

Enable Integrated Banking Services with Tally ERP

This unique feature enables you to conveniently initiate transaction, receive transaction details/account information via TALLY software and can be accessed successfully only through TSS User ID's registered with the Bank. Further Transaction authorization (by designated approvers) will be executed via DBS IDEAL™. Please note that dual control (which requires different person to initiate and approve transaction) will not be applicable for transaction initiated through this mode. Refer Electronic Banking Terms and Conditions on the website for further details.

Preferred IDEAL Organization ID*

* IDEAL Organization ID will ideally be 8 characters with the First 2 characters prefixed as 'IN', followed by the next 4 characters suggested above or as decided by Bank and last 2 characters as running numbers. The final Organization ID assigned will be communicated to you through IDEAL Welcome Letter post on-boarding)

AUTHORISE OWN TRANSACTIONS (Cash & Trade Only)

Tick where applicable

Note: For authorizers who are approving transactions that they created themselves and that require only one authorizer, transaction challenge will only be sent via SMS to the registered mobile number.

All Transaction Authorisers can authorise own transactions (Single Control)

Risk Disclosure Statement

For all transactions made through DBS IDEAL™, the system will have **Dual Control** in place such that no single person could create and approve transactions that would result in fraudulent action.

Dual Control

A procedure that involves two or more people to complete a transaction - one person to create a transaction and another of higher authority to approve it in the system. This makes the system more secure as both persons would need to be in collusion to commit fraud.

Single Control

A procedure that needs only one person to complete a transaction, thus may incur higher risk compared with **Dual Control**.

Authorization Policy

All Services or Payment Payroll Trade Others _____

Payment from ₹ 0 to ₹ 50,000 requires signatory from **Any 1 Authorised**

Payment from ₹ 50,000 to ₹ 100,000 requires 1 signatory from **Group A** or from **Group B** and 1 from **Group C**

From (INR)	To (INR)	No. of Authoriser required	Authorisation Requirement
0	50,000	<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories <input type="text"/>
50,000	100,000	<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories 1A or 1B and 1C

Note If page left blank, default setting of "Any 1 Authoriser for All Amount" will apply. In the services applicable is not indicated, the authorisation policy will apply **All Services**. The total transaction value of the batch will be used to calculate the authorisation limit, Please make copies of this page if required.

Tick where applicable

All Services or Payment Payroll Trade Others _____

From (INR)	To (INR)	No. of Authoriser(s) required	Authorisation Requirement
		<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories <input type="text"/>
		<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories <input type="text"/>
		<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories <input type="text"/>
		<input type="checkbox"/> Any 1 Authorised <input type="checkbox"/> Any 2 Authorised	Required Combination of Authorised Signatories <input type="text"/>

Declaration

We hereby confirm

That we are not enjoying any credit facility with any bank and undertake to inform you in writing as soon as any credit facility is availed of by us from any other bank

That we are enjoying credit facilities with other banks as per details given below:

Bank / Branch	A/c Number
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

I/We request DBS Bank India Limited (the "Bank") to open the above stated account(s), subject to the Bank's prevailing Terms & Conditions governing accounts, Terms and Conditions governing Electronic Services and Fee Schedule, and the Terms & Conditions governing the other respective services linked to these account(s) (collectively, the "Terms"), copies of which are available at www.dbs.com/in and from any branch of the bank.

I/We have read and understood the Bank's prevailing Terms and agree to abide and be bound by such Terms & Conditions (as each may be amended, supplemented, substituted and/or replaced by the Bank from time to time).

I/We* certify that the signatures and photographs of the authorized signatories shown on the signature card are genuine and correct.

I/We* authorize you to honour all payment instructions signed in accordance with the stated signature requirements. I/We* agree not to overdraw my/our* account without prior agreement and approval. I/We* warrant that I/We* have the power and authority to sign and deliver the application form and the resolution attached.

I/We* declare that the information given herein by me/us* is true and correct, which the Bank is entitled to verify directly or through any third party agent.

I/We understand that the cheque book guaranteed through Auto Cheque Order Facility will be dispatched at the communication address registered with the DBS Bank India Limited. 'Auto Cheque Order' facility is a facility by which Cheque book will be issued automatically to your communication address once the unrepresented cheque(s) in our banking system reach 10 or below.

