



# BHADRADRI CO-OPERATIVE URBAN BANK LIMITED

Head Office :: Gandhi Chowk, KHAMMAM.

ROTARY NAGAR

Branch : .....



ARF 002

## ACCOUNT OPENING FORM

Account No.

D D

M M

Y Y Y Y

Please tick (✓) in appropriate Box:

Please Open Account as per details below:

### Saving Account

With Cheque Book  Without Cheque Book  Minimum Balance : Rs.

### Current Account

Sole Proprietor Firm  Public Limited Company  Individual   
Partnership Firm  Private Limited Company  Others (Specify) .....  
Joint Hindu Family  Club/Society/Association

### For Joint Accounts instructions for operation / repayment :

Single  Either or Survivor  Any one or Survivor  Jointly

Any other combination (Specify): .....

### Other than Individuals:

Full Name in Block Letters:

Business / Office Address:

GST No:

PAN No:

### CHECK LIST :

1. Copy of the Memorandum of Association registered on ..... and Articles of Association dated .....
2. Copy of the Bye Laws dated ..... and resolution dated ..... of the Society, regulating the conduct of the account obtained.
3. Government / Military Order dated ..... obtained (whichever is applicable)
4. Copy of relevant extracts trust deed dated ..... obtained and perused, with special emphasis on the powers of the trustees to sign cheques, delegation of authority, borrow money etc The relevant portions are entered in the power of Attorney register.
5. Partnership deed, Registration Certificate and Board Resolution.
6. Personal information sheet of Secretary / President / Managing Trustee etc., obtained.

**FILL IN THE FORM IN BLOCK LETTERS**

Customer ID 

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**First Applicant:**

Full Name : \_\_\_\_\_

S/o. D/o. Spouse : \_\_\_\_\_

Mother's Full Name : \_\_\_\_\_

Date of Birth : 

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 Occupation : \_\_\_\_\_

Gender : M  F  TG  Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_



**Present Address:**

House No: \_\_\_\_\_ Street : \_\_\_\_\_

Village / Town : \_\_\_\_\_ District : \_\_\_\_\_ Pin Code : \_\_\_\_\_

Aadhar 

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e-KYC Verification through OTP

Contact No. \_\_\_\_\_ E-Mail : \_\_\_\_\_

**Permanent Address:** House No: \_\_\_\_\_ Street : \_\_\_\_\_

Village / Town : \_\_\_\_\_ District : \_\_\_\_\_ Pin Code : \_\_\_\_\_

**Second Applicant:**

Customer ID 

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Full Name : \_\_\_\_\_

S/o. D/o. Spouse : \_\_\_\_\_

Mother's Full Name : \_\_\_\_\_

Date of Birth : 

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 Occupation : \_\_\_\_\_

Gender : M  F  TG  Nationality: \_\_\_\_\_ Religion: \_\_\_\_\_



**Present Address:**

House No: \_\_\_\_\_ Street : \_\_\_\_\_

Village / Town : \_\_\_\_\_ District : \_\_\_\_\_ Pin Code : \_\_\_\_\_

Aadhar 

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e-KYC Verification through OTP

Contact No. \_\_\_\_\_ E-Mail : \_\_\_\_\_

**Permanent Address:** House No: \_\_\_\_\_ Street : \_\_\_\_\_

Village / Town : \_\_\_\_\_ District : \_\_\_\_\_ Pin Code : \_\_\_\_\_

**Specimen Signatures:**

First Applicant : 1). \_\_\_\_\_ 2). \_\_\_\_\_

Second Applicant : 1). \_\_\_\_\_ 2). \_\_\_\_\_

**PARTICULARS OF INTRODUCTION / IDENTIFICATION :**

A. If the applicant (s) is/are already a customer of the branch, please give account number  
SB/CA \_\_\_\_\_

B. Name and Address of the Introducer \_\_\_\_\_

Phone / Mobile No. / E-mail \_\_\_\_\_ PAN No. \_\_\_\_\_

Introducer's A/c No. \_\_\_\_\_ Operative since \_\_\_\_\_

"I certify that I have known Mr. / Mrs/ Miss \_\_\_\_\_ for the last \_\_\_\_\_ ye  
and confirm his / her/ their occupation and address stated in his/her/their application to open the account".

Signature of Introducer

Verifying Officer



Specified documents to be obtained / verified to ascertain the identity (in case introduction is not furnished) and proof of residential address of account holder(s) to be obtained and held on record.

