

ವೈಯಕ್ತಿಕ ಖಾತೆ ತೆರೆಯುವ ನಮೂನೆ

(ಜಂಟಿ ಖಾತೆಯ ಸಂದರ್ಭದಲ್ಲಿ, ಭಾಗ-1 (CIF) ನಮೂನೆಯನ್ನು ಪ್ರತ್ಯೇಕವಾಗಿ ತೆಗೆದುಕೊಳ್ಳಬೇಕು)

दिनांक

ಕಚೇರಿ ಬಳಕೆಗಾಗಿ

(*) ಇರುವ ಆವರಣಗಳನ್ನು ತುಂಬುವುದು ಕಡ್ಡಾಯ. ದಯವಿಟ್ಟು ದೊಡ್ಡ ಅಕ್ಷರಗಳಲ್ಲಿ ಬರೆಯಿರಿ. ಸಹಿ ಮಾಡಲು ದಯವಿಟ್ಟು ಕಪ್ಪು ಶಾಯಿ ಬಳಸಿ. (ದಯವಿಟ್ಟು ಸೂಕ್ತ ಚೌಕವನ್ನು ಟೆಕ್ ಮಾಡಿ)

ಗ್ರಾಹಕ ಐಡಿ

ಅರ್ಜಿಯ ವಿಧ ಹೊಸದು ನವೀಕರಣ

ಖಾತೆ ಸಂಖ್ಯೆ

ಖಾತೆಯ ವಿಧ ☐ ಸಾಮಾನ್ಯ ☐ ಸಣ್ಣದು (ಕಡಿಮೆ-ಅಪಾಯದ
☐ ಗ್ರಾಹಕರಿಗೆ)

ಸಿಕ್ಕವೈಸಿಆರ್

☐ ಅಪ್ರಾಪ್ತ

ಕ್ರಮ ಸಂಖ್ಯೆ	ಪರಿಶೀಲನೆ ಪಟ್ಟಿ	ಹೌದು	ಇಲ್ಲ	ಅನ್ವಯವಾಗುವುದಿಲ್ಲ
1	ಪ್ಯಾನ್ ಕಾರ್ಡ್ ಅಥವಾ ಫಾರ್ಮ್ 60 ನಕಲನ್ನು ಲಗತ್ತಿಸಲಾಗಿದೆ			
2	ತೆರಿಗೆ ಪಾವತಿಸುವ ದೇಶವು ಭಾರತವಲ್ಲದಿದ್ದರೆ, ಅನುಬಂಧ I (ಎಫ್‌ಎಟಿಸಿಎ) ಪಡೆಯಲಾಗಿದೆ			
3	ಅರ್ಜಿದಾರರು ಅಪ್ರಾಪ್ತರಾಗಿದ್ದರೆ, ಸರಿಯಾಗಿ ಭರ್ತಿ ಮಾಡಿದ ಅನುಬಂಧ II ನಮೂನೆಯನ್ನು ಪಡೆಯಲಾಗಿದೆ			
4	ಅನುಬಂಧ I ಮತ್ತು ಅನುಬಂಧ II (ಅನ್ವಯಿಸಿದಲ್ಲಿ) ಸೇರಿದಂತೆ ನಮೂನೆಯಲ್ಲಿ ನೀಡಲಾದ ಎಲ್ಲಾ ವಿವರಗಳನ್ನು ಸಂಪೂರ್ಣವಾಗಿ ಭರ್ತಿ ಮಾಡಲಾಗಿದೆ ಮತ್ತು ಸರಿಯಾಗಿ ಪರಿಶೀಲಿಸಲಾಗಿದೆ ಎಂದು ನಾನು ದೃಢೀಕರಿಸುತ್ತೇನೆ			
5	ಪರಿಶೀಲಿಸಲಾಗಿರುವ ಅರ್ಜಿದಾರರ ಸಹಿ /ಹೆಚ್ಚೆಚ್ಚಿನ ಗುರುತನ್ನು ನಾನು ಸ್ವತಃ ಸ್ಥಳದಲ್ಲಿದ್ದು ಪರಿಶೀಲಿಸಿದ್ದೇನೆ ಎನ್ನುವುದನ್ನು ದೃಢೀಕರಿಸುತ್ತೇನೆ			
6	ಖಾತೆ ತೆರೆಯುವ ಪ್ರಕ್ರಿಯೆಯ ಭಾಗವಾಗಿ ಸ್ವೀಕರಿಸಿದ ಸ್ವಯಂ-ಪ್ರಮಾಣೀಕೃತ ದಾಖಲೆಗಳನ್ನು (ಗುರುತಿನ ಪುರಾವೆ ಮತ್ತು ವಿಳಾಸದ ಪುರಾವೆ ಮತ್ತು ಇತರ ದಾಖಲೆಗಳು) ಮೂಲದೊಡನೆ ತಾಳೆ ನೋಡಿ ಪರಿಶೀಲಿಸಲಾಗಿದೆ ಮತ್ತು ಸರಿಯಾಗಿರುತ್ತದೆ ಮತ್ತು ಅದನ್ನು ಪಡೆದ ಒವಿಡಿಗಳಲ್ಲಿ ದಾಖಲಿಸಲಾಗಿದೆ ಎಂದು ನಾನು ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇನೆ			
7	ಖಾತೆಯ ಕಾರ್ಯನಿರ್ವಣೆಯ ಪರಿಣಾಮಗಳು ಮತ್ತು ಷರತ್ತುಗಳನ್ನು ಗ್ರಾಹಕರಿಗೆ ವಿವರಿಸಲಾಗಿದೆ ಎಂದು ನಾನು ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇನೆ (ಅನಕ್ಷರಸ್ಥ ಅರ್ಜಿದಾರರ ಸಂದರ್ಭದಲ್ಲಿ ಮಾತ್ರ)			
8	ಅರ್ಜಿದಾರರ ಸಹಿಯನ್ನು ನನ್ನ ಮುಂದೆ ಪಡೆಯಲಾಗಿದೆ ಮತ್ತು ಛಾಯಾಚಿತ್ರವನ್ನು ವೈಯಕ್ತಿಕವಾಗಿ ಪರಿಶೀಲಿಸಲಾಗಿದೆ ಎಂದು ನಾನು ಪ್ರಮಾಣೀಕರಿಸುತ್ತೇನೆ			

