

(ఒకవేళ భాగస్వామ్య ఖాతాలు అయితే, పార్ట్-1 (సీఐఎఫ్) ను ప్రతీ ఖాతాదారుడు విడిగా తీసుకోవాలి)

**தேதி**

(\* గుర్తించబడిన ఫీల్డ్లు తప్పనిసరి. దయచేసి విడి అక్షరాలతో మాత్రమే పూరించండి. సంతకం కోసం నల్ల ఇంక్ ని మాత్రమే ఉపయోగించండి (దయచేసి తగిన బాక్సులో టిక్ చేయండి)

☐ మైనర్

సీరియల్ నెంబరు	చెక్ లిస్ట్	అవును	కాదు	వర్తించదు
1	షాన్ కార్డ్ కాపీ లేదా ఫారమ్ 60ని జత పరచాలి			
2	ఒకవేళ మీరు భారతదేశంలో పన్ను చెల్లింపుదారుడు కాకపోతే, అనుబంధం I (ఎఫ్ఎటీసీఏ) పొందుపర్చాలి			
3	దరఖాస్తుదారు మైనర్ అయితే, పూర్తిగా పూరించిన అనుబంధం II పొందుపర్చాలి			
4	అనుబంధం I మరియు అనుబంధం II (వర్తిస్తే)తో సహా ఫారమ్లూని అన్ని వివరాలు పూర్తి చేయబడ్డాయి మరియు సరిగ్గా తనిఖీ చేయబడ్డాయి అని నేను ధృవీకరిస్తున్నాను			
5	నేను వ్యక్తిగతంగా ధృవీకరణ జరిగిందని ఒప్పుకుంటున్నాను. దరఖాస్తుదారు యొక్క సంతకం / చేతి వేలు ముద్ర నాదేనని నేను ధృవీకరిస్తున్నాను			
6	ఖాతా ప్రారంభ ప్రక్రియలో భాగంగా స్వీకరించబడిన స్వీయ-ధృవీకరించబడిన పత్రాలు (గుర్తింపు రుజువు & చిరునామా రుజువు మరియు ఇతరాలు) ఒరిజినల్ అని ధృవీకరించబడ్డాయి మరియు సరైనవిగా గుర్తించబడ్డాయి. బ్యాంకు ద్వారా పొందిన ఓవీడిలో అదే సమోదయ చేయబడిందని నేను ధృవీకరిస్తున్నాను			
7	ఖాతా నిర్వహణకు సంబంధించిన పరిమితులు మరియు షరతులు దరఖాస్తుదారునికి వివరించబడిందని నేను ధృవీకరిస్తున్నాను (నిరక్షరాస్యులైన దరఖాస్తుదారు విషయంలో మాత్రమే)			
8	దరఖాస్తుదారు సంతకం నా ముందే పెట్టాడని, ఫోటో కూడా సదరు వ్యక్తిదే అని నేను ధృవీకరిస్తున్నాను			

పుట్టుమచ్చ లేదా మచ్చ వంటి ఒకటి లేదా రెండు గుర్తింపు గుర్తుల వివరాలు (నిరక్షరాస్యులైన దరఖాస్తుదారునికి తప్పనిసరి) \_\_\_\_\_

తేది        జిబీపీఎ నెంబరు      సంతకం

### 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

ત્રેડિ							
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[illegible]

1. ఐడి టైప్ \*

☐ పాస్ పోర్ట్ (ఒకవేళ ఎన్ఆర్ఐ/పిఐఐ అయితే తప్పనిసరి) ☐ ఓటరు ఐడెంటిటీ కార్డ్ ☐ డ్రావింగ్ లైసెన్స్ ☐ ఎన్ రెగా జాబ్ కార్డ్ ☐ పేరు & చిరునామా వివరాలతో కూడిన జాతీయ జనాభా రిజిస్టర్

☐ ఆధార్ నెంబరుకు సంబంధించిన రుజువు ☐ (i) - ఈ-కేపైసి ☐ (ii) - ఆఫ్ లైన్ వెరిఫికేషన్

