



## Account Opening Form



## Checklist for Savings Account

Checklist for Individuals / Minors / Applicant(s):		For the Applicants	
1	Self attested copy of PAN submitted by all applicants	<input type="checkbox"/>	<input type="checkbox"/>
2	Proof of Identity / Address - Submit supporting officially valid documents	<input type="checkbox"/>	<input type="checkbox"/>
3	KYC form is duly filled, signed and submitted by ALL applicants	<input type="checkbox"/>	<input type="checkbox"/>
4	Latest photograph with clear background and signed across such that part of the signature is on the Account Opening Form	<input type="checkbox"/>	<input type="checkbox"/>
5	On the CKYC-1 form, signature to be affixed on the space provided below the photograph	<input type="checkbox"/>	<input type="checkbox"/>
6	Complete address of the applicant, i.e Name and Address in full with Pincode is provided	<input type="checkbox"/>	<input type="checkbox"/>
<b>FTR CHECKLIST</b>			
1	All the relevant fields on the Account Opening Form & CKYC-1 are completely filled in	<input type="checkbox"/>	<input type="checkbox"/>
2	Please check that Customer has signed the Account Opening Form and CKYC-1 in all the required boxes	<input type="checkbox"/>	<input type="checkbox"/>
3	KYC document should be legible	<input type="checkbox"/>	<input type="checkbox"/>
4	Original seen & verification stamp is affixed on KYC document obtained with PA/RP stamp of the branch official	<input type="checkbox"/>	<input type="checkbox"/>
5	All alterations/corrections are attested by the customer	<input type="checkbox"/>	<input type="checkbox"/>
6	Name of the customer on both the Account Opening Form & CKYC-1 form should match exactly as per Proof of identity	<input type="checkbox"/>	<input type="checkbox"/>
7	Product declaration obtained as applicable.	<input type="checkbox"/>	<input type="checkbox"/>
8	In case of Joint Account, relationship of all the holders with the primary holder is to be clearly mentioned on the Account Opening Form	<input type="checkbox"/>	<input type="checkbox"/>



**5. MODE OF OPERATION\* :**

Self  
  Either or Survivor/s  
  Former or Survivor/s  
  Any one or Survivor/s  
  All Jointly  
 Minor operated by self  
  Minor operated by guardian  
  Others (Specify) \_\_\_\_\_

**Savings Account:** I/We hereby give my/our express consent that in case of death of anyone or more but not all joint account holders, SVC Co-Op. Bank Ltd. is permitted to allow operations of the said account to the surviving joint account holder/s without referring the matter to the legal heir of the deceased account holder/s

**Fixed Deposit (all types):** I/We hereby give my/our express consent that in case of death of any one of the joint depositor/s, SVC Co-Op. Bank Ltd. is permitted to make payment of deposits prematurely being principal along with the interest, to the surviving depositor/s.

Self attestation and round stamp of the branch across all photos	Passport size latest colour photo of Applicant 1	Passport size latest colour photo of Applicant 2	Passport size latest colour photo of Applicant 3	Passport size latest colour photo of Applicant 4
	Signature	Signature	Signature	Signature
Name	_____	_____	_____	_____
Cust ID	_____	_____	_____	_____
CKYC No.	_____	_____	_____	_____

**6. CHANNEL FACILITY**

(Mobile No. and email ID of the primary holder will be registered for all requests.) Cheque book and Debit card will be issued as per applicable rules and delivered to the correspondence address only.

**Debit Card** As per product      Name to be embossed on Debit Card : \_\_\_\_\_  
(if no details are provided, the debit card will be issued in 1st account holders name)

**Cheque Book**      Name to be embossed on Cheque Book \_\_\_\_\_

I request you to send the Debit Card/Cheque Book to my Current Address     
  I will collect the Debit card/Cheque Book from the branch

Account Holder	SMS Alerts(*) required (tick if Yes)	Personal NetBanking / Mobile Banking Facility Required (tick if Yes)	Debit Card Required (tick if Yes)	Monthly Email Statement (tick if Yes)
Primary Holder	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Joint Holder 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joint Holder 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joint Holder 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: (\*) Charges are applicable for SMS Alerts as per SOC

**7. NOMINATION\* (Form DA 1) (Mandatory in case of accounts with Mode of Operation as Self/Jointly)**

Nomination under Section 45 ZA read with section 56 of the Banking Regulation act 1949 and Rule 2(1) of the Co-operative Banks (Nomination) Rules 1985, in respect of the Bank deposits. The nomination facility is available for all type of accounts & the account holders are advised to avail the facility for smooth settlement of claim by legal heir in unforeseen circumstances. **In case of more than 1 nomination kindly fill up DA1 form.**

**Nomination required:** I/We nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the above account, may be returned by SVC Co-op. Bank Ltd.