ಅಪಾಯ ವರ್ಗ* ☐ ಅಧಿಕ ☐ ಮಧ್ಯಮ ☐ ಕಡಿಮೆ

☐ ಸ್ವಯಂ ಪ್ರಮಾಣಿತ
 ☐ ಮೂಲ ಪ್ರತಿಗಳು
 ☐ ನೋಟರಿ
 ☐ ಇತರೆ (ಅನಿವಾಸಿಗಳಿಗೆ ಮಾತ್ರ ಅನ್ವಯ)

ಮಚ್ಚೆ ಅಥವಾ ಗಾಯದಂತಹ ಗುರುತಿನ ಒಂದು ಅಥವಾ ಎರಡು ಗುರುತುಗಳ ವಿವರಗಳು (ಅನಕ್ಷರಸ್ಥ ಅರ್ಜಿದಾರರಿಗೆ ಕಡ್ಡಾಯ) _____

ಅಧಿಕಾರಿಯ ಹೆಸರು

ಪಿಎಫ್ ಸಂಖ್ಯೆ

ಸೌನ

[illegible]

ಜಿಬಿಪಿಎ ಸಂಖ್ಯೆ

Account Opening Form for Individual

(In case of joint accounts, Part-I(CIF) to be taken for each customer)

Bank/Branch to affix rubber stamp of name and code no.

Date

FOR OFFICE USE

Fields marked (*) are mandatory. Please fill up in BLOCK letters only and use black ink for signature (Please tick in appropriate box)

Customer ID

Application Type ☐ New ☐ Update

Account No.

Account Type ☐ Normal ☐ Small (for low-risk customers)

CKYCR No.

☐ Minor

S No	Check list	Yes	No	N/A
1	Copy of PAN Card or Form 60 has been attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	If country of Tax residence is not India, Annexure I (FATCA) has been obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	If applicant is a minor, duly filled Annexure II has been obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	I confirm that all details in the form, including Annexure I and Annexure II (if applicable), have been completed and duly checked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	I confirm in-person verification was carried out and Signature / Thumb impression of the applicant is verified by me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	I certify that self-certified documents (Proof of Identity & Proof of Address and others) received as part of account opening process have been verified from original and found correct & same is recorded on OVD's obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	I certify that the implications and conditions for the operation of the account have been explained to the customer (only in case of illiterate applicant)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	I certify that applicant signature has been obtained in front of me and photograph has been verified in-person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Risk Category* ☐ High ☐ Medium ☐ Low

Documents Received ☐ Self Certified ☐ True Copies ☐ Notary ☐ Others (Applicable in case of Non Resident only)

Details of one or two identification marks, such as a mole or scar (mandatory for illiterate applicant) _____

Official Name: PF No. Designation

Date

GBPA No

Signature

ವೈಯಕ್ತಿಕ ಖಾತೆ ತೆರೆಯುವ ನಮೂನೆ (ಭಾಗ 1)
ಗ್ರಾಹಕ ಮಾಹಿತಿ ಪತ್ರ (ಸಿಐಎಫ್ ರಚನೆ / ತಿದ್ದುಪಡಿ)
(ಜಂಟಿ ಖಾತೆಗಳ ಸಂದರ್ಭದಲ್ಲಿ, ಪ್ರತಿ ಗ್ರಾಹಕರಿಗೆ ಭಾಗ-1 (ಸಿಐಎಫ್) ತೆಗೆದುಕೊಳ್ಳಬೇಕು)

ದಿನಾಂಕ

1. ವೈಯಕ್ತಿಕ ವಿವರಗಳು

	ಪೂರ್ವಪ್ರತ್ಯಯ	ಮೊದಲ ಹೆಸರು	ಮಧ್ಯದ ಹೆಸರು	ಕೊನೆಯ ಹೆಸರು
1. ಹೆಸರು*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. ಹುಟ್ಟಿದ ದಿನ*	<input type="text"/>	4. ಹುಟ್ಟಿದ ದಿನ*	<input type="text"/> ಪುರುಷ <input type="text"/> ಹೆಣ್ಣು	<input type="text"/> ಮೂರನೇ ಲಿಂಗ
3. ವೈವಾಹಿಕ ಸ್ಥಿತಿ*	<input type="text"/> ವಿವಾಹಿತ <input type="text"/> ಅವಿವಾಹಿತ <input type="text"/> ಇತರೆ			
5. ಇವರ ಹೆಸರು*	<input type="text"/> ತಂದೆ <input type="text"/> ತಾಯಿ <input type="text"/> ಸಂಗಾತಿ	(ಪ್ರಾನ್ ಒದಗಿಸದಿದ್ದಲ್ಲಿ ತಂದೆಯ ಹೆಸರು ಕಡ್ಡಾಯ)		
6. ರಾಷ್ಟ್ರೀಯತೆ*	<input type="text"/> ಭಾರತೀಯ <input type="text"/> ಇತರೆ	ದೇಶದ ಹೆಸರು <input type="text"/>		
7. ಮೊಬೈಲ್ ನಂ.	<input type="text"/>	8. ಇಮೇಲ್ ಐಡಿ.	<input type="text"/>	
9. ಪರ್ಯಾಯ ಮೊಬೈಲ್ ನಂ	<input type="text"/>	10. ಸ್ಥಿರ ದೂರವಾಣಿ ಸಂಖ್ಯೆ	<input type="text"/>	

