



Bra	nch:	Br	anch	Coc	le	••••	•••••	RC) Co	de .	••••	••••	••••	D	ate.	••••	•••••	••••	
Kina	lly fill up all the columns		* i	ndic	ates	a fe	oot n	ote	1	1			1		1		1	-	1
1	Merchant Account Name *															_			
2	Constitution		divid mpa							rshij	p/Pri	vat	e Co	ompa	any/l	Pub	lic		
3	Doing business since																		
4	Name of proprietor /partners/directors																		
5	Primary Account Number *																		
6	Mobile Number																		
7	Email ID																		
8	Date of opening of account				/			./											
9	Account Type	SE	B/CD/	OD/	'CCC	DL													
10	Preferred Virtual Address* *-(Bank will issue only VPA. customer needs to use their own mobile device for installing the application)	1 2 3																	
11	Official/Registered address																		
12	Address at which UPI-POS terminal is to be installed, if different from the Official address:																		
13	Type of Business																		
14	Merchant Type		and a lease			ain	n stor	e / C	Com	pany	' sho	wrc	om	/ Dis	stribu	itor	/ Ot	her	
15	Expected Turnover of business through the UPI-POS application*	IN	R			••••	per	app	olica	tion	per	mor	nth						
16	Details of existing digital payment accepting terminal (POS/ UPI-POS/ Wallet) details (Bank, No. of terminals, Transaction																		
17	Sales details:	• • •	% d % d Av Dai	of sa of sa erage ily av	les tl les tl e dig	nro nro gital ge 1	urnov ugh c ugh c l tran no. o:	eard othe sact	s: r dig ion	ital size:	% chan INF	t		••					
18	Premises		•				ased e sho	op /	Shoj	ppin	g Co	mp	lex						
4 1)	• · · · · · · · · · · · · · · · · · · ·																		

(1) As appearing on the Account statement.

5) Primary account is the account which will be credited with the proceeds of UPI-POS originated transactions. Charges will be debited to this account.

10) If multiple virtual address are requested, the table given below may be used for specifying the Addresses at which the UPI-POS application are to be used, and the contact details (if different for different locations).

	Additional Locations									
SI	Virtual Address	Location address	Contact person details							

Merchant Declaration

I/We would like to avail The South Indian Bank Ltd's UPI-POS services and confirm that the information given by me/us is true and complete and forms the basis for enrollment for this service. I/We further declare that I/We have read and agree to be bound by the terms and conditions for availing this service. If at any stage the Bank comes to know that the information provided herein is incorrect and/or misleading, the Bank reserves the right to terminate the agreement and the service provided under the agreement. I/We authorize the Bank to verify my/our credentials or make any references required in respect of enrollment for UPI-POS service. I/We understand that the Bank may from time to time give any credit and other information about me/us, including information on this form, to or receive such information from any credit bureau, reporting agency, person with whom I/We may have or propose to have financial dealings. I/We authorize you to credit/debit our Account with South Indian Bank with the transaction amount, MDR, other charges and service tax. In the case of charge back, I/We authorize the bank to review the transactions initiated by the customer and debit the account if the charge back request is verifiable. I/We confirm that the signatory (ies) of this application has/have the full legal authority to sign this form on behalf of the Merchant Establishment. I/We understand that the Bank reserves the right to reject the application without assigning any reason whatsoever. Name of signatory: Signature with seal:

Place:

Date:

Name of signatory:

Signature with seal:

For Branch Use

I hereby certify that the merchant is fully KYC compliant. I have personally visited the premises at which the UPI-POS terminals are proposed to be installed and have found them satisfactory. The merchant premises have the potential appearance to attract UPI payments and appear to be capable of the projected business through UPI-POS terminals. Local enquiries have not revealed any adverse feature pertaining to the reputation of the merchant. I have adhered to/will adhere to all the instructions and guidelines mentioned in the bank's Merchant acquiring policy. I hereby recommend UPI-POS terminals as per details given below:

No. of VPAs:

MDR:

Other charges (if any):

Remarks (If any):

Date:

Name of Principal Officer:

Signature with seal