Any one document from each of the under noted two lists for a photo ID and proof of residence

| LIST - 1 (Proof of Identity)    |                          | LIST - 2 (Proof of Address)             |                          |
|---------------------------------|--------------------------|---|--------------------------|
| 1. Passport                     | <input type="checkbox"/> | 1. Bank Account Statement               | <input type="checkbox"/> |
| 2. Election ID Card             | <input type="checkbox"/> | 2. Salary Slip                          | <input type="checkbox"/> |
| 3. PAN Card                     | <input type="checkbox"/> | 3. Income / Wealth tax assessment order | <input type="checkbox"/> |
| 4. Aadhaar Card                 | <input type="checkbox"/> | 4. Electricity Bill                     | <input type="checkbox"/> |
| 5. Govt. Defence ID Card        | <input type="checkbox"/> | 5. Telephone Number                     | <input type="checkbox"/> |
| 6. Driving License              | <input type="checkbox"/> |   |                          |
| 7. ID Card of reputed employers | <input type="checkbox"/> |   |                          |

I / We agree to abide by the Bank's rules relating to the conduct of the above accounts/services/products. I/We declare that the rules of the scheme have been ready by me/us and that I/We accept them as binding upon me/us. I/We authorise the Bank to debit my/our account with applicable service/insurance charges from time to time. In the matter of bills, cheques etc., lodged by me/us with you from time to time for collection, you may send them for collection to any bank and through any mode, at your discretion, at my/our risk and responsibility. I/We agree not to hold you liable for any loss/delay, beyond your control. It is understood by me/us that you shall not be liable to pay the amount until the instruments are realized in cash by you. In the case of bills, cheques etc., purchased/discharged by you, I/We agree to reimburse the amount, where you have not been able to realize the proceeds of the instruments in cash.

**Note:** You have to maintain a minimum balance in the account. In case you don't maintain the minimum balance we charge the penalty for such default of minimum balance.

I / We under take not issue any cheque without balance and remark cause any inconvenienced to Bank. In case such Incident/s happened inadvertently, Bank can charge the penalty per returned instrument to debit of my/our account as and when balance accumulates and I/We do not any contention whatsoever in making such charges to debit of my account.

Signature 1. \_\_\_\_\_

Signature 2. \_\_\_\_\_

### Customer Declaration for Existing Banking Relationship

This is to certify that \_\_\_\_\_

Name of the Individual/Entity has (Please tick appropriate options given below)

I/We have not availed credit facilities in the form of Cash Credit (CC)/Overdraft (OD) term loan (fund based and non-fund based credit facility / borrowings ) from the banking system\*

I/We have availed credit facilities in the form of Cash Credit (CC)/Overdraft (OD) from the banking system\* (As per the RBI guidelines dated 06.08.2020, if the customers have availed credit facilities in the form of Cash Credit (CC)/Overdraft (OD) from the banking system\* then Current Account cannot be opened with any Bank.

I/We have availed fund based and/or non fund based credit facilities / borrowings from Bhadradi Co Operative Urban Bank Ltd./Other Bank. The details of these borrowings are given in the table below. (These details should also include the borrowings of the proprietor in the individual capacity in case of sole prop Firm).

I/We are opening Current account for specific purpose as stipulated under various statutes and instructions of other regulators / regulatory departments (As per the RBI guidelines date 14.12.2020. such accounts are not restricted by the Credit Discipline guidelines daed 06.08.2020).

**Note:** 1. As per the FAQs released by RBI in DOR, No.BP.BC.30/21.04.048/2020-21 dated 14th December 2020, all the credit facilities availed by an individual, Hindu Undivided Family (HUF) and by the proprietor in his/her personal capacity like home loan, loan against property etc and for business purpose will be included while calculating the aggregate exposure in the banking system\*

| S.No.                                   | Bank Name | Branch Name & City | Type of facility* (Sole/Consortium / Multiple Arrangements) | (A) Fund Based Sanctioned Limit* (Amounts in Lakhs) | (B) Non Fund Based Sanctioned Limit* (Amounts in Lakhs) | (A) + (B) Total Sanctioned limit (Amount in Lakhs) |
|---|-----------|--------------------|---|---|---|--|
|   |           |                    |   |   |   |  |
|   |           |                    |   |   |   |  |
|   |           |                    |   |   |   |  |
|   |           |                    |   |   |   |  |
| Total Sanction Amount (Amount in Lakhs) |           |                    |   |   |   |  |

We state that all the credit facilities availed by me/us as declared above is true and up to date in all respects. Bank has the right to act on the account by parking freeze or closing the account, if the information found is incorrect, without giving prior notice to me/us. I/We here by voluntarily give my/our consent to extract the information available in Credit Information Companies (CICs) National E-Governance Services Ltd. (NeSI), Etc. To compute my / Our aggregate exposure for the purpose of opening of Current Account as per RBI Guidelines.