2. డాక్యుమెంట్ ఐడెంటిఫికేషన్ నెంబరు\*

3. జారీ చేసిన వారు

4. జారీ చేసిన తేదీ \*  5. గడువు తీరిన తేదీ (ఒకవేళ ఉంటే)

1. చిరునామా రకం\* ☐ నివాసము/వ్యాపారం ☐ నివాసయోగ్యము ☐ వ్యాపారం ☐ రిజిస్టర్డ్ కార్యాలయం ☐ విదేశాలలో (ఎన్ఆర్ఐ/పిఐఓలకు తప్పనిసరి)

2. చిరునామా\*

3. నగరం/గ్రామము\*  4. జిల్లా\*

5. రాష్ట్రం\*  6. పిన్\*  7. దేశం\*

8. పైన పేర్కొన్న చిరునామాలోనే మీరు నివాసం ఉంటున్నారా?\* ☐ అవును ☐ కాదు

(ఒకవేల 'కాదు' అయితే, దయచేసి సీరియల్ నెంబరు. 3 ప్రకారం పత్రాల రుజువుతో పాటు సీరియల్ నెంబరు. 4 వద్ద ప్రస్తుత చిరునామాను అందించండి.)

[illegible]

**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. ਮੀਰੂ ਭਾਗੀਨ ਚਿਰਨਾਮਾ/ਓਵੀਡੀ ਯੋਕੁ ਰੁਝਾਨਾ ਪੁਸ਼ਟਤ ਚਿਰਨਾਮਾਨੁ ਕਲਿਗਿ ਊਂਡਕਘੋਠੇ, ਦਯਚੈਸਿ ਓਵੀਡੀ (ਅਧਿਕਾਰਿਕੰਗ ਚੇਲ੍ਹਾਭਾਟੁ ਅਯੋਧੇ ਪਤ੍ਰੰ)ਗਾ ਦਿਗੁਵਨ ਊਂਡੁ ਪਤ੍ਰਾਲਠੀਂ ਦੇਨਿਨੈਨਾ ਅੰਦਿੰਚੰਡੀ.**

☐ 1. ਵਿਨਿਯੋਗਪੁ ਭਿਲ੍ਹਾ\* ☐ 2. ਪੀਪੀਓ/ਐਫ ਪੀਪੀਓ\* ☐ 3. ਆਸ਼ਿ ਲੇਕ ਮੁਨਿਸਪਲਿਟ ਵਨ੍ਹੁ ਰਸੀਦੁ\*

☐ 4. ਰਾਸ਼ਟ੍ਰ ਲੇਦਾ ਕੇਂਦ੍ਰ ਪ੍ਰਭੁਤ੍ਵ ਵਿਭਾਗਾਲੁ, ਚਫ਼ਬਧਮੈਨ ਲੇਦਾ ਨਿਯੰਤ੍ਰਣ ਸੰਸਥਾਲੁ, ਪ੍ਰਭੁਤ੍ਵ ਰੰਗ ਸੰਸਥਾ, ਐਡਮਿਨਿਸਟ੍ਰੇਟਿਵ ਵਾਣਿਜਯ ਬ੍ਰਾਹਮਕੁਲੁ, ਆਰਥਿਕ ਸੰਸਥਾਲੁ ਮਰਿਯੁ ਲਿਸਟਿਡ ਕੰਪੇਨੀਲ ਦਵਾਰਾ ਯੁਜਮਾਨਿ ਜਾਰੀ ਚੈਸਿਨ/ਜਾਰੀ ਚੈਸਿਨ ਵਨਤਿ ਕੇਠਾਯੋਂਪੁ ਲੇਖੁ. ਅਲਾਗੇ ਯੁਜਮਾਨੁਲਠੀਂ ਲੀਜ਼ ਮਰਿਯੁ ਲੈਨਿਸ਼੍ਰ ਓਧੁੰਦਾਲੁ.\*