2. ಗುರುತು/ವಿಳಾಸದ ಪುರಾವೆ (ದಯವಿಟ್ಟು ಸೂಕ್ತ ಚೌಕಯನ್ನು (ಯಾವುದಾದರೂ ಒಂದು ಐಡಿ ಪ್ರಕಾರ) ಟಿಕ್ ಮಾಡಿ ಮತ್ತು ವಿವರಗಳನ್ನು ನೀಡಿ)*

1. ಗುರುತಿನ ಚೀಟಿ ಪ್ರಕಾರ*

☐ ಪಾಸ್‌ಪೋರ್ಟ್ (ಎನ್‌ಆರ್‌ಎಫ್ / ಪಿಐಒ ಸಂದರ್ಭದಲ್ಲಿ ಕಡ್ಡಾಯ) ☐ ಮತದಾರರ ಗುರುತಿನ ಚೀಟಿ ☐ ಚಾಲನಾ ಪರವಾನಿಗೆ ☐ ನರೇಗಾ ಜಾಬ್ ಕಾರ್ಡ್ ☐ ಹೆಸರು ಮತ್ತು ವಿಳಾಸದ ವಿವರಗಳನ್ನು ಹೊಂದಿರುವ ರಾಷ್ಟ್ರೀಯ ಜನಸಂಖ್ಯಾ ನೋಂದಣಿ ಸಂಸ್ಥೆಯಿಂದ ಹೊರಡಿಸಲಾದ ಪತ್ರ

☐ ಆಧಾರ್ ಸಂಖ್ಯೆ ಹೊಂದಿರುವ ಬಗ್ಗೆ ಪುರಾವೆ. ☐ (i) - ಇ-ಕೆಎಸ್ಸಿ ☐ (ii) - ಆಫ್ಲೈನ್ ಪರಿಶೀಲನೆ

2. ಡಾಕ್ಯುಮೆಂಟ್ ಗುರುತಿನ ಸಂಖ್ಯೆ*

3. ನೀಡಿದವರು

4. ನೀಡಿದ ದಿನಾಂಕ* 5. ಮುಕ್ತಾಯ ದಿನಾಂಕ (ಅನ್ವಯಿಸಿದಲ್ಲಿ)

3. ವಿಳಾಸದ ವಿವರಗಳು* (ಮೇಲಿನ 2ರಲ್ಲಿ ಸಲ್ಲಿಸಿದ ವಿಳಾಸದ ಪುರಾವೆಯಂತೆ)

1. ವಿಳಾಸದ ವಿಧ* ☐ ವಸತಿ/ವ್ಯಾಪಾರ ☐ ವಸತಿ ☐ ವ್ಯಾಪಾರ ☐ ನೋಂದಾಯಿತ ಕಚೇರಿ ☐ ಸಾಗರೋತ್ತರ (ಎನ್‌ಆರ್‌ಎಫ್/ಪಿಐಒ ಗೆ ಕಡ್ಡಾಯ)

2. ವಿಳಾಸ*

3. ನಗರ/ಗ್ರಾಮ* 4. ಜಿಲ್ಲೆ*

5. ರಾಜ್ಯ* 6. ಪಿನ್* 7. ದೇಶ*

8. ಮೇಲೆ ಒದಗಿಸಿರುವುದು ನಿಮ್ಮ ಪ್ರಸ್ತುತ ವಿಳಾಸವೇ? ☐ ಹೌದು ☐ ಅಲ್ಲ

'ಅಲ್ಲ' ಎಂದು ಆಯ್ಕೆಮಾಡಿದಲ್ಲಿ, ದಯವಿಟ್ಟು ಪ್ರಸ್ತುತ ವಿಳಾಸವನ್ನು S. No. 4ರಲ್ಲಿ S. No. 3ರ ಪ್ರಕಾರ ದಾಖಲೆ ಸಾಕ್ಷ್ಯದೊಂದಿಗೆ ಒದಗಿಸಿ.)

4. ವಿಳಾಸ ವಿವರಗಳು ☐ ಪ್ರಸ್ತುತ / ಸ್ಥಳೀಯ / ಪತ್ರವ್ಯವಹಾರ

1. ವಿಳಾಸದ ವಿಧ* ☐ ವಸತಿ/ವ್ಯಾಪಾರ ☐ ವಸತಿ ☐ ವ್ಯಾಪಾರ ☐ ನೋಂದಾಯಿತ ಕಚೇರಿ ☐ ಅನಿರ್ದಿಷ್ಟ

2. ವಿಳಾಸ*

3. ನಗರ/ಗ್ರಾಮ* 4. ಜಿಲ್ಲೆ*

5. ರಾಜ್ಯ* 6. ಪಿನ್* 7. ದೇಶ*

Account Opening Form for Individual (Part-I)
Customer Information Sheet (CIF Creation/Amendment)
(In case of joint accounts, Part-I (CIF) to be taken for each customer)