**Nomination not required:** I/We, hereby, decline to presently nominate any individual & understand the risks & consequences of my failure to give nomination.

Full Name of Nominee	Address of Nominee	Relationship with Nominee	Date of Birth*	Age

\*As the nominee is a minor/specially abled on this date, appoint Mr./Mrs. \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ Date of Birth \_\_\_\_\_ Contact No. \_\_\_\_\_ Relation with Minor \_\_\_\_\_

To receive the amount of deposit on behalf of the nominee in the event of my/our minor's death during the minority of the nominee.  
 \*\*where the deposit is made in the name of minor, the nomination should be signed by the person lawfully entitled to act on behalf of the minor.  
 In case the customer prefers not to nominate, the same has to be recorded on this form. Joint account/deposit holder having availed the survivorship benefit, Saving/Current Account can be operated by the survivor/s and/or deposit are payable to survivor/s in case of death of one or more but not all of the joint account/deposit holder.  
 I/We are aware that in case of no nomination, we will abide by the Death Claim procedure of the Bank as applicable to us.

Signature \_\_\_\_\_

Name : 1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_

**(Two witness mandatory in case of thumb impression)**

Nomination Registration No. : \_\_\_\_\_ Place: \_\_\_\_\_ Date : DD MM YYYY

Name	Address	Signature
Witness 1		
Witness 2		

## DECLARATION :

1. I/We confirm that I am /we are resident/s of India.
2. I/We hereby declare that all the above information voluntarily submitted by me, is true, correct & complete.
3. I/We have read and understood the terms and conditions as displayed on the Banks Website (www.svcbank.com), governing the opening of an account with SVC Co-operative Bank Ltd. and those relating to use of various services including but not limited to ATM /SVC International Visa / RuPay Debit Card / Banc@Cell(SMS Banking) / Banc@Cell (Phone Banking) / Banc@ease (NetBanking).
4. I/We authorize SVC Co-operative Bank Ltd. to issue me / us SVC International Visa/RuPay Debit cum ATM card.
5. I/We declare and state that we will adhere to stipulated norms related to Debit Cards specified by the Bank.
6. I/We further agree that the Bank shall be under no duty to verify the identity or authority of the person giving any instruction or the authenticity of such instruction apart from verifying my / our Internet Banking ID and Password.
7. I/We agree that I/We shall be entirely responsible for any funds transferred from my / our Internet Banking registered account/s to any third party beneficiary/s account/s that I / we register using Internet Banking.
8. I/We indemnify and agree to keep the Bank indemnified for all and / or any losses, cost, expenses etc. suffered or incurred by the Bank by reason of incorrect / incomplete information being furnished and for by reason of misuse of the Banc@Cell(SMS Banking) / Banc@Cell (Phone Banking) etc.
9. I/We state and declare that in case I/we desire to discontinue any facility, I/we shall by a request notice inform the Bank about the same by phone or SMS from registered number as per Bank records.
10. I/We shall take all precautions to protect my / our account details to avoid any unauthorized use. SVC Co-op Bank Ltd. shall not be liable for any losses arising from my / our sharing / disclosing of Login id, Password, Cards, Card numbers or PIN (personal identification number) to anyone, nor shall make claims on the bank for any unauthorized use.
11. I/We do hereby solemnly declare that the information provided above with respect to my/our account is up to date and correct.
12. I/We hereby agree to the Bank merging my/our customer identification number across all my relationship with the Bank so that the Bank shall allot me an Unique Customer Identification Code as mandated by the Reserve Bank of India.
13. I/We accept and agree to be bound by the said terms & conditions including those excluding/limiting the banks liability.
14. I/We understand that the bank at its absolute discretion may discontinue any of the services completely or partially without any notice to me/us.
15. I/We agree that the bank may debit my account for the service charges as applicable from time to time.
16. I/We understand and undertake that the usage of the Debit Card shall be strictly in accordance with the Exchange Control Regulation and in the event of any failure to do so, I/we will be liable for the action under the Foreign Exchange Management Act 1999 and the amendments thereof stipulated by the Reserve Bank of India.
17. I/We have to advise that SVC Co-operative Bank Ltd. may pay to anyone of us, any day either before or on due date, on or after due date and where no due date is fixed, on demand, the principal along with interest. Payment to any one of us is discharge to the bank from all of us, until you receive a notice contrary to it from both/all of us. In case of death of any one, amount is to be paid to the survivor(s) as applicable if opted for survivorship mandate.
18. I/We undertake to inform the Bank about any changes in the status of account holders/ accounts or disputes arising between the account holders or in respect of the above accounts and hereby indemnify the Bank and its officials against any loss or damage suffered or incurred by the Bank by reason of failure by me / us to inform the Bank about any changes/disputes.
19. In case I/We fail to submit the copy of PAN card as per Gazette Notification within the period of six months from the date of opening the account, I/We authorize the Bank to freeze the account for further operations till such submissions.
20. I/We agree that my/our employer has full rights to reserve any instruction given by them to debit my/our