☐ 5. ਸ਼੍ਰੀਯ-ਡਿਕਲੇਰੇਸ਼ਨ (ਦਰਭਾਸ਼ੁਦਾਰੁ ਓਵੀਡੀ (ਆਧਾਰ ਪ੍ਰਾਮਾਣੀਕਰਣ) ਨਿਰ੍ਵਾਹਿੰਚਿਨਪੁਸ਼ਟਤ ਮਾਤ੍ਰਮੇਂ ਵਰ੍ਹਿੰਦੁ. ਆਧਾਰੀਨਿ ਚਿਰਨਾਮਾ ਪੁਸ਼ਟਤ ਚਿਰਨਾਮਾਨੁ ਸਮਾਨੰ ਕਾਦੁ)\*

6. ਪਤ੍ਰਮੁ ਨੋਬਰੁ\*.  7. ਟੇਡੀ\*

ਨੇਨੁ/ਮੇਮੁ ਮੂਡਾ ਨੋਲ ਵਧਵਧਿਠੀਂ ਅਪ੍ਰੋਵੀ ਚੈਯੋਭਡਿਨ ਪੁਸ਼ਟਤ ਚਿਰਨਾਮਾਠੀਂ ਕਾਡਿਨ ਓਵੀਡੀਨਿ ਸਮੁਰ੍ਹਿਸ਼ਾਮੁ. ਓਕਵੇਫ਼ ਅਲਾ ਭਵਨਿ ਪਕਸ਼ਠੀਂ ਭਾਣਾਠੀਂਨਿ ਕਾਰ੍ਯਕਲਾਪਾਲਨੁ ਬ੍ਰਾਹਮਕ ਨਿਯੰਤ੍ਰਿੰਚਿਨਪੁਸ਼ਟਤ. (ਪ੍ਰੋ ਪਾਯੋਂਟ ਨੋਬਰ 5 ਪ੍ਰਕਾਰੰ ਦਰਭਾਸ਼ੁਦਾਰੁ ਸ਼੍ਰੀਯ ਪ੍ਰਕਟਨਨੁ ਅੰਦਿੰਚਿਨਪੁਸ਼ਟਤ ਵਰ੍ਹਿੰਚਿਨਪੁਸ਼ਟਤ)

**6. ਪਨ੍ਨੁ ਰੁਝਾਨਾ**

1. ਪਾਨ\* / ਪਨ੍ਨੁ ਗੁਰ੍ਹਿੰਪੁ ਸੰਭ੍ਯ ਲੇਦਾ ਦਾਨਿਕੀ ਸਮਾਨਮੈਨਦਿ (ਅਧਿਕਾਰ ਪਰਿਧਿ ਦਵਾਰਾ  (ਓਕਵੇਲ ਪਾਨ ਸਮੁਰ੍ਹਿੰਚਿਨਪੁਸ਼ਟਤ ਫ਼ਾਰਮ 60ਨਿ ਪੁਰ੍ਹਿ ਚੈਯੋਂਡੀ) ਜਾਰੀ ਚੈਯੋਭਡਿਠੀਂ)

2. ਪਨ੍ਨੁਨਿ ਭਾਰਤਦੇਸ਼ਠੀਂ ਮਾਤ੍ਰਮੇਂ ਚੇਲ੍ਹਿੰਦੁ. ਭਾਰਤਦੇਸ਼ੰ ਨੋਲਪਲ ਮਰਿਯੁ ਓ ਭਾਰਤ ਭਾਗਾਂਠੀਂ ਕਾਦੁ\*  ਅਵਨੁ  ਕਾਦੁ (ਕਾਦੁ ਅਯੁਠੇਂ ਦਯਚੈਸਿ ਐਫਵੀਐਸੀਐਫ ਫ਼ਾਰਮ ਪੁਰ੍ਹਿ ਚੈਯੋਂਡੀ - ਅਨੁਬੰਧੰ)