We confirm and accept that Mobile / IMPS based collections will be governed by the applicable 'Mobile / IMPS based collections facility – Terms and Conditions' which are available at www.dbsbank.com. We accept to the terms and conditions governing Flexi Fixed Deposit on the DBS Website.

I/We have read the **Risk Disclosure Statement** of Single Control in DBS IDEAL™ and authorise the Bank to proceed with Single Control setup in DBS IDEAL™ as indicated in section 'Authorize own transactions'. I/We fully understand and acknowledge the characteristics of Single Control and the risk with this authorisation, and agree to assume and be responsible for all the risks associated with and losses arising out of or in connection with the application and use of Single Control in or through DBS IDEAL™. I/We undertake to indemnify and hold the bank fully indemnified from and against any loss, cost (including solicitor and client costs on a full indemnity basis), charges, damage, claims, demands, actions, proceedings and all other liabilities of whatever nature and howsoever incurred or suffered by the Bank or which may be brought or preferred against the Bank as a result Bank agreeing to act on our said authorisation. I/We also understand that the bank may terminate the provision of Single Control procedure by notice to us at any time.

Name : _____	Name : _____
Date : _____	Date : _____
Signature: _____	Signature: _____

Name : _____	Name : _____
Date : _____	Date : _____
Signature: _____	Signature: _____

1. For e-Business Lite subscribed to Flexi Fixed Deposit, minimum threshold balance for sweeping funds to FD will be INR 3lacs with an applicable tenor of 7days or 15days
 2. e-Business Lite account variant offers only electronic transaction services, free access to DBS IDEAL (our corporate internet banking website & mobile app) , debit card and other services as may be prescribed by DBS. For subscribing to our full suite of products including cheque, cash, DD/PO, Trade services you may choose our other existing suite of account variants. Please refer to our website (<https://www.dbs.com/in/sme>) for Current Account variants, services offered & related schedule of charges.
 3. DBS IDEAL™ refers to our internet banking platform & mobile banking app for Corporate customers. Email & Mobile are required for DBS IDEAL™ and e-Advice.
 4. Two people will be required to be Contact Persons whom bank can liaise on matters related to DBS services. If not specified, the first two names will be default contact.
 5. A transaction maker in an individual who creates transactions. An authorizer is an individual who approves transaction.
 6. DEAL Online: Convert your funds from one currency to another currency at Competitive rates for Value Today, Value Tomorrow, Spot and Forward. As this is an online FX booking system any single user with Deal Online access can book FX transactions without any further authorization. Risk disclosure statement for single control applies.
 7. TSS Stands for TALLY Software Services, earlier know as Tally.Net or TNS in TALLY ERP 9 parlance.
 8. e-Advice : Inward Transfer includes alerts for Incoming NEFT, RTGS, Telegraphic Transfer and IMPS Collection. Outward Transfer includes alerts for Outward NEFT, RTGS, Telegraphic Transfer (with Mt103). Cheque Presentment alert currently available on SMS.
 9. Daily Withdrawal Limit on the Debit Card will be applicable as follows:
 i) Business - INR 50,000, ii) Business Signature – INR 200,000. Please refer to the T&C's governing ATM/Debit available on the DBS website
- # Multi- Currency Account (MCA) variant offers a single account structure for INR and EEFC accounts that can be used to maintain balances and perform transactions in multiple currencies. INR sub-account would be created by default and foreign currency sub-accounts (as subscribed) would be auto-created at the time of first incoming transaction.

For Bank's Use Only

Account Number(s): <input style="width: 100%;" type="text"/>	Account <input type="checkbox"/> DBS IDEAL™	Others Reference:
	<input type="checkbox"/> eAdvice	CL No.
Attended by (Name / Signature / Date): _____	<input type="checkbox"/> System updated by: BSR Code <input style="width: 50px;" type="text"/>	CIN
Approved by (Name / Signature / Date): _____	<input type="checkbox"/> System Authorised / Report checked by	ORG ID
Signature Card Sr. No: <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	