a  
c  
c  
o

unt for any amount within a period of three working days and I/we will not dispute or hold the Bank responsible for any such debits in my account. I/We understand that it is my/our responsibility to inform the Bank immediately of termination of my/our employment with my/our current employer where upon I/We will cease to enjoy any or all benefits under Salary Account Scheme. If no salary credits are sighted in the account for consecutive six months, the Bank reserves the right to change the status of Corporate Salary account to Savings account of the Bank without any intimation to the account holder and the Terms and Conditions as applicable to the Savings account of the Bank shall apply to the account from the date of change of the status.

21. Fixed Deposit: In case the depositor fails to submit the original receipt duly discharged within 14 days from the maturity date to the branch, interest as per prevailing savings rate will be paid from the maturity date till the date of submission of the deposit receipt to the bank.
22. The Depositor is insured in DICGC upto a maximum amount of ₹5,00,000/- in case of liquidation of the Bank.
23. The terms and conditions of opening and maintaining the savings account have been explained to me by the Branch officials and I/we agree to be bound by the same.
24. The Bank offers passbook facility to all individual account holders. Please tick here to opt in for the facility.
25. I/We declare that the above information provided by me is true and correct to the best of my knowledge. I am aware that I may be held liable for all the charges incurred if dispute is found invalid. I/We hereby declare and agree to pay the said charges, the disputed amount along-with interest if the said investigation is found invalid.
26. In case of minor a/c the guardian will represent the said minor in all transaction of any description in the minor account until the said attains maturity. The guardian indemnifies the bank against the claim of the minor for any withdrawals/transactions made in his/her account and the amount withdrawal will be for benefit of the minor.
27. Sharing of Information/Disclosure:
  - a. The customer by opening & maintaining any account with the bank gives the bank the right to share/disclose customer account/personal information as available with bank with any entity which has the right to access such information which may include but may not be limited to:
    - i. Reserve Bank of India (RBI)
    - ii. Government of India through its authorized representative/body
    - iii. Courts/investigating agencies
    - iv. Securities Exchange Board of India (SEBI)
    - v. Authorized representatives of the Stock exchanges
    - vi. Auditors, professional advisors
    - vii. Third party service providers with whom the bank has executed legal contract on 'services/products' and who will need to access the information
    - viii. Any other legal entity/authorized individual who is entitled to such information
    - ix. Credit Information Bureaus including but not limited to CIBIL
  - b. The bank reserves the right to source for any other information about the customer or his accounts/ financial condition as may be deemed fit by the bank through whatever sources are available to the bank.
  - c. SVC Co-operative Bank Ltd. uses customers contact information for service and promotional activities. For this SVC Co-operative Bank Ltd. may share the customers information with other arm of the Banks group company(s) or any such third party that are bound by conditions (on use of customer information provided by SVC Co-op Bank Ltd.) SVC Co-operative Bank Ltd. takes express consent from customer on this aspect during account opening.
28. I/We say that whatever stated hereinabove is stated with full state of mind without any coercion, undue influence, fraud or misrepresentation and is true to the best of my knowledge.
29. I/We hereby consent SVC BANK for availing Beneficiary Name Look Up Facility enabling the Bank to share my/our Account Name to sender/Remitter for smooth NEFT/RTGS transaction processing. My/our consent will remain valid till submission of written request of discontinuation from my/our end.