**7. ਆਦਾਯੰ & ਵ੍ਯੁਤ੍ਥਿ / ਕਾਰ੍ਯਾਚਰਣਾ ਪ੍ਰਕਟਨ**

1. ਵ੍ਯੁਤ੍ਥਿ ਰਕਮੁ\*  ਪ੍ਰੋਵੀਡੀ ਰੰਗ ਸੇਵਲੁ  ਪਬਲਿਕ/ਪ੍ਰਭੁਤ੍ਵ ਰੰਗ ਸੇਵਲੁ  ਵਿਦ੍ਯਾਰ੍ਥਿ  ਪਦਵੀ ਵਿਰਮਣ ਪਾਓਦਿਨ ਵ੍ਯੁਤ੍ਥਿ  ਸ਼੍ਰੇਯੰ ਓਪਾਧਿ  ਐਲਾਈਨੀ ਲੇਦੁ  ਗ੍ਰਹਿਣੀ  ਭਾਰਤਮੁਲੁ (ਦਯਚੈਸਿ ਪੈਰ੍ਹੋਂਡੀ)

2. ਵ੍ਯਾਪਾਰੰ (ਸ਼੍ਰੇਯੰ ਓਪਾਧਿ ਵਾਰੀਕੀ ਮਾਤ੍ਰਮੇਂ)  ਵਰ੍ਹਕੁਲੁ  ਸ਼੍ਰੇਯਕਾਰੁਡੁ  ਸੇਵਲੁ ਅੰਦਿੰਚਿ ਵ੍ਯੁਤ੍ਥਿ  ਵ੍ਯਵਸਾਯੰ  ਸ਼੍ਰਾਕ ਟ੍ਰੇਡਰ  ਠਯਾਰੀ ਦਾਰੁਡੁ  ਆਯੁਧਾਲ ਡੀਲਰ  ਸ਼੍ਰੀਰਾਸ਼ਿ  ਭਾਰਤਮੁਲੁ (ਦਯਚੈਸਿ ਪੈਰ੍ਹੋਂਡੀ)

3. ਵ੍ਯੁਤ੍ਥਿ ਆਦਾਯੰ \* (ਰੁ.)  4. ਵ੍ਯਾਪਾਰ ਰਕਮੁ  (ਕੇਵਲੰ ਸ਼੍ਰੇਯੰ ਓਪਾਧਿ ਅਯੁਠੇਂਨੈਂ)

5. ਸੰਧ ਪੈਰੁ (ਭਿਣੰ ਸੰਪਾਦਿਸ਼ੁਨੁਵਾਰੀਕੀ ਮਾਤ੍ਰਮੇਂ)

6. ਘੋਂਦਾ/ ਵ੍ਯੁਤ੍ਥਿ (ਭਿਣੰ ਸੰਪਾਦਿਸ਼ੁਨੁਵਾਰੀਕੀ ਮਾਤ੍ਰਮੇਂ)

7. ਸਰ੍ਹੋਂ ਭਾਗੁਠੀਂ ਟੀਕ ਚੈਯੋਂਡੀ \*  ਰਾਜਕੀਯਾਲਠੀਂ ਪ੍ਰਮੇਯੰ ਓਨ੍ਨੁ ਵ੍ਯੁਤ੍ਥਿ  ਰਾਜਕੀਯਾਲਠੀਂ ਪ੍ਰਮੇਯੰ ਓਨ੍ਨੁ ਵ੍ਯੁਤ੍ਥਿ ਸੰਬੰਧੰ  ਲੇਦੁ

(ਰਾਜਕੀਯਾਲਠੀਂ ਪ੍ਰਮੇਯੰ ਓਨ੍ਨੁ ਵ੍ਯੁਤ੍ਥਿ ਅਠੀਂ ਵਿਦੇਸ਼ਾਲਠੀਂ ਪ੍ਰਮੁਖ ਪ੍ਰਯਾ ਵਿਧੁਲੁ ਨਿਰ੍ਵਾਹਿੰਚਿਨਪੁਸ਼ਟਤ ਲੇਦਾ ਅਪ੍ਰਗਿੰਚਿਨਪੁਸ਼ਟਤ ਵ੍ਯੁਤ੍ਥਿ. ਓਦਾ. ਦੇਸ਼ਾਧਿਨੇਤਲੁ / ਪ੍ਰਭੁਤ੍ਵਾਲੁ, ਸੀਨਿਯਰ ਰਾਜਕੀਯ ਨਾਯਕੁਲੁ / ਸੀਨਿਯਰ ਪ੍ਰਭੁਤ੍ਵ / ਨਾਯਕੁਲੁ / ਸ਼੍ਰੇਯੰ / ਸ਼੍ਰੇਯੰ ਅਧਿਕਾਰੁਲੁ, ਪ੍ਰਭੁਤ੍ਵ-ਯਾਜਮਾਨ੍ਯ ਸੰਸਥਾਲੁ ਚੋਦਿਨ ਸੀਨਿਯਰ ਐਗ੍ਰਿਕਲਚਰ, ਮੁਖਯਮੈਨ ਰਾਜਕੀਯ ਪਾਰ੍ਹਿਲੁ , ਮੋਦਰੇਨਿਸ਼ਿ)