Date

1. Personal Details

	Prefix	First Name	Middle Name	Last Name
1.Name *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.Date of Birth*	<input type="text"/>	3.Gender*	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender	
4.Marital Status*	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Other			
5.Name of*	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Spouse (Father name is mandatory if PAN is not provided)			
6.Nationality*	<input type="checkbox"/> Indian <input type="checkbox"/> Others	Country Name	<input type="text"/>	
7.Mobile No.	<input type="text"/>	8.Email ID.	<input type="text"/>	
9.Alternative Mob No	<input type="text"/>	10.Landline Number	<input type="text"/>	

2. Proof of Identity/Address (Please tick the appropriate Box (any one ID type) and give details)*

1.ID type*

☐ Passport (Mandatory in case of NRI/PIO) ☐ Voter's Identity Card ☐ Driving License ☐ NREGA Job Card ☐ Letter issued by National Population Register containing details of Name & Address

☐ Proof of Possession of Aadhar No. ☐ (i) - E-KYC ☐ (ii) - Offline verification

2.Document identification Number*

3.Issued By

4.Issue Date* 5.Expiry Date (If Applicable)

3. Address Details* (as per Proof of Address submitted at 2. above)

1.Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Overseas (mandatory for NRI/PIO)

2.Address*

3.City/Village* 4.District*

5.State* 6.Pin* 7.Country*

8.Is the address provided above your Current Address?* ☐ Yes ☐ NO

If selected 'No', then please provide Current Address at S. No. 4 alongwith Documentary Evidence as per S. No. 3.)

4. Address Details ☐ Current / Local / Correspondence

1.Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

2.Address*

3.City/Village* 4.District*

5.State* 6.Pin* 7.Country*

5. If the Proof of Address/ OVD provided does not contain current address, please provide any of the documents below as OVD (Officially Valid Document)

<input type="checkbox"/>	1. Utility Bill*	<input type="checkbox"/>	2. PPO/FPPO*	<input type="checkbox"/>	3. Property or Municipal Tax Receipt*
<input type="checkbox"/>	4. Letter of allotment of accommodation issued by employer/issued by State or Central Government departments, statutory or regulatory bodies, Public Sector undertaking, scheduled commercial banks, financial institutions and listed companies. Similarly, lease and license agreements with such employers allotting official accommodation. *				
<input type="checkbox"/>	5. Self-Declaration (applicable only when customer has carried out e-KYC (AADHAAR Authentication) and address in AADHAAR is not same as Current Address)*				
6. Document No*.				7. Date*	

I/We shall submit OVD with updated Current Address within a period of three months, failing which bank may restrict the operations in the account. (Not Applicable when Self Declaration is provided by the customer as per point No. 5 above)

6. Tax Proof

1. PAN*/Tax Identification Number or equivalent (If issued by jurisdiction) (If PAN not submitted, fill form 60)

2. Country of Tax Residence in India only and not in any other country or territory outside India* Yes No (If No, please fill the FATCA details form -Annexure)

7. Income & Profession / Activity Declaration

1.Occupation Type* ☐ Private Sector Service ☐ Public/Govt. Sector Service ☐ Student ☐ Retired ☐ Self-Employed ☐ Not Working

☐ Housewife ☐ Other (Please specify)

2.Business (Only if Self-Employed) ☐ Trader ☐ Jeweller ☐ Service Provider ☐ Agriculture ☐ Stockbroker ☐ Manufacturing ☐ Arms Dealer

☐ Real Estate ☐ Other (Please Specify)

3.Annual Income* (Rs.)

4.Nature of Business (Only if Self-Employed)

4.Organization Name(Only if Salaried)

5.Designation / Profession (Only if Salaried)

6.Please tick the appropriate box* ☐ Politically exposed person ☐ Related to politically exposed person ☐ None

(Politically Exposed Persons are individuals who are or have been entrusted with prominent public functions in a foreign country e.g. Heads of State / Governments , Senior Politicians / Senior Government / Judicial / Military Officers, Senior Executives of State-owned Corporations, Important Political Party Officials, etc.)

8. Other Details

1.Religion	<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim	<input type="checkbox"/> Christian	<input type="checkbox"/> Sikh	<input type="checkbox"/> Other (Please Specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.Category	<input type="checkbox"/> General	<input type="checkbox"/> OBC	<input type="checkbox"/> SC	<input type="checkbox"/> ST	<input type="checkbox"/> Minority										
3.No. of Dependents	<input type="text"/>	<input type="text"/>	4.Illiterate	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes : Identification Marks :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.Residential Status*	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Non-Resident Individual			<input type="checkbox"/> Foreign National		<input type="checkbox"/> Person of Indian Origin								
6.Customer Type/Status	<input type="checkbox"/> Sr. Citizen	<input type="checkbox"/> Staff	<input type="checkbox"/> PF No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Minor	<input type="checkbox"/> Pensioner				
	<input type="checkbox"/> General	<input type="checkbox"/> Ex Staff	PF No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Pardanashin					
7.Person with disability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes		<input type="checkbox"/> Visually Impaired	<input type="checkbox"/> Differently Abled									
8.Education Qualification	<input type="checkbox"/> Below SSC	<input type="checkbox"/> SSC	<input type="checkbox"/> HSC	<input type="checkbox"/> Graduate	<input type="checkbox"/> Postgraduate			<input type="checkbox"/> Professional	<input type="checkbox"/> Others						

9. Declaration Cum Undertaking Cum Self-Certification

I have read the copy of Terms & Conditions of the Account opening given to me. The Terms & Conditions have been explained to me/us and having understood, I accept the same. I hereby declare that I have submitted the Aadhar Card issued by UIDAI voluntarily for identification and/or address proof towards the compliance of KYC norms under the PMLA 2002.