Borrowers having credit facilities from NBFCs/Fis/Non-Bank institutions is excluded while calculating the overall exposure in the Banking system.

Name: \_\_\_\_\_

Signature

Designation: \_\_\_\_\_

(Individual/Karta/Authorised Signatory/Director/Proprietor/Partner/Trustee)

## Nomination Form DA 1

Nomination under section 45 ZA of the Banking Regulation Act. 1949 and Rule 2 (1) of the Banking Companies (Nomination) Rules, 1985 in respect of bank deposits

I/We \_\_\_\_\_  
(Name & Address)

nominate the following person to whom in the event of my/our/minor's death, the amount of the deposit, particulars are given below, may be returned.

\_\_\_\_\_  
(Name and address of branch / office in which the deposit is held)

### DEPOSIT

| Nature of A/c. | Distinguishing A/C. No. | Additional details, if any |
|----------------|-------------------------|----------------------------|
|                |                         |                            |

### NOMINEE (S)

|   |           |
|---|-----------|
| Name _____                                | Age _____ |
| Relationship with depositor, if any _____ |           |
| If nominee is minor, Date of Birth _____  |           |
| Address _____                             |           |

2. As the nominee is a minor on this date, I / We appoint, Shir / Smt. / Kum. \_\_\_\_\_

(Name, Address and Age)

to receive the amount of the deposit on behalf of the nominee, in the event of my/Our/Minors death during the minority of the nominee.

Name(s), Signature(s) &  
Address (es) of Witness/es @

Signature(s) / Thumb impression (s)  
of Depositor (s)

Where deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

\* Strikeout, if nominee is not a minor  
@ Thumb impression(s) shall be attested by two witnesses.

----- Cut Here -----

### NOMINATION FACILITY - ACKNOWLEDGEMENT

Regd. No.

We acknowledge receipt of nomination made by you in favour of Sri/Smt./Kum. \_\_\_\_\_  
Aged \_\_\_\_\_ years in respect of your \_\_\_\_\_ Account Number of form DA  
(SB/CA/TDR/STDR/RD etc.)  
dated \_\_\_\_\_ please quote nomination register No. in your correspondence.

**BRANCH MANAGER**



**Note:** To be obtained separately from each account holder in case joint Account.

## DECLARATION

### FORM No. 60

Form of declaration to be filled by a person who does not have either a PAN or GIR and who makes payment in cash in respect of transaction specified in clause(a) to (k) of IT Rule 114B

1. Full Name and address of declarant :
2. Particulars of transaction :
3. Amount of transaction: Rs. .
4. Are you assessed to tax ? : YES / NO
5. If yes (i) Details of ward/circle where the least return of income filed ?  
(ii) Reasons for not having PAN :
6. Details of the document being produced in support of address in column (1) :  
Please refer to account No.

(Signature of declarant)

I \_\_\_\_\_ do here by declare that what is stated above is true to the best of my knowledge and belief.

Date :

Place :

(Signature of declarant)

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### FORM No. 61

Form of declaration to be filled by a person who has agricultural Income and is not in receipt of any other income charged ie to income tax in respect of transaction specified in clauses (a) to (k) of IT Rule 114B.

1. Full Name and address of declarant :
2. Particulars of transaction :
3. Details of documents being produced in support of address in column (1) :  
Please refer to account No.

I here by declare that my source of income is from agriculture and i am not required to pay income-tax on any other income if any.

Date :

Place :

(Signature of declarant)

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I \_\_\_\_\_ do here by declare that what is stated above is true to the best of my knowledge and belief.