**8. ਭਾਰਤ ਵਿਵਰਾਲੁ**

1. ਮੁਠੰ  ਹਿੰਦੁ  ਮੁਸਲਿਮ  ਕ੍ਰਿਸ਼ੀਯਨ  ਸਿੱਖ  ਭਾਰਤਲੁ (ਦਯਚੈਸਿ ਪੈਰ੍ਹੋਂਡੀ)

2. Category  ਜਨਰਲ  ਓਵੀਡੀ  ਐਨ ਸੀ  ਐਨ ਟੀ  ਮੈਨਾਰੀਟੀ

3. ਆਧਾਰਪਡਿਨ ਵਾਰੀ ਸੰਭ੍ਯ  4. ਨਿਰਕ੍ਸ਼ਰਾਸ਼ੁਲੁ  ਅਵਨੁ  ਕਾਦੁ  ਅਵਨੁ ਅਯੁਠੇਂ: ਗੁਰ੍ਹਿੰਪੁ ਵਿਵਰਾਲੁ:

5. ਨਿਵਾਸ ਸਥਿਤੀ \*  ਵ੍ਯੁਤ੍ਥਿਗਤ ਨਿਵਾਸੰ  ਨਾਨ-ਰੇਸਿਡੇਂਟ ਵ੍ਯੁਤ੍ਥਿ  ਵਿਦੇਸ਼ੀਯੁਲੁ  ਭਾਰਤੀਯ ਸੰਭਿਤੀਕੀ ਚੋਦਿਨ ਵ੍ਯੁਤ੍ਥਿ

6. ਦਰਭਾਸ਼ੁਦਾਰੁ ਰਕਮੁ / ਸਥਿਤੀ  ਵਯੋ ਵ੍ਯੁਤ੍ਥਿਲੁ  ਸਿਭ੍ਯੰਡੀ  ਪੀਐਫ ਨੋਬਰੁ.  ਮੈਨਰ  ਐਨਰ  ਸਾਧਾਰਣੰ  ਮਾਜੀ ਸਿਭ੍ਯੰਡੀ  ਪੀਐਫ ਨੋਬਰੁ.  ਪਰ੍ਰਣਾਸ਼ਿਨ

7. ਅਗਵੇਕਲ੍ਯੰ ਓਨ੍ਨੁ ਵ੍ਯੁਤ੍ਥਿ  ਅਵਨੁ  ਕਾਦੁ  ਅਵਨੁ ਅਯੁਠੇਂ  ਚਾਪੁ ਲੇਪੰ ਓਨ੍ਨੁਵਾਰੁ  ਵਿਭਿੰਨੁ ਸਾਮ੍ਧ੍ਯੰ ਕਲਿਗਿਨਵਾਰੁ

8. ਵਿਦ੍ਯਾਰ੍ਥ  10ਵ ਭਰਗਤਿ ਲੇਪੁ  10ਵ ਭਰਗਤਿ  ਪਾਓਵਨ ਸੀ  ਗ੍ਰਾਡੁਯੇਟ  ਪੋਸਟ ਗ੍ਰਾਡੁਯੇਟ  ਵ੍ਯੁਤ੍ਥਿਦਾਰੁਡੁ  ਭਾਰਤਲੁ