\*Account will be activated subject to KYC compliance and verification of documents.

Signature : (Applicant 1)

Signature : (Applicant 2)

Signature : (Applicant 3)

Signature : (Applicant 4)

## SAVINGS BANK ACCOUNT - RULES AND REGULATIONS:

1. The savings bank accounts should be used 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 dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and/or close the accounts.
2. Interest on the Savings Bank Deposit is calculated at a rate fixed by the RBI from time to time. This interest will be paid at half yearly rests on the daily balance in the account.
3. The customer should maintain minimum Average Quarterly Balance as may be required from time to time in the account as communicated at the time of opening of the account. Changes in the bank / services charges or minimum balance requirements are displayed on the notice board of the branches and on the website. The non-maintenance of the adequate balance shall automatically entitle the Bank to levy the charges for non-maintenance of the average balance. In such an event, the Bank shall have first right to set-off any available credit that may be available in the account including from amounts flowing into the said account from the collection proceeds or any deposits.
4. Notwithstanding the above, if the Bank is of the opinion that if the customer does not maintain the average quarterly balance and / or if the account remains a Zero balance account and / or the overall conduct of the account is not satisfactory, the Bank shall have a right to close the account by issuing fifteen days notice. In the event, if the said account is funded within fifteen days period the Bank may not exercise the said right to closure. If not, the Bank shall close the account without any further notice to the customer.
5. In case there is no transaction in the account for 2 years the account automatically gets classified as a dormant account whereupon further debit transactions are not permitted in the ordinary course. At request for activation of the account has to be made by the customer with fresh KYC document. Satisfactory conduct of the account entails maintaining stipulated minimum quarterly average balance as well as sufficient balance to honour cheques issued to third parties. If there are high incidences to the contrary, the Bank reserves the right to close the account under intimation to the customer.
6. Any special instructions, both financial and non-financial in nature, like Standing Instructions, Stop Payment instructions, Issuance of cheque books, Demand Drafts, Pay Orders, Issuance of duplicate card / PIN must be communicated in writing. Otherwise, it shall not be binding on the Bank to comply with such instructions. Charges as applicable will be levied to the customer.
7. Request for Hot marking of Debit cards / NetBanking / New Cheque book / Account statement / Balance certificate can be processed by calling SVC Care Toll Free number 1800 313 2120 from customers registered mobile number.
8. The Savings Bank Account entitles free access to SVC Co-Operative Bank Ltd. Internet Banking unless otherwise stated.
9. Availing of the Anywhere Branch Banking (ABB) facility and the At Par Cheque facility is contingent upon the limits and service charges stipulated for these facilities.
10. Any change of address should be immediately communicated in writing to the Bank along with Address Proof.
11. The Bank at its options but at the risk and responsibility of the account holder may a. Collect proceeds of the instrument lodged by the account holder from time to time b. Appoint agents to collect the proceeds of the instrument lodged by the account holder and as such agents appointed shall be the agent/s of the account holder to collect such instrument.
12. Recover proceeds of instrument lodged by the account holder by way of bank draft /cheques or any other mandate in lieu of cash.
13. Take action / steps as deemed necessary to have proceeds of the instruments lodged. The Bank is hereby empowered to recover the various charges, if any by debiting the same to the account holder.
13. The Bank reserves the right to close the account in case KYC documents provided for opening the account is not found satisfactory.
14. Sharing of Information/Disclosure:
  - a. The customer by opening & maintaining any account with the bank gives the bank the right to share/disclose customer account/personal information as available with bank with any entity which has the right to access such information which may include but may not be limited to:
    - i. Reserve Bank of India (RBI)
    - ii. Government of India through its authorized representative/body
    - iii. Courts/investigating agencies
    - iv. Securities Exchange Board of India (SEBI)
    - v. Authorized representatives of the Stock exchanges
    - vi. Auditors, professional advisors
    - vii. Third party service providers with whom the bank has executed legal contract on 'services/products' and who will need to access the information
    - viii. Any other legal entity/authorized individual who is entitled to such information
    - ix. Credit Information Bureaus including but not limited to CIBIL
  - b. The bank reserves the right to source for any other information about the customer or his accounts/ financial condition as may be deemed fit by the bank through whatever sources are available to the bank.
  - c. SVC Co-operative Bank Ltd. uses customers contact information for service and promotional activities. For this SVC Co-operative Bank Ltd. may share the customers information with other arm of the Banks group company(s) or any such third party that are bound by conditions (on use of customer information provided by SVC Co-op Bank Ltd.) SVC Co-operative Bank Ltd. takes express consent from customer on this aspect during account opening.
14. The customer by opening & maintaining any account with the bank gives the bank the right to share/disclose customer account/personal information as available with bank with any entity which has the right to access such information which may include but may not be limited to:
  - i. Reserve Bank of India (RBI)
  - ii. Government of India through its authorized representative/body
  - iii. Courts/investigating agencies
  - iv. Securities Exchange Board of India (SEBI)
  - v. Authorized representatives of the Stock exchanges
  - vi. Auditors, professional advisors
  - vii. Third party service providers with whom the bank has executed legal contract on 'services/products' and who will need to access the information
  - viii. Any other legal entity/authorized individual who is entitled to such information
  - ix. Credit Information Bureaus including but not limited to CIBIL
15. Any change of address should be immediately communicated in writing to the Bank along with Address Proof.
16. The Bank at its options but at the risk and responsibility of the account holder may a. Collect proceeds of the instrument lodged by the account holder from time to time b. Appoint agents to collect the proceeds of the instrument lodged by the account holder and as such agents appointed shall be the agent/s of the account holder to collect such instrument.
17. Recover proceeds of instrument lodged by the account holder by way of bank draft /cheques or any other mandate in lieu of cash.
18. Take action / steps as deemed necessary to have proceeds of the instruments lodged. The Bank is hereby empowered to recover the various charges, if any by debiting the same to the account holder.