Documentation Checklist

Constitution	Document type
Common for all	<ul style="list-style-type: none"> • Completed Account Opening Form. • Completed Signature Card with passport size photograph of each signatory. • Copy of the PAN Card. • Attestation of all documents provided as a photocopy.
Private/Public Limited Company	<ul style="list-style-type: none"> • Certificate of Incorporation. • Certificate of Commencement of Business for Public Limited Company. • Memorandum and Articles of Association. • Board Resolution signed by the Directors/Company Secretary. • Latest Annual Report for Public Limited Company. • List of Directors along with DIN numbers. • Proof of Identity of the Company (any one of the following) PAN Allotment Letter, Registration under Shops & Establishment Act, Sales/Service Tax/ Excise Registration. • Proof of Address for the Company (any one of the following) Telephone/Mobile Bill, Water /Electricity Bill, Municipal Tax/Society Outgoing Bill, Lease Agreement/Rent receipt in the name of the company, Bank Statement, Certificate of Incorporation along with the address proof of the representative of the company(for companies not more than 3 month old). • Proof of Individual Identity for any two directors-including the Managing Director, all authorized signatories and principal shareholders (any one of the following) Passport, Voter's ID, PAN Card, Driving License. • Shareholding pattern of the company signed by the Directors/Company Secretary.
Partnership Firm/Sole Proprietor	<ul style="list-style-type: none"> • Certificate of Registration (if registered) • Partnership Deed. • Power of Attorney granted to a partner or any other person to transact business on behalf of the firm (signed by all the partners/sole proprietor) • Proof of Identity of the Company (any one of the following documents for partnership firms and two for proprietorship firms) PAN Allotment Letter, Registration under Shops & Establishment Act, Sales/Service Tax/ Excise Registration, IT Returns of the company. License issued by the Registering authority like Certificate of Practice issued by Institute of Chartered Accountants of India, Institute of Cost Accountants of India, Institute of Company Secretaries of India, Indian Medical Council, Food and Drug Control Authorities, etc. • Proof of Address for the Firm (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water / Electricity Bill, Municipal Tax, Registered Lease Agreement /Bank Account Statement. • Proof of Individual Identity for the partners/sole proprietor (any one of the following) Passport, Voter's ID, PAN Card, Driving License. • Proof of Address for the entire partners/sole proprietor (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water Electricity Bill, Municipal Tax/Society Outgoing Bill, Registered Lease Agreement/ Bank Account Statement.
Limited Liability Partnership	<ul style="list-style-type: none"> • Certificate of Incorporation. • Partnership Deed. • Proof of Address for the Firm (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water/Electricity Bill, Municipal Tax/Society Outgoing Bill, Lease Agreement/Rent receipt in the name of the company, Bank Statement • List of Partners along with the DPIN number on the company letterhead. Proof of Individual Identity for the partners/sole proprietor (any one of the following) Passport, Voter's ID, PAN Card, Driving License. • Proof of Address for the all the partners (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water Electricity Bill, Municipal Tax/Society Outgoing Bill, Registered Lease Agreement/ Bank Account Statement.
Club/Society/Association/Trusts & Foundation	<ul style="list-style-type: none"> • Certificate of Registration • Resolution of the Managing Body/Trust Deed/Bye Laws • Memorandum and Articles of Association for companies registered under Section 25. • Power of Attorney granted to transact business on its behalf • List of directors/founders/trustees/settlers/committee members/signatories certified by the chairman or secretary • Proof of Individual Identity for all signatories(any one of the following) Passport, Voter's ID, PAN card, Driving License • Proof of Address for all signatories (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water Electricity Bill, Municipal Tax/Society Outgoing Bill, Registered Lease Agreement /Bank Account Statement.
HUF	<ul style="list-style-type: none"> • Declaration from the Karta • Prescribed Joint Hindu Family Letter signed by all the coparceners. • Proof of Individual Identity for all signatories(any one of the following) Passport, Voter's ID, PAN card, Driving License • Proof of Address for all signatories (any one of the following, not more than 3 months old) Telephone/Mobile Bill, Water Electricity Bill, Municipal Tax/Society Outgoing Bill, Registered Lease Agreement/ Bank Account Statement.

SANCTIONS DECLARATION

I do have direct or indirect dealings with the sanctioned countries mentioned below: No Yes (Please submit Sanctions Certification Form)
North Korea, Iran, Crimea (Ukraine Region), Syria, Cuba.