**9. ਅੰਗੀਕਾਰੰ ਮਰਿਯੁ ਸ਼੍ਰੀਯ ਅੰਗੀਕਾਰ ਪਤ੍ਰੰ**

ਭਾਣਾ ਠੇਰਿਚੈਂਦੁਕੁ ਸੰਬੰਧਿੰਚਿਨ ਨਿਬੰਧਨਲੁ & ਫ਼ਰਟੁਲ ਕਾਪੀਨਿ ਨੇਨੁ ਚਡਿਵਾਨੁ. ਨਿਬੰਧਨਲੁ & ਫ਼ਰਟੁਲ ਨਾਕੁ/ਮਾਕੁ ਵਿਵਰਿੰਚਿਨਪੁਸ਼ਟਤ. ਵਾਠੀਨਿ ਅਰ੍ਥੰ ਚੈਸੁਕੁਨੁ ਠੇਰਾਧਤ, ਨੇਨੁ ਦਾਨਿਨਿ ਅੰਗੀਕਰਿੰਦੁ. ਪੀਐਮਵੇਲਿਐ 2002 ਪ੍ਰਕਾਰੰ ਕੇਵਲਿ ਨਿਬੰਧਨਲਕੁ ਅਨੁਗੁਣੰਗਾ ਗੁਰ੍ਹਿੰਪੁ ਮਰਿਯੁ/ਲੇਦਾ ਚਿਰਨਾਮਾ ਰੁਝਾਨਾ ਕੋਨੰ ਯੁਭਡਿਐ ਸ਼੍ਰੇਯੰਡੰਗਾ ਜਾਰੀ ਚੈਸਿਨ ਆਧਾਰ ਕਾਰ੍ਥਿ ਨਿਬੰਧਿੰਚਿਨਪੁਸ਼ਟਤ ਨੇਨੁ ਪ੍ਰਕਟਿੰਦੁ. ਬ੍ਰਾਹਮਕ ਯੁਭਡਿਐਐਐ ਨੇਨੁ ਸਮੁਰ੍ਹਿੰਚਿਨ ਆਧਾਰਾਲਨੁ ਧ੍ਰਵੀਕਰਿੰਚਿਨਪੁਸ਼ਟਤ ਮਰਿਯੁ ਬ੍ਰਾਹਮਕੁ. ਬਯੋਮੇਟ੍ਰਿਕ ਪ੍ਰਮਾਣੀਕਰਣ ਦਵਾਰਾ ਗੁਰ੍ਹਿੰਪੁ ਮਰਿਯੁ ਚਿਰਨਾਮਾਨੁ ਵਿਡੁਦਲ ਚੈਯੋਭਡੀਕੀ ਯੁਭਡਿਐਐਐ ਅਧਿਕਾਰ ਭਵਨਿ ਨੇਨੁ ਭੰਡਾਲੰਗਾ ਸਮੁਰ੍ਹਿੰਦੁ.

☐ ਅਵਨੁ ☐ ਕਾਦੁ (ਓਵੀਡੀ ਪ੍ਰਮਾਣਨੰ ਪਾਓਦੈਂਦੁਕੁ ਓਵੀਡੀ ਅਧਿਕਾਰੀਕੀ ਮਰਿਯੁ ਆਧਾਰੀ ਟੀਡਿੰਗ ਠੇਰਾਧਤ)

ਫ਼ੋਟੋ\*

ਭਾਰਤੀਕੀਕੀ ਪਾਨ ਫ਼ੋਟੋ ਨੈਸ਼ਨਲ ਫ਼ੋਟੋਨਿ ਭਾਗੁਠੀਂ ਅਠੀਕਿੰਦੁ. ਦਯਚੈਸਿ ਪਿੰਨੁ ਕੋਭਡਿਐ

ਦਰਭਾਸ਼ੁਦਾਰੁ ਯੋਕੁ ਸੰਭਿਤੰ/ਚੈਠੀ ਚੈਠੀ ਮੁਦ੍ਰ - ਭੰਡਾਲੰਗਾ ਸਮੁਰ੍ਹਿੰਚਿਨਪੁਸ਼ਟਤ ਭੰਡਾਲੰਗਾ ਮਾਤ੍ਰਮੇਂ ਓਧਿੰਦੁ

ਸਥਿਤੀ  ਟੇਡੀ

<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*.	<input type="text"/>	7. Date*

## 6. Tax Proof

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)

[illegible]

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"/>	<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"/>	<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											