15. Information written on the Cheque must be legible. No alteration or overwriting is allowed under CTS Clearing. The date field can be altered by attesting the revised date with your complete signature.
16. Any person resident in India collecting and effecting/remitting payments directly/indirectly outside India in any form towards overseas foreign exchange trading through electronic / internet trading portals would make himself / herself / themselves liable to be proceeded against with for contravention of the Foreign Exchange Management Act (FEMA), 1999 besides being liable for violation of regulations relating to Know Your Customer (KYC) Norms/Anti Money Laundering (AML) standards.
17. If no salary credits are made in the account for continuous six months since the date of opening the account, the Bank reserves the right to change the status of the Corporate Salary Account to regular Savings account and the Terms and Conditions as applicable to the regular Savings Account of the Bank shall apply to the account from the date of change of the status.
18. The Bank, upon receipt of written instructions from the employer has full right to reserve an instruction given by the employer to debit the salary account for any amount within a period of three working days from the day of debit. Bank will not be held responsible for any such debits in customers' salary account.
19. It is responsibility of the customer to inform the Bank immediately of termination of his/her employment with his/her current employer whereupon the customer will cease to enjoy any or all benefits under Salary Account Scheme.
20. The Bank reserves the right to make any changes, alterations, cancellations, in the above rules at any time without notice. Any person opening the account shall be bound by the rules governing the account.
21. You will be bound by and abided by the Bank's General Terms & Conditions available on Bank's website and Savings Bank Rules as mentioned overleaf.
22. The Depositor is insured in DICGC upto a maximum amount of ₹5,00,000/- in case of liquidation of the Bank.
23. The Bank shall have the right to close an account by giving the customer a written notice of 30 days without assigning any reasons.
24. Initial deposit will be credited to the account subject to due diligence compliance only. No interest will be paid for interim period.

**ACKNOWLEDGEMENT COPY**

You have signed up for product \_\_\_\_\_ and agree to maintain applicable quarterly / monthly balance of ₹ \_\_\_\_\_ and bank is authorized to reject/cancel your account in case any discrepancies or suspicious transactions are observed in this account.