Signature & Date:

Name & Designation:

SANCTIONS CERTIFICATION FORM

DBS Bank is subject to, and is committed to compliance with, sanctions laws and regulations in various jurisdictions around the world. In furtherance of these compliance efforts, we require that our customers complete this sanctions certification form

**Note: The Person who is providing this Certification on behalf of the Customer entity should be its director or partner (as may be appropriate), or, if the Customer entity is a legal arrangement which is not a company or partnership, that Person should be an individual of executive authority to bind the Customer entity to this Certification.*

I, _____ in my capacity* as the _____
Name of Person Title

of _____ hereby certify that (select the appropriate options):
Name of the Customer Entity

(A) The account(s) / relationship(s) that our company maintains with DBS Bank, subsidiaries and/or branches will not be used in any manner whatsoever directly or indirectly in connection with any projects, contracts, transactions or payments that contravenes any sanctions implemented and administered by the United States Treasury Department’s Office of Foreign Assets Control (OFAC), the United Nations Security Council, the European Union, Monetary Authority of Singapore or any other applicable local jurisdiction which relate to the below sanctioned countries:

- Iran, Syria, North Korea, Cuba, the Crimea region, Russia and Venezuela

(B) the account(s) / relationship(s) that our company maintains with DBS Bank, subsidiaries and/or branches will be used directly or indirectly in connection with projects, contracts, transactions or payments involving a country subject to sanctions by the United States Treasury Department’s Office of Foreign Assets Control (OFAC), the United Nations Security Council, the European Union, Monetary Authority of Singapore or any other applicable local jurisdiction.

- We confirm that these transactions or payments will NOT be conducted in USD and will NOT involve any US Persons. An explanation of these transactions is provided below.

- I/We understand that the use of account(s) maintained at DBS Bank, subsidiaries and/or branches directly or indirectly involving the sanctioned countries listed above is subject to DBS internal risk review and DBS has the obligation to request for account closure or to request the customer to discontinue this service to be in compliant with international sanctions regulations

We further agree that any transaction that is being reviewed by DBS for compliance with relevant laws and regulations or when rejected for legal and policy reasons will not be re-submitted to DBS, including resubmissions with alteration to the instruction

(C) for companies owned or controlled by Iranian individuals who are not residing in Iran, I/We agree to notify DBS Bank of any changes in the residency status should the Iranian individuals subsequently return to Iran.

Please tick the sanctioned countries involved and provide details of transactions if option (B) is chosen:

Iran Syria North Korea Cuba Crimea Region

Venezuela Government &/or PdVSA Russia Target SSI

Signature & Date

Account Numbers

ANNEXURE 2

Customer Identification _____ Account number _____

With respect to the amendments to the Prevention of Money-laundering (Maintenance of Records) Rules, 2005 issued by the Ministry of Finance in consultation with the Reserve Bank of India on 01 June, 2017, the following details need to be provided during account opening if aadhaar is not applicable

I _____ declare that I am not eligible to obtain aadhaar card as per the Aadhaar Act, 2016.

I have attached my original verification document (_____) herewith.

Name

Date

Signature

ANNEXURE 3 - AUTHORITY TO SEND STATEMENTS THROUGH EMAIL

We _____ wish to receive statement of accounts relating to our account no. _____ as e-statements on the registered email IDs as listed below. We hereby authorise you (DBS Bank) to send the e-statements on the below registered email IDs.

1. _____
2. _____
3. _____
4. _____
5. _____

Any addition / deletion of email IDs mentioned above will be communicated to you in writing signed by the persons authorised to give instruction in accordance with the account mandate / board resolution/letter of authority. All the terms and conditions set out herein shall be applicable to such additions / changes.

We are aware that email is not a secure or error-free medium of communication and we are aware of the possible risks involved in connection with the transmission of information via email. We accept and acknowledge that the Bank does not accept liability for any errors or omissions in the content of the email messages and its attachments.

We undertake to keep you indemnified at all times against, and to save you harmless from all actions, proceedings, claims, loss, damage, costs and expenses including consequential losses / damages which may be brought against you and which shall have arisen either directly or indirectly out of or in connection with your sending the e-statements to us through email.

For _____

For _____

(Authorised Signatory)

(Authorised Signatory)

Name:

Name:

Designation:

Designation:

Please write to businesscarein@dbs.com or your Relationship Manager if you would like to receive physical statement of accounts.