I hereby consent that the bank may verify the same with the UIDAI and authorize the UIDAI expressly to release the identity and address through biometric authentication to the bank.

☐ Yes ☐ No (e-KYC authentication and Aadhar seeding is mandatory for availing DBT benefit)

Photo*

 Please Paste
Recent Passport Size
Do not Staple

Signature/Thumb impression of the
Applicant Please sign in Black Ink
only

Place

Date

ಭಾರತೀಯ ನಿವಾಸಿಯ ವೈಯಕ್ತಿಕ ಖಾತೆ ತೆರೆಯುವ ನಮೂನೆ (ಭಾಗ-II)
ಉಳಿತಾಯ ಖಾತೆ, ಚಾಲ್ತಿ ಖಾತೆಗಾಗಿ

ನಿಮ್ಮ ಶಾಖೆ/ಬ್ಯಾಂಕಿನಲ್ಲಿ ನನ್ನ/ನಮ್ಮ ರೇವಣಿ ಖಾತೆಯನ್ನು ಈ ಕೆಳಗಿನಂತೆ ತೆರೆಯಲು ನಾನು/ನಾವು ವಿನಂತಿಸುತ್ತೇವೆ: (ಸೂಕ್ತ ಖಾತೆಯನ್ನು ಟಿಕ್ ಮಾಡಿ)

ಖಾತೆಯ ವಿಧ ☐ ಉಳಿತಾಯ ಖಾತೆ ☐ ಬಿಎಸ್ ಬಿಡಿಎ ☐ ಸಣ್ಣ ಖಾತೆ ☐ ಚಾಲ್ತಿ ಖಾತೆ

[illegible]

1. ಅಗತ್ಯವಿರುವ ಸೌಲಭ್ಯಗಳು (ದಯವಿಟ್ಟು ☒ ಗುರುತನ್ನು ಸೂಕ್ತ ಚೌಕ/ಗಳಲ್ಲಿ ಗುರುತಿಸಿ): (1 ರಿಂದ 7 ರವರೆಗಿನ ಸೆವೆಗಳಿಗೆ ಮೊಬೈಲ್ ಸಂಖ್ಯೆ ಕಡ್ಡಾಯವಾಗಿದೆ)

1. ಎಟಿಎಂ ಕಮ್ ಡೆಬಿಟ್ ಕಾರ್ಡ್

	ಹೌದು	ಇಲ್ಲ	ಕಾರ್ಡ್ ಮೇಲೆ ಹೆಸರು ಕಾಣಿಸಿಕೊಳ್ಳಬೇಕಾದ ರೀತಿ
1 ನೇ ಅರ್ಜಿದಾರ			
2 ನೇ ಅರ್ಜಿದಾರ			
3 ನೇ ಅರ್ಜಿದಾರ			

(ಪ್ರತ್ಯೇಕವಾಗಿ ನಿರ್ವಹಿಸಲ್ಪಡುವ ಖಾತೆಗಳು ಮತ್ತು ಸರ್ವೆವರ ಮೋಡ್ ಮೂಲಕ ನಿರ್ವಹಿಸಲ್ಪಡುವ ಜಂಟಿ ಖಾತೆಗಳಿಗೆ ಮಾತ್ರ ಲಭ್ಯವಿದೆ. ಫಾರ್ಮ್ ಅಥವಾ ಸರ್ವೆವರ ಮೋಡ್ ಆಗಿ ಕಾರ್ಯನಿರ್ವಹಿಸುವ ಖಾತೆಗಳ ಸಂದರ್ಭದಲ್ಲಿ ಐಬಿಎಸ್ ಸೌಲಭ್ಯವು 1ನೇ ಅರ್ಜಿದಾರರಿಗೆ ಮಾತ್ರ ಲಭ್ಯವಿರುತ್ತದೆ)

2. ಚೆಕ್ ಪುಸ್ತಕ ☐ 3. ಇಂಟರ್ನೆಟ್ ಬ್ಯಾಂಕಿಂಗ್ ವೀಕ್ಷಣೆ ☐ ವ್ಯವಹಾರ ☐ 4. ಎಸ್‌ಎಮ್‌ಎಸ್ ಸೇವೆಗಳು (ಶುಲ್ಕಗಳು ಅನ್ವಯವಾಗುತ್ತವೆ) ☐

5. ಪೊಲೀಸ್ ಬ್ಯಾಂಕಿಂಗ್ ಸೇವೆಗಳು ☐ 6. ಮೊಬೈಲ್ ಬ್ಯಾಂಕಿಂಗ್ ☐ 7. ಕಾಗದದ ಪ್ರತಿಯ ಬದಲಿಗೆ ಇ-ಸೈಟಿಂಗ್ (ಮಾಸಿಕ ಮಧ್ಯಂತರದಲ್ಲಿ) ☐ 8. ಪಾಸ್ಪೋರ್ಟ್ ☐

2. ನಾಮನಿರ್ದೇಶನ (ಅಗತ್ಯವಿದ್ದಲ್ಲಿ DA-1 ನಮೂನೆ ಭರ್ತಿ ಮಾಡಿ) ☐ ಹೌದು, (ಕಛೇರಿಗೆ ಫಾರ್ಮ್ ಅನ್ನು ಭರ್ತಿ ಮಾಡಿ) ☐ ನಮಗೆ ವಿವರಿಸಲಾಗಿದೆ. ಆದಾಗ್ಯೂ, ನಾನು/ನಾವು ಈ ಖಾತೆಯಲ್ಲಿ ಯಾವುದೇ ವ್ಯಕ್ತಿಯನ್ನು ನಾಮನಿರ್ದೇಶನ ಮಾಡಲು ಬಯಸುವುದಿಲ್ಲ.