A/c. No./Ref. No. \_\_\_\_\_ Date: \_\_\_\_\_

Initial Payment: \_\_\_\_\_ Nomination: \_\_\_\_\_

**Nomination Details**

NAME	RELATIONSHIP	AGE

Branch official's sign & stamp

**Terms & Conditions of Auto Renewal Term Deposit**

1. This Term Deposit is subject to the Bank's Deposit Policy, available at Branches or on the bank's website, www.svc.bank.in.
2. For any changes in Maturity instructions (Auto Renewal / Auto Closure), the Depositor should notify the Bank at least one week before maturity of the Deposit. Please quote your account number for all future correspondence with the Bank.
3. In case of Auto Renewal, no intimation is received for change in renewal scheme or period prior to the maturity of Deposit or period prior to the maturity of Deposit, the Term Deposit, on maturity, will be automatically renewed for the same period for which it was originally kept, at the rate of interest prevailing on the date of maturity.
4. In case of Auto closure, maturity proceeds of Term Deposit will be credited to the account designated as the Repayment Account ID or provided in Payment Instructions during the initial deposit booking.
5. In case of no Maturity disposal instructions registered (Auto Renewal / Auto closure), accounts will remain in matured status. If the depositor fails to submit the original receipt duly discharged within 14 days from the maturity date to the branch, interest as per the prevailing savings rate or contracted rate of matured Term Deposit, whichever is lower, will be paid from the maturity date till the date of submission of the deposit receipt to the Bank.
6. Any change in instructions before maturity, including encashment of Term Deposit before maturity, requires signatures of all depositors.
7. If a Minor holding a Term Deposit has attained Majority (on or before the Term Deposit maturity day), the proceeds of the Term Deposit, upon Maturity, will be credited to the account captured as Repayment account ID or Payment Instructions in the Term Deposit, irrespective of the maturity instructions of auto-renewal given to the Bank. In case the instructions are absent, the deposit will remain in the matured status.
8. If the Term Deposit remains unclaimed for more than 10 years post maturity, it will be transferred to RBI's DEAF (Deposit Education and Awareness Fund) scheme as per extant RBI guidelines.
9. The Bank reserves the right of levying penalty for premature withdrawal of Term Deposits.
10. The Bank reserves the right to change the rules from time to time without prior notice to the depositors and such rules shall be applicable from the date they are made effective.
11. Tax / TDS: Interest accrued / earned on Term deposits is subject to Tax Deducted at Source (TDS) as applicable under Income Tax Act.
12. In case of cumulative (Reinvestment) Deposit, the amount of interest accrued thereon (Net of TDS if applicable) is reinvested. Hence actual maturity proceeds of the cumulative (reinvestment) deposit shall vary from the Original Maturity value.
13. Form 15G/15H for Nil tax deduction on term deposits interest to be submitted by resident depositors at the beginning of each F.Y. Form 15G/15H is valid only if PAN is linked with Aadhaar. TDS is applicable at higher rate if PAN is not linked with Aadhaar. Bank shall not be liable for any consequences or losses arising due to delay or non-submission of Form 15G/15H.
14. Term Deposits under Tax Exemption Scheme are locked in for the period of 5 years and not eligible for premature withdrawal (except in case of death of First holder depositor, in terms of the notification by the Government). Term Deposits under Tax Exemption Scheme are eligible for deduction under the provision of Section 80C of the Income Tax Act 1961.
15. In case of death claim settlement:
  - In the event of the death of one or more of the depositors but not all, premature closure and payment of Term Deposits held in 'Either or Survivor' or 'Former or Survivor' or 'Any One' basis shall be allowed to survivor/s. For such payment, survivor/s shall give valid discharge to the Bank. In the event of the death of one or more depositors but not all held 'Jointly', premature closure shall be allowed in favour of the surviving depositors and the legal heirs of the deceased depositors, jointly.
  - In the event of the death of all depositors, premature closure shall be allowed in favour of the legal heirs of the deceased depositors jointly. Interest will be paid at the Period Run Rate and penalty shall not be attracted for premature withdrawal of Term Deposits in case of death of any one or all depositors.
  - For Term Deposits held in the names of Entities other than Individual/s and Proprietorship Firm wherein deceased customer is one of the Related Parties, Penalty will be applicable on premature withdrawal, as per Bank Policy.
  - In the event the nominee in the fixed deposit is different from the nominee in the savings account, the Bank shall not be responsible for any dispute between the said nominees / any other person and shall proceed as per the account specific nomination registered by the customer while placing the deposit.