Date :

Place :

(Signature of declarant)

Whichever is applicable

Information Sheet

\_\_\_\_\_ BRANCH

**A) OCCUPATION : Nature / Activity of business/occupation**

1. Occupation
1. Salaried  2. Self employed/Professional  3. Business  4. Student
4. Retired  6. Agricultural & Allied  7. Other (Specify .....)
2. If Self employed
1. Doctor  2. Lawyer  3. Engineer  4. Business
5. C.A.  6. Others : \_\_\_\_\_
3. If employed, furnish Name and address of employer with Phone No. \_\_\_\_\_
4. Source of funds : \_\_\_\_\_
5. Purpose of opening of account : \_\_\_\_\_
6. Monthly / Annual Income
- Upto Rs. 10,000/-  Above Rs. 10,000/- upto Rs. 20,000/-
- Above Rs. 20,000/-  Above Rs. 50,000/- upto Rs. 1,00,000/-
- Above Rs. 1,00,000/- upto Rs. 5,00,000/-  Above Rs. 5,00,000/-
- ii) Annual Turnover / potential activity expected in the a/c. : \_\_\_\_\_

**B) PERSONAL**

7. Martial Status :  Married  Un Married
8. Your Educational Qualifications
- Upto Inter / HSC  Graduate  Post Graduate
- Professional (Please specify) : \_\_\_\_\_
9. Your Spouse's Qualification
- Upto Inter/HSC  Graduate  Post Graduate
10. Family Members
- | Age group      | upto 10 yrs | 11 to 20 | 21 to 45 yrs | 46 to 60 yrs | Above 60yrs | Total |
|----------------|-------------|----------|--------------|--------------|-------------|-------|
| No. of Males   | +           | +        | +            | +            | =           |       |
| No. of Females | +           | +        | +            | +            | =           |       |
11. Any relative settled abroad Yes  No  . If yes, Please mention their names and address
1. Name \_\_\_\_\_ Address : \_\_\_\_\_
2. Name \_\_\_\_\_ Address : \_\_\_\_\_
12. How many times you have been abroad in last three years
- Never  1 to 5 times  Above 5 times
13. Do you have a Credit Card Yes/No
- Name of the Bank \_\_\_\_\_ Card No. \_\_\_\_\_

**C) DEALING WITH OTHER BANKS**

14. Name of the Bank and Branch \_\_\_\_\_

**D) EXISTING CREDIT FACILITIES, IF ANY:**

- |                   |        |                      |        |                    |        |
|-------------------|--------|----------------------|--------|--------------------|--------|
| 15. Car Loan      | Yes/No | 18. Business / Agl.  | Yes/No | 21. Education Loan | Yes/No |
| 16. Consumer Loan | Yes/No | 19. Housing Loan     | Yes/No | 22. Others         | Yes/No |
| 17. Credit Cards  | Yes/No | 20. Against Security | Yes/No |                    |        |

**E) ASSETS :** Total Rs. \_\_\_\_\_ (approximate)

23. Vehicle :  Car  Two Wheeler  Others  None
24. House you live in :  Ancestral  Owned  Rented  Employer's
25. Life policy for  Upto Rs. 1 lac  Upto Rs. 2 lacs  Upto Rs. 5 lacs  Above Rs. 5 lacs
26. Other investment :  Upto Rs. 1 lac  Upto Rs. 2 lacs  Upto Rs. 5 lacs  Above Rs. 5 lacs
27. Any other Assets : \_\_\_\_\_

(Signature of the Customer)