[illegible]

ಬ್ಯಾಂಕ್ ರೇವೆನಿಗೆಳಿಗೆ ಸಂಬಂಧಿಸಿದಂತೆ ಬ್ಯಾಂಕಿಂಗ್ ನಿಯಂತ್ರಣ ಕಾಯ್ದೆ 1949 ಮತ್ತು ನಿಯಮಗಳು 1985ರ ಸೆಕ್ಷನ್ 45 ರ್ಕುಡ್ಡಾ ಅಡಿಯಲ್ಲಿ ನಾಮನಿರ್ದೇಶನ ನನ್ನ ನಮ್ಮ /ಅಪ್ರಾಪ್ತರ ಮರಣದ ಸಂದರ್ಭದಲ್ಲಿ ಖಾತೆಯಲ್ಲಿರುವ ರೇವೆನಿಗೆ ಮೊತ್ತಕ್ಕಾಗಿ ನಾನು/ನಾವು ಈ ಕೆಳಗಿನ ವ್ಯಕ್ತಿಯನ್ನು ನಾಮನಿರ್ದೇಶನ ಮಾಡುತ್ತೇವೆ, ಈ ಕೆಳಗೆ ನಿಡೀರುವ ವಿವರಗಳನ್ನು ಪಂಜಾಬ್ ನ್ಯಾಷನಲ್ ಬ್ಯಾಂಕ್ (ಖಾತೆ ತೆರೆಯಲ್ಪಡುವ / ನಿರ್ವಹಣೆ ಶಾಖೆ) ವತಿಯಿಂದ ಹಿಂದಿರುಗಿಸಬಹುದು.

☐ ಪಾಸ್ ಪುಸ್ತಕದಲ್ಲಿ ನಾಮನಿರ್ದೇಶಿತರ (ನಾಮಿನಿ) ಹೆಸರನ್ನು ಮುದ್ರಿಸಬೇಕೆಂದು ನಾನು/ನಾವು ಬಯಸುತ್ತೇವೆ

ನಾಮಿನಿ ವಿವರಗಳು

[illegible]

ನಾಟಿನಿಯ ಢೊಬ್ಬಲ್ ಸಂಖ್ಯೆ ನಾಟಿನಿಯ ಜನ್ಮ ದಿನಾಂಕ (ಅಪ್ರಾಪ್ತರಾಗಿದ್ದಲ್ಲಿ)

ಗ್ರಾಹಕರೊಂದಿಗಿನ ಸಂಬಂಧ ವಯಸ್ಸು ವರ್ಷಗಳು

ಈ ದಿನಾಂಕದಂದು ನಾಮಿನಿ ಅಪ್ರಾಪ್ತರಾಗಿರುವ ಕಾರಣ, ನಾನು ಶ್ರೀ/ಶ್ರೀಮತಿ/ಕುಮಾರಿ ಅವರನ್ನು ನೇಮಿಸುತ್ತೇನೆ _____ ವಯಸ್ಸು ವರ್ಷಗಳು _____ ವಿಳಾಸ _____ ನಾಮಿನಿ ಅಪ್ರಾಪ್ತರಾಗಿರುವ ಸಮಯದಲ್ಲಿ ನನ್ನ / ಅಪ್ರಾಪ್ತರ ಮರಣದ ಸಂದರ್ಭದಲ್ಲಿ ನಾಮಿನಿಯ ಪರವಾಗಿ ರೇವಣಿ ಮೊತ್ತವನ್ನು ಸ್ವೀಕರಿಸಲು (ಏಕ ವ್ಯಕ್ತಿಯ ಹೊರತಾಗಿ ಇತರರ ಪರವಾಗಿ ನಾಮಿನಿದೇಶನವು ಅಮಾನ್ಯವಾಗಿದೆ)

ಅರ್ಜಿದಾರರು ಅನಕ್ಷರಸ್ಥರಾಗಿದ್ದಲ್ಲಿ ಮತ್ತು ಹೆಬ್ಬಟ್ಟಿನ ಗುರುತನ್ನು ಹಾಕಿಸಿದ್ದರೆ ಮಾತ್ರ ಸಾಕ್ಷಿಗಳ ಅಗತ್ಯವಿರುತ್ತದೆ

ಮೊದಲ ಸಾಕ್ಷಿಯ ಸಹಿ

ಹೆಸರು _____ ಸಹಿ _____

ವಿಳಾಸ _____

ಎರಡನೇ ಸಾಕ್ಷಿಯ ಸಹಿ	
ಹೆಸರು _____	ಸಹಿ _____
ವಿಳಾಸ _____	

ದಿನಾಂಕ ಸ್ಥಳ

ಮಾನ್ಯತೆ ಡಿಎ -1

ಇವರ ಪರವಾಗಿ ನಿಮ್ಮ ನಾಮನಿರ್ದೇಶನದ ಸ್ವೀಕೃತಿಯನ್ನು ನಾವು ಅಂಗೀಕರಿಸುತ್ತೇವೆ:

ನಾಮಿನಿಯ ಹೆಸರು _____ ವಯಸ್ಸು: _____ ವರ್ಷಗಳು: _____

ನಿಮ್ಮ ಖಾತೆ ಸಂಖ್ಯೆಗೆ ಸಂಬಂಧಿಸಿದಂತೆ

ನೋಂದಣಿ ಸಂಖ್ಯೆ.

**ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUAL (PART-II)
FOR SAVING BANK, CURRENT ACCOUNT**

I/We request you to open my/our deposit Account with your branch/bank as under : (Tick relevant type of account)

Type of Account ☐ Savings Bank Account ☐ BSBD ☐ Small Account ☐ Current Account

Expected Annual Credit*

1. Facilities required (Please mark ☒ in appropriate box/es): (Mobile No. is Mandatory for services from 1 to 7)

1. ATM cum Debit Card

	Yes	No	Name as would appear on the card
1st Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
2nd Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
3rd Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

(Available only for singly operated accounts and joint accounts operated by Either or Survivor mode. In case of accounts operated as Former or Survivor mode IBS facility is available to 1st Applicant only)

2. Cheque Book ☐ 3. Internet Banking View ☐ Transaction ☐ 4. SMS Alerts (Charges Applicable) ☐

5. Phone Banking Services ☐ 6. Mobile Banking ☐ 7. e-statement (at monthly intervals) in lieu of papercopy ☐ 8. Passbook ☐
(E-mail Mandatory)

2. Nomination (If required fill form DA -1)

☐ Yes, (Fill form below) ☐ The benefits of Nomination facility has been explained to me/us. However, I/We do not want to nominate any person in this account

FORM DA-1 (Nomination Form) Registration No.

Nomination under section 45ZA of the Banking Regulation Act, 1949 and Rules 1985 in respect of Bank Deposits

I/We nominate the following person to whom in the event of my/minor's death the amount of this deposit, particulars of which are given below, may be returned by the Punjab National Bank (Account Opening/ Maintaining Branch)

☐ I/We want the name of the nominee to be printed on the passbook

Details of Nominee

Name

Mobile number of the Nominee Date of Birth of Nominee (in case of minor)

Relationship with the Customer Age Years

As the nominee is a minor on this date, I appoint Shri/Smt/Kum _____ Age Years _____ Address _____
to receive the amount of deposit on behalf of the nominee in the event of my / minor's death during the minority of the nominee (nomination in favour of other than individual is invalid)

Witnesses are required only in case applicant is illiterate and is affixing thumb impression

Signature of First witness	
Name _____	Signature _____
Address _____	

Signature of Second witness	
Name _____	Signature _____
Address _____	

Date Place

----- ✂ ----- ✂ ----- ✂ ----- ✂ -----

ACKNOWLEDGEMENT DA -1

We acknowledge receipt of nomination made by you in favour of:

Name of the Nominee _____ Age: _____ Years: _____

With respect to your Account Number

Registration No.

Signature of Bank Official

TERMS & CONDITIONS AND DECLARATION

- I/We confirm that I/We have been informed that the holder of Basic Saving Bank Deposit Account will not be eligible for opening any other Saving Bank Deposit Account in the same bank. BSDBA holder will be required to close all existing saving fund account in our Bank within 30 days from the date of opening of the account.
- I/We hereby declare that the details above in this form including details in Annexure 1 and Annexure 2 are true and correct to the best of my/our knowledge and belief and I/We 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/We are aware that I/We may be held liable for it.
- I/We agree to be bound by the terms & conditions, instructions etc. as listed below & Annexure FATCA/CRS and by the rules of Punjab National Bank and the RBI and any subsequent amendment(s). My/Our personal /KYC details may be shared with Central KYC Registry. I/We hereby consent to receiving information from Central KYC Registry through SMS / Email on the above registered number / Email address.
- In case of FDR / RD in joint name with mode of operation Either or Survivor, any one can apply loan against the same. And anyone can also apply for premature payment / payment on maturity.
- I/We hereby declare that in case of any credit facility is to be availed from any Banks/Fis in the future, the same will be informed in advance SMS. (Applicable when opening Current Accounts).
- 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 facility. 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 requests executed in my account(s) through internet, mobile, telebanking 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 authorize 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.
- 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 authorize the UIDAI expressly to release the identity and address through biometric authentication to the Bank. I wish to seed 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 transfer in this account.
- 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.
- 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.
- 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.
- 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 I or any other similar arrangements.
- 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 affect 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.
- I undertake the responsibility to declare and disclose immediately and in no case beyond 30 days from the date of change, any change that may take place in the information provided herein/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.
- I also agree that my failure to disclose any material / information known to me now or in future or my failure to rectify 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/Gol from time to time.
- 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.
- I shall indemnify the Bank from any loss/damage that may be caused to the Bank on account of any mistake in the details provided herein or on account of providing incorrect or incomplete information by me.
- I undertake to submit data/information together with fresh KYC documents for updating of KYC details at periodical intervals as may be required by the Bank.
- 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.
- 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.
- 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.
- I have received the Welcome Kit containing ATM card/chequebook 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.
- 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 account and /or close the account.
- I have been advised Quarterly Average Balance (QAB) 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.
- I confirm that the product features of BSBD account have been explained to me (applicable to BSBD account applicant)
- I acknowledge receipt of rules and regulations of Savings Bank Account.
- Applicable for Small Accounts: I/We understand that this account shall remain operational initially for twelve months which can be extended for further twelve months on submission of having an OVD (Officially Valid Document). The entire relaxation/provisions shall be reviewed after twenty-four months.
- I/We have been advised that if I/We do not provide my/our mobile number, I/We will not be eligible for any facility of electronic transactions.
- (Applicable for accounts opened for credit of Social Welfare Benefits), I understand that this account will be opened under BSBD category. I also understand that in case, I do not wish to continue in this BSBD account, and switch over to Regular Savings Bank account, I will have to maintain the Quarterly Average Balance (QAB) applicable for Regular Savings Bank Account. I therefore undertake to maintain QAB in the account if I switch over to Regular Savings Bank Account from BSBD.
- (Applicable for accounts opened in the name of Minors), I understand that the requirements of QAB and penalty for non-maintenance will be applicable in this account once the applicant becomes Major. I therefore undertake to maintain QAB from the date of attaining majority.
- 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.
- I/We confirm that the product features of account have been explained to me.
- I/We hereby give consent for debiting my/our account for recovering service charges as normally applicable to Savings Bank and Current Account.
- I confirm and undertake that I will not deal in virtual currencies and will not use my account for any services relating to virtual currencies or facilitate any person or entity in dealing with or settling Virtual Currencies.
- I understand that in the event of failed Standing Instruction for Loan Repayment/dishonor of a cheque/ NACH/ECS due to lack of funds / insufficient funds on 04 occasions during financial year, no fresh cheque book would be issued, closure of account may also be considered.
- Documentary evidence must be submitted for proof of Annual Income/ Annual Turnover. Bank will set Account level Threshold limit based on expected Annual Credits declared by the customer. In case, Self Declaration is submitted for Annual Turnover/ Income/ expected Annual Credits, lower Threshold limit, as decided by the Bank from time to time will be fixed and If Threshold Limit is breached, further credits will not be allowed in the Account till the time documentary evidence is submitted by the Customer.
- I/We authorize Punjab National Bank to share my/our KYC details for cross selling of its products in routine course of its banking and related business undertaken by bank and for any other purposes permitted by regulators from time to time.