**FOR BRANCH USE ONLY**

Tracker ID No. / Document No.: \_\_\_\_\_

Date of Form Sent to CAO: \_\_\_\_\_ Promo Code: \_\_\_\_\_

Product/Company Code: \_\_\_\_\_ Product Name: \_\_\_\_\_

Relationship Code: \_\_\_\_\_

EMPL. Code : \_\_\_\_\_

Approvals If Any  Yes Mail Dated : \_\_\_\_\_

from \_\_\_\_\_ attached \_\_\_\_\_  
Signature of Officer with & PA/RP stamp

Applicant/s Signed in my presence

(Signature & PA/RP stamp of official whose presence the account)

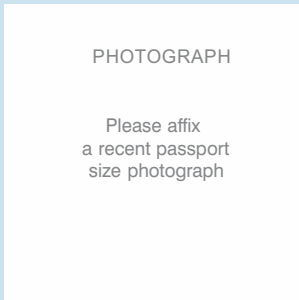
Branch Head Approval:

(Signature & PA/RP stamp of Branch Head)

For office use only Application Type\*  New  Update  Delete CBS ID: \_\_\_\_\_  
 Membership Number \_\_\_\_\_ No of Shares \_\_\_\_\_

**1. INDIVIDUAL DETAILS** (Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available, father's name is mandatory.)

<b>Purpose</b>	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Deposits <input type="checkbox"/> Others, specify _____																																																																															
<b>Name of Applicant Name*</b> (as per ID Proof)	Title	First	Middle	Last																																																																												
<b>Preferred Name</b>	Title	First	Middle	Last																																																																												
<b>Maiden Name*</b> <small>(Fathers Name mandatory in absence of PAN)</small>	Title	First	Middle	Last																																																																												
<b>Father's/Spouse Name*</b>	Title	First	Middle	Last																																																																												
<b>Mother's Name*</b>	Title	First	Middle	Last																																																																												
<b>Gender*</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	<b>Date of Birth*</b> D D M M Y Y Y Y																																																																														
<b>Marital Status*</b>	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Others																																																																															
<b>Status*</b>	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Non Resident <input type="checkbox"/> Foreign National (Passport copy mandatory for NRIs & Foreign Nationals) <input type="checkbox"/> Person of Indian Origin																																																																															
<b>Nationality*</b>	<input type="checkbox"/> Indian <input type="checkbox"/> Other (Please specify) _____																																																																															
<b>PAN*</b>	_____ <input type="checkbox"/> <b>Form 60</b> <small>(Please enclose a self attested copy of your PAN Card / Form 60 only in case eligible under Income Tax Act 1962 Rule No. 114B)</small>																																																																															
<b>Preferred Mobile*</b>	_____																																																																															
<b>Preferred International Mobile Number*</b>	_____ (For NRI Customers Only)																																																																															
<b>Preferred E-mail ID*</b>	_____																																																																															
<b>Qualification*</b>	<input type="checkbox"/> Illiterate <input type="checkbox"/> Non Matric <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Others _____																																																																															
<b>Occupation*</b>	<table border="0"> <tr> <td><input type="checkbox"/> <b>Service</b></td> <td><input type="checkbox"/> <b>Profession</b></td> <td><input type="checkbox"/> <b>Business / Self Employed</b></td> <td><input type="checkbox"/> <b>Retired</b></td> </tr> <tr> <td><input type="checkbox"/> Private Sector</td> <td><input type="checkbox"/> Doctor &amp; Allied</td> <td><input type="checkbox"/> Wholesale / Retail</td> <td><input type="checkbox"/> <b>Housewife</b></td> </tr> <tr> <td><input type="checkbox"/> Public Sector</td> <td><input type="checkbox"/> Judge / Lawyer &amp; Allied</td> <td><input type="checkbox"/> Food &amp; Beverage</td> <td><input type="checkbox"/> <b>Student</b></td> </tr> <tr> <td><input type="checkbox"/> Government Sector</td> <td><input type="checkbox"/> Engineer / Developer</td> <td><input type="checkbox"/> Manufacturing &amp; Production</td> <td><input type="checkbox"/> <b>Not Categorised</b></td> </tr> <tr> <td><input type="checkbox"/> Co-operative Sector</td> <td><input type="checkbox"/> Architect / Civil Engineer</td> <td><input type="checkbox"/> Agriculture &amp; Allied</td> <td><input type="checkbox"/> <b>Others</b> _____</td> </tr> <tr> <td><input type="checkbox"/> Armed Forces / Defence</td> <td><input type="checkbox"/> Chartered Accountant</td> <td><input type="checkbox"/> Services (Personal &amp; Professional)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Agriculture Sector</td> <td><input