Terms & Conditions for opening of SB Accounts - Declaration

1. I affirm and declare that I have read over and understood the rules and regulations of the "Bank" and those relating to various services offered by the Bank including but not limiting to debit card/internet banking/SMS banking/ Tele-Banking/Mobile Banking/ Virtual Banking and any other facilities. I agree to abide by the same as amended/ modified from time to time by the Bank/Regulator/Government published through circulars, notifications, notice board/websites/ newspaper publications, etc. I waive the rights, if any, to have personal notice in respect of such amendments/modifications. I agree that the transactions and request executed in my account(s) through internet, mobile, tele/banking or virtual banking under my User ID and password/PIN/ OTP will be legally binding on me & I am responsible for the maintenance of secrecy and confidentiality of the authentication credentials and any other information/details/ OTP/PIN, etc., in such matters. I agree that Bank has got all the rights to debit my account for any service charge, expenses or other dues which the Bank is entitled/liable to recover from me. I also authorise the Bank and agree to close/discontinue my account without any notice to me. I hereby undertake to inform the Bank on any change in my communication address or constitution.
2. In respect of accounts opened on the basis of Aadhaar details, I hereby declare that I have submitted the Aadhaar Card issued by UIDAI voluntarily for identification and / or address proof towards the compliance of KYC norms under the PMLA, 2002 and I hereby consent that the Bank may verify the same with the UIDAI and authorise the UIDAI expressly to release the identity and address through biometric authentication to the Bank. I wish to see this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) including LPG subsidy from Govt of India (GOI) in this account I understand that if more than one benefit transfer is due to me, I will receive all the benefit transfers in this account.
3. I confirm and declare that I am not prevented/prohibited/restricted by any applicable legal/regulatory/contractual or other provisions from opening and/or maintaining the accounts or to transact with the Bank in any other way.
4. I agree that my personal KYC details may be shared with Central KYC registry or any other competent authority. I hereby consent to receive information from the Bank/Central KYC Registry/ GOI/RBI or any other authority through SMS/e-mail on my registered mobile number/ e-mail address. I also agree that the non-receipt of any such SMS/e-mail shall not make the Bank liable for any loss or damage whatsoever in nature.
5. I hereby certify that I have declared my status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No. S.O. 2155 (E) dated 7 August 2015 and RBI Circular Ref No. DBR.AML.BC.No.36/14.01.001/2015-16 dated 28 August 2015 in the matter including any subsequent modification/amendment thereof.
6. I understand, acknowledge and authorize that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government/RBI in the matter, depending upon the residential status and / or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the inter - Governmental Agreements (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and / or any other similar arrangements.
7. I certify & declare that the information provided by me for opening loan account and availing other services herein or through website/electronically as applicable to me signed/ authenticated by me as well as in the documentary evidence provided by me for opening loan account and availing other services are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may effect the assessment/categorization of my account as a U.S. Reportable Account or Other Reportable Account or otherwise. In case any of the information or details provided by me is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
8. I undertake the responsibility to declare and disclose immediately and in no case beyond 30 days from the date of change, any changes that may take place in the information provided herein / or otherwise, as well as in the documentary evidence provided by me or if any certification becomes incorrect or undergoes a change. I further undertake to provide fresh and valid self-certification along with documentary evidence as and when so required; nevertheless all declaration and undertaking given herein will also be applicable to all such modified/amended document/ information provided by me unless revised self-certification as above is provided to the Bank.
9. I also agree that my failure to disclose any material fact/information know to me now or in future or my failure to remedy any deficiency in documents/information/other details within the stipulated period, may invalidate me from transacting in the account and the Bank would be within its right to put restrictions in the operations of my account or to close it or to report to any regulator and/or any authority designated by the Government of India (GOI)/ RBI for the said purpose or take any other action as may be deemed appropriate by the Bank under the guidelines issued by CBDT/RBI/GOI from time to time.
10. I also agree to furnish and intimate to the bank any other particulars that are called upon me to provide on account of any change in law either in India or abroad in the above matter or otherwise.
11. I shall identify the Bank from any loss/damage that may be caused to the Bank on account of any defect/mistake in the details provided herein or on account of providing incorrect or incomplete information by me.
12. I undertake to submit data/information together with fresh KYC documents for updation of KYC details at periodical intervals as may be required by the Bank.
13. I understand that the account will be activated and debits will be allowed only after completion of Customer Due Diligence relating to KYC by the Bank.
14. In case the account is opened without PAN. I undertake to submit PAN on or before such date as may be notified by the Government of India, failing which the account shall cease to be operational till the time PAN is submitted, as per Prevention of Money - Laundering (Maintenance of Records) Rules 2005.
15. In case, deemed OVDs are submitted for Current Address at the time of Account opening. I undertake to submit Aadhaar or any of the OVD having Current Address within 3 months from the date of account opening, failing which I understand that my account may cease to be operational as per GOI guidelines at the material time.
16. I have received the Welcome Kit containing INB Kit and ATM card/cheque book and understand that in case of any misuse/misplacement of the contents of the Kit, the Bank will not be liable for any loss/damage.
17. I hereby certify that the Savings Bank Account would be used by me to route transactions of only non-business/non-commercial nature. In the event of occurrence of such transactions or any such transactions that may be construed as commercial/business/dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and / or close the account.
18. I have been advised of Average Monthly Balance (AMB) requirement for the account to be opened and given to understand that these requirements are subject to revision/changes and such revision/ changes will be uploaded in the Bank's site which will be acceptable to me as a notice to that effect.
19. I confirm that the product features of BSB account have been explained to me (applicable to BSB account applicant)
20. I acknowledge receipt of rules and regulations of Savings Bank Account.
21. I have been advised that if I do not provide my mobile number, I will not be eligible for any facility of electronic transactions other than ATM cash withdrawals.
22. (Applicable for accounts opened for credit of Social Welfare Benefits) I understand that his account will be opened under BSB category. I also understand that, in case, I do not wish to continue in this BSB account, and switch over to Regular Savings Bank Account, I will have to maintain the Average Monthly Balance (AMB) applicable for Regular Savings Bank Account. I therefore undertake to maintain AMB in the account if I switch over to Regular Savings Bank Account from BSB.
23. (Applicable for accounts opened in the name of Minors) I understand that the requirements of Average Monthly Balance (AMB) and penalty for non-maintenance will be applicable in this account once the applicant becomes Major. I therefore undertake to maintain Average Monthly Balance (AMB) from the date of attaining majority.
24. 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.
25. I/We confirm that the product features of the account have been explained to me.