ಉಳ್ಳಿತಾಯ ಬ್ಯಾಂಕ್, ಚಾಲ್ತಿ ಖಾತೆಗಾಗಿ

दिनांक

3. ಪೊರಟೋ ಮತ್ತು ಸಹಿ

ಪಂಜಾಬ್ ನ್ಯಾಷನಲ್ ಬ್ಯಾಂಕ್ ಶಾಖೆಯ ಮುಖ್ಯಸ್ಥರು
ಬಿಡಿ _____

ಡಿ. ನಂ

ಪಾಸ್ಪುಕ್/ಎಒಎಫ್/ಬ್ಯಾಂಕಿನ ವೆಬ್‌ಸೈಟ್‌ನಲ್ಲಿ ವಿವರಿಸಿದಂತೆ ಬ್ಯಾಂಕಿನ ಅಸ್ತಿತ್ವದಲ್ಲಿರುವ ನಿಯಮಗಳನ್ನು ಅನುಸರಿಸಲು ನಾನು/ನಾವು ಈ ಮೂಲಕ ಒಪ್ಪುತ್ತೇವೆ _____ ಉಳಿತಾಯ/ಚಾಲ್ತಿ _____ ಖಾತೆಗಳು

1ನೇ ಅರ್ಜಿದಾರರ ಹೆಸರು* ಸಿಬಿಎಫ್

2ನೇ ಅರ್ಜಿದಾರರ ಹೆಸರು ಸಿಬಿಎಫ್

3ನೇ ಅರ್ಜಿದಾರರ ಹೆಸರು ಸಿಬಿಎಫ್

ಕಾರ್ಯಾಚರಣೆಯ ವಿಧಾನ* ☐ ಸ್ವಯಂ ☐ ಸ್ವಯಂ ಅಥವಾ ವಾರಸುದಾರ ☐ ಫಾರ್ಮರ್ ಅಥವಾ ವಾರಸುದಾರ ☐ ಯಾರಾದರೂ ಅಥವಾ ವಾರಸುದಾರ

☐ ಜಂಟಿಯಾಗಿ
ಚಲಾಯಿಸಲ್ಪಡುತ್ತದೆ

ಇತರರು (ದಯವಿಟ್ಟು ನಿರ್ದಿಷ್ಟವಾಗಿ ನಮೂದಿಸಿ)

ಅರ್ಜಿದಾರ 1	ಇತ್ತೀಚಿನ ಛಾಯಾಚಿತ್ರ	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 1	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 1
ಅರ್ಜಿದಾರ 2	ಇತ್ತೀಚಿನ ಛಾಯಾಚಿತ್ರ	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 2	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 2
ಅರ್ಜಿದಾರ 3	ಇತ್ತೀಚಿನ ಛಾಯಾಚಿತ್ರ	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 3	ಅರ್ಜಿದಾರರ ಸಹಿ/ಹೆಬ್ಬರಳಿನ ಗುರುತು 3

ಖಾತೆ ಐಡಿ

ಜಿಬಿಪಿಎ ಸಂಖ್ಯೆ/ಪಿಎಫ್ ಸಂ.

दिनांक □ □ □ □ □ □ □ □

ನಮೂನೆ ಸಾಕ್ಷಿದಾರರ ಪೂರ್ಣ ಸಹಿ

ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUAL (PART-II) FOR SAVING BANK, CURRENT ACCOUNT

[illegible]

3. Photo & Signature

The Branch Head Punjab National Bank

BO _____

D. No.

I/We hereby agree to comply by the Bank's existing Rules as detailed in the passbook/AOF/Bank's Website, governing Savings / Current accounts

1st Applicant Name*

2nd Applicant Name

[illegible]

Mode of Operation*	Self	Either or Survivor	Former or Survivor	Anyone or Survivor
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[illegible]

Applicant 1	Recent Photograph	Signature/Thumb impression of the Applicant 1	Signature/Thumb impression of the Applicant 1
Applicant 2	Recent Photograph	Signature/Thumb impression of the Applicant 2	Signature/Thumb impression of the Applicant 2
Applicant 3	Recent Photograph	Signature/Thumb impression of the Applicant 3	Signature/Thumb impression of the Applicant 3

Account ID

GBPA No./PF No.

Date

Full Signature of specimen witnessing officer