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

[illegible]

**సేవింగ్ బ్యాంక్, కరెంట్ ఖాతా కోసం కోసం**

ఖాతా రకం	సేవింగ్స్ బ్యాంక్ ఖాతా	బీఎస్ బీడీఏ	చిన్న ఖాతా	కరెంట్ ఖాతా
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**ಆಣಿಂಚಿನ ವರ್ಷೀಕ ಕ್ರೆಡಿಟ್ \***

1. ఏటీఎమ్ తో కూడిన డెబిట్ కార్డ్

[illegible]

2. చెక్ బుక్ ☐      2. ఇంటర్నెట్ బ్యాంకింగ్ వ్యూ ☐      3. లావాదేవీ ☐      4. ఎస్ ఎమ్ ఎస్ అల్ట్రాస్ (ఛార్జీలు వర్తిస్తాయి) ☐

5. ఫోన్ బ్యాంకింగ్ సర్వీసులు ☐ 6. మొబైల్ బ్యాంకింగ్ ☐ 7. ఈ-స్టేట్ మెంట్ (నెలకు ఒకసారి) కాగితం కాపీకి బదులుగా (ఈ-మెయిల్ తప్పనిసరి) ☐ 8. పాస్ బుక్ ☐

ఫారమ్ డీఏ-1 (నామినేషన్ ఫారమ్) రిజిస్ట్రేషన్ నెంబరు.

☐ నేను/మేము నామినీ యొక్క పేరుని పాస్ బుక్ పై ప్రింట్ చేయాలని కోరుకుంటున్నాను

## నామినీ వివరాలు

నామినీ మొబైల్ నెంబరు                     నామినీ పుట్టిన తేదీ (మైనర్ అయితే)     

దరఖాస్తుదారుతో సంబంధం      వయస్సు      సంవత్సరాలు

ఈ థేడికి నామిని మైనర్ అయినట్లుయితే, నను శ్రీ/శ్రీమతి/కుమారి ని నియమిస్తున్నాను \_\_\_\_\_వయసు   సంవత్సరాలు \_\_\_\_\_చిరునామా \_\_\_\_\_  
 నామిని యొక్క మైనారిటీ సమయంలో నేను / మైనర్ మరణించిన సందర్భంలో నామిని తరపున డిపాజిట్ మొత్తాన్ని స్వీకరించడానికి (వ్యక్తికి కాకుండా ఇతరులకు అనుకూలంగా నామినేషన్ చెల్లదు)

దరఖాస్తుదారుడు నిరక్షరాస్యుడు అయి చేతి వేలి ముద్ద ఉన్నప్పుడు మాత్రమే సాక్షులు అవసరం

“దరఖాస్తుదారుడి సంతకం / వేలిముద్ర”

మొదటి స్థానం

పేరు \_\_\_\_\_ సంతకం \_\_\_\_\_

చిరునామా \_\_\_\_\_

రెండో స్థానం

పేరు \_\_\_\_\_ సంతకం \_\_\_\_\_

చిరునామా \_\_\_\_\_

తేదీ \_\_\_\_\_ ఇంట్లో \_\_\_\_\_

రసిదు డివీ -1

మీరు వీరికి అనుకూలంగా చేసిన నామినేషన్ రసీదుని మేము ధృవీకరిస్తున్నాము:

నామినీ పేరు \_\_\_\_\_ వయసు: \_\_\_\_\_ సంవత్సరాలు: \_\_\_\_\_

మీ ఖాతా సంఖ్యకు సంబంధించి

రిజిస్ట్రేషన్ నెంబరు.