**Please Fill in for HUF:**

Signature

As our HUF Firm wishes to open an account with your bank in the said name ..... We beg to say that the first signatory to this letter i.e., ..... in the karta of the joint family and other signatories are the adult Co-parceners of the same family we further confirm that the business of the said joint family is carried on mainly by the said Karta as also by the other signatories hereto in the interest and for the benefit of the entire body co-parceners of the joint family. We all under take that clients due to the bank from the said family shall be recoverable personally for all or many of us and also for the entire family properties of which the first signatory is the Karta, including the share of minor co-parceners, in view of the fact that ours is not a firm governed by the Indian partnership Act of 1952, we have not our said firm registered under the said act. We hereby under take to inform the bank of the death or beath of a co-parceners of any change accounting at anytime in the membership of our jointfamily during the currency of the account.

**Name & Signature of Karta**

1). \_\_\_\_\_ Signature \_\_\_\_\_

**Name & Signature of Adult Co-parceners**

1). \_\_\_\_\_ Signature \_\_\_\_\_  
 2). \_\_\_\_\_ Signature \_\_\_\_\_  
 3). \_\_\_\_\_ Signature \_\_\_\_\_  
 4). \_\_\_\_\_ Signature \_\_\_\_\_

**Name & Date of Birth of Minor Co-parceners**

1). \_\_\_\_\_ DOB \_\_\_\_\_  
 2). \_\_\_\_\_ DOB \_\_\_\_\_



**FOR OFFICE USE ONLY**

1. Applicant(s) interviewed by and purpose ascertained \_\_\_\_\_
2. Introducer called at the branch & interviewed by \_\_\_\_\_
3. Introducer did not call at the branch but confirmation obtained by \_\_\_\_\_  
(mode of confirmation)
4. Particulars of Identification / Proof of Address \_\_\_\_\_  
(Xerox copy of the documents obtained)
5. Account opened on (Date) \_\_\_\_\_
6. Account opened by Clerk (Name) \_\_\_\_\_
7. Account opening authorised by officer (Name) \_\_\_\_\_
8. Letter of thanks sent to customer on \_\_\_\_\_ & introducer on \_\_\_\_\_
9. Acknowledgement received from customer on \_\_\_\_\_ & introducer on \_\_\_\_\_
10. Nomination form entered in register & its serial No. \_\_\_\_\_
11. Vehicle No. / Driving Licence verified by \_\_\_\_\_
12. Threshold Limit (as per KYC norms) Rs. \_\_\_\_\_
13. Interent (INB) / Tele Banking ID dispatched on \_\_\_\_\_
14. Customer particulars Loaded in site on \_\_\_\_\_
15. INB service approved & INB customer flag set to 'Y' in Bankmaster
16. ATM / Debit / Smart Card / Debit Card No. \_\_\_\_\_ Dispatched on \_\_\_\_\_  
Pin mailer delivered / dispatch on \_\_\_\_\_

**OPEN THE ACCOUNT  
REJECT (GIVE REASONS)**

**ACCOUNT No. :** \_\_\_\_\_

**Branch Manager/Authorised Officer**

**Officer / Spl. Assistant**

**Clerk**

**Customer Risk Profile**

|       |
|-------|
| XXXXX |
| XXXX  |
| XXX   |
| XX    |
| X     |
| N     |

**Any other information received during the conduct of account**

| SI.No. | Date | Information |
|--------|------|-------------|
|        |      |             |
|        |      |             |
|        |      |             |
|        |      |             |
|        |      |             |
|        |      |             |
|        |      |             |

Account transferred to \_\_\_\_\_ / Branch on \_\_\_\_\_

Account closed on \_\_\_\_\_

\_\_\_\_\_  
Signature of Officer