type="checkbox"/> Banker / Financial Analyst</td> <td><input type="checkbox"/> Transport / Logistics</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Non-profit / NGO</td> <td><input type="checkbox"/> Armed Forces Personnel</td> <td><input type="checkbox"/> Construction &amp; Real Estate</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Education Sector</td> <td><input type="checkbox"/> Farmer &amp; Allied</td> <td><input type="checkbox"/> Automobile related</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Sports / Entertainment</td> <td><input type="checkbox"/> Hospitality &amp; Allied</td> <td><input type="checkbox"/> Education &amp; 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Leasing</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Skilled Technician</td> <td><input type="checkbox"/> E Commerce / Online Selling</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Others _____</td> <td><input type="checkbox"/> Others _____</td> <td></td> </tr> </table>				<input type="checkbox"/> <b>Service</b>	<input type="checkbox"/> <b>Profession</b>	<input type="checkbox"/> <b>Business / Self Employed</b>	<input type="checkbox"/> <b>Retired</b>	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Doctor & Allied	<input type="checkbox"/> Wholesale / Retail	<input type="checkbox"/> <b>Housewife</b>	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Judge / Lawyer & Allied	<input type="checkbox"/> Food & Beverage	<input type="checkbox"/> <b>Student</b>	<input type="checkbox"/> Government Sector	<input type="checkbox"/> Engineer / Developer	<input type="checkbox"/> Manufacturing & Production	<input type="checkbox"/> <b>Not Categorised</b>	<input type="checkbox"/> Co-operative Sector	<input type="checkbox"/> Architect / Civil Engineer	<input type="checkbox"/> Agriculture & Allied	<input type="checkbox"/> <b>Others</b> _____	<input type="checkbox"/> Armed Forces / Defence	<input type="checkbox"/> Chartered Accountant	<input type="checkbox"/> Services (Personal & Professional)		<input type="checkbox"/> Agriculture Sector	<input type="checkbox"/> Banker / Financial Analyst	<input type="checkbox"/> Transport / Logistics		<input type="checkbox"/> Non-profit / NGO	<input type="checkbox"/> Armed Forces Personnel	<input type="checkbox"/> Construction & Real Estate		<input type="checkbox"/> Education Sector	<input type="checkbox"/> Farmer & Allied	<input type="checkbox"/> Automobile related		<input type="checkbox"/> Sports / Entertainment	<input type="checkbox"/> Hospitality & Allied	<input type="checkbox"/> Education & Training		<input type="checkbox"/> Unorganised Sector	<input type="checkbox"/> Artist / Designer / Animator	<input type="checkbox"/> Finance & Legal Services		<input type="checkbox"/> Freelancer	<input type="checkbox"/> Scientist	<input type="checkbox"/> IT & Digital Services		<input type="checkbox"/> Others _____	<input type="checkbox"/> Sports / Media / Entertainment	<input type="checkbox"/> Media & Entertainment			<input type="checkbox"/> HR / Recruitment	<input type="checkbox"/> Textile & Apparels			<input type="checkbox"/> Consultant / Advisor	<input type="checkbox"/> Stationary & Printing			<input type="checkbox"/> Teacher / Trainer	<input type="checkbox"/> Home Based / Cottage Industry			<input type="checkbox"/> IAS / IPS	<input type="checkbox"/> Rental & Leasing			<input type="checkbox"/> Skilled Technician	<input type="checkbox"/> E Commerce / Online Selling			<input type="checkbox"/> Others _____	<input type="checkbox"/> Others _____	
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<b>Religion*</b>	_____ <b>Caste</b> _____																																																																															
<b>Average Income (In ₹)*</b>	_____																																																																															
<b>PEP</b>	<b>Politically Exposed Person (PEP) / Relative of PEP</b> <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																															
<b>Disability:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <b>If Yes, Nature of Disability</b> _____ <b>Percentage of Impairment</b> _____ <b>UDID No.</b> _____ <small>(Medical certificate required incase of differently/Specially abled)</small>																																																																															



**The following details are mandatory in case of Residence for tax purposes in jurisdiction(s) outside India**

Country of Jurisdiction of Residence*	_____	TIN (If issued by jurisdiction)**	_____	TIN issuing country	_____
Place/City of Birth*	_____	Country of Birth	_____		

+ Tax Identification Number (TIN): TIN needs to be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include a social security/insurance number, citizen/personal identification / service code/number, and resident registration number. If you have any questions about your tax residency, please contact your tax advisor.