బ్యాంక్ అధికారి సంతకం

**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 ☐ BSBDA ☐ 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/Thumb impression of the Applicant

Signature of First witness

Signature of Second witness

Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_

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

1. 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 15. our Bank within 30 days from the date of opening of the account.
2. 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/We am / are aware that I /We may be held liable for it.
3. I /We agree to be bound by the terms & conditions, Instructions etc. as listed below &16. 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 Registry17. through SMS / Email on the above registered number / Email address
4. I/We hereby give my consent to download my KYC records from the Central CKYC registry (CKYCR) only for the purpose of verification of my identity and address from the18. database of CKYCR registry. I understand that my KYC record include my KYC record/personal information such as my name/address, date of birth , PAN no. etc. 19.
5. 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 /20. payment on maturity.
6. 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. (Applicable when opening Current Accounts).
7. 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 limited to debit card/internet banking/SMS banking/whatsappBanking/Tele-Banking/Mobile Banking /Virtual Banking and any other facility. I agree to abide by the22. 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 such23. 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 the24. 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. 25.
8. 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 /or26. address proof towards the compliance of KYC norms under the PMLA, 2002 and I27. 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. My Aadhaar number is NOT Seeded with any Bank: I wish to seed this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) to avail28. benefit under Scheme(s) notified under Section (7) of the Aadhaar Act. For this ,I hereby declare that I have submitted the Aadhaar Card issued by UIDAI. 29.
9. 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.
10. 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 registered30. 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.
11. 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)31. 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.
12. I understand, acknowledge and authorize that as per the provisions of Income Tax Act,32. Rules made thereunder and the guidelines issued by the Government /RBI in the matter,33. 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 format34. 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 Standards35. (CRS) and I or any other similar arrangements.
13. 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 for36. 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. 37.
14. 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/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.

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/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.

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.

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

**సేవింగ్ బ్యాంక్, కరెంట్ ఖాతా కోసం**

ಪೊದ್ದಿ

### 3. ఫోటో & సంతకం

పంజాబ్ నేషనల్ బ్యాంక్ శాఖాధికారి

డి. నెంబరు.

నేను/మేము పాస్చుక్/ఏఓఎఫ్/బ్యాంక్ వెబ్సైట్ లో ఉదహరించిన విధంగా విధంగా బ్యాంక్ ప్రస్తుత నిబంధనలకు లోబడి ఉండటానికి అంగీకరిస్తున్నాము.

ಖಾತಾಲು

మొదటి దరఖాస్తుదారు పేరు \*

[illegible]

రెండవ దరఖాస్తుదారు పేరు

నీదెండ్ల

మూడవ దరఖాస్తుదారు పేరు

నీదెవ్ఫ

ఉపయోగించే విధానం\*

☐ సొంతంగా

నేను లేదా సర్వే

మాజీ లేదా సర్వేపర్

ఎవ్వరైనా లేదా సర్వేపర్

మూడవ దరఖాస్తుదారు పేరు

5/10/2019

☐ ~~XXXXXXXXXXXXXXXXXXXX~~

ఇతిరములు     
(దయచేసి ఇక్కడ పేర్కొనండి)

దరఖాస్తుదారు 1	ఇటీవలి ఫోటో	దరఖాస్తుదారు 1 యొక్క సంతకం / చేతి వేలి ముద్ర	దరఖాస్తుదారు 1 యొక్క సంతకం / చేతి వేలి ముద్ర
దరఖాస్తుదారు 2	ఇటీవలి ఫోటో	దరఖాస్తుదారు 2 యొక్క సంతకం / చేతి వేలి ముద్ర	దరఖాస్తుదారు 2 యొక్క సంతకం / చేతి వేలి ముద్ర
దరఖాస్తుదారు 3	ఇటీవలి ఫోటో	దరఖాస్తుదారు 3 యొక్క సంతకం / చేతి వేలి ముద్ర	దరఖాస్తుదారు 3 యొక్క సంతకం / చేతి వేలి ముద్ర

ಖಾತಾ ಐಡ್ ID

జిబీపీఎం నెంబరు./పిఎఫ్ నెంబరు.

తేది

సాక్షి అధికారి యొక్క పూర్తి సంతకం

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

[illegible]

### 3. Photo & Signature

The Branch Head Punjab National Bank

BO

[illegible]

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

**1<sup>st</sup> Applicant Name\***

**2<sup>nd</sup> Applicant Name**

3<sup>rd</sup> Applicant Name                     CIF

Mode of Operation*	Self	Either or Survivor	Former or Survivor	Anyone or Survivor
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☐ Jointly Operated    ☒ Others \_\_\_\_\_  
                                    (Please Specify)

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