusts/ unincorporated entities which administer and distribute funds, the beneficial owner is any natural person who receives the benefits of 10% or more of the property, assets or income of the legal entity.
- Whether carrying out transactions for a client: ☐ Yes ☐ No
- If Yes, please specify the relation and also fill the UBO details below:
- ☐

 Acting as formation agent of legal person(s).
- ☐
- Acting as (or arranging for another person to act as) a Director or Secretary of a Company.

☐☐☐☐

Ultimate Beneficial Owner (UBO) for Corporate Entities

1. Number of Ultimate Beneficial Owners: _____
2. Details of Ultimate Beneficial Owners (please submit respective identification proof):

Customer Type	First Name	Last Name	Entity Name	% Ownership	Country of Residence

Whether you want to receive SMS alerts for all debit and credit transactions in your account(s)? ☐ Yes ☐ No

If **yes**, Please Specify the contact details as Below:

Contact Name

Country Code

Mobile Number

Kindly refer URL for SMS Alerts T&C-

https://www-static.smbc.bank.in/wp-content/uploads/2026/03/SMS_Alert_Authorization_Registration_Form.pdf

1. I/ We declare that the information given herein by me/ us is true and correct, which Bank is entitled to verify directly or through any third party agent. I/ We also agree that, if any such declaration made by me/ us are found to be incorrect, Bank is not bound to pay any interest on the Account(s) opened by me/ us and is entitled to terminate the Account relationship.
2. I/ We acknowledge that the Bank may disclose information about me/ us if required or permitted by any law, rule or regulation or at the request of any public or regulatory body or if such disclosure is required for the purposes of preventing fraud, without any further specific consent or authorisation from me/us.
3. I/ We also confirm that I/we am/are complying with the Foreign Exchange Management Act of 1999 (FEMA) and Foreign Contribution (Regulation) Act of 1976(FCRA), and the rules and regulations made thereunder and any amendments thereto.
4. I/ We understand and acknowledge that any violation or non-observance of the undertakings given herein will be subject to action under FEMA and FCRA.
5. I/ We agree to abide by the rules/ provisions as prescribed by the Reserve Bank of India from time to time.
6. I/We also confirm not to commence or undertake any activity/ transaction which is not permissible under the prevalent Foreign Direct Investment Policy or any other applicable Policy or guidelines of the Government of India/ Reserve Bank of India save and except after obtaining specific prior approval from the concerned authorities under advice to the Bank.
7. I/We hereby confirm and declare that I/we am/are not dealing with or shall have any transactions with the entities individuals/ organisations that are banned / restricted by UNO/ OFAC/ European Union Sanctions/ Government of India/ RBI or any other authorities.
8. I/ We shall maintain the minimum balance requirement as applicable at all times and the Bank shall levy prescribed charges in case of non-maintenance of minimum balance. In case of change of mailing address and other contact details, the same shall be communicated to the Bank in writing.
9. I/ We hereby undertake to intimate the Bank about any changes in my/ our residential status as per FEMA.
10. I/We hereby acknowledge that I/ We have received, read and understood the Bank's prevailing Terms, Conditions and Rules governing Deposit Accounts found at https://www-static.smbc.bank.in/wp-content/uploads/2026/03/Account_Opening_Terms.pdf and Schedule of Fees and Charges found at <https://www-static.smbc.bank.in/wp-content/uploads/2026/08/standard-tariff.pdf> relating to the above account being opened by me/ us. I/ We agree to abide by the same as amended from time to time and further agree to abide by any additional terms and conditions governing any facilities, products and/ or services offered by the Bank as I/ We may apply for and/ or utilize from time to time.

Signatures of person(s) authorized for account opening (Authorised as per Board Resolution/ Sole Proprietor/ all Partners) (with rubber stamp).

For Bank Use Only

Full Name and ID of the Bank Employee in whose presence signed

Name : _____

Employee ID : _____

Date : _____

Signature/ Stamp : _____