

JAMIA CO-OPERATIVE BANK LTD. Regd. Off.: 334 E, Batla House Jamia Nagar, New Delhi- 110025 Tel: 011-26322236/64558232 Website: www.jamiacoopbank.com

					For	Off	icia	l Us	e C	nly			
Cu	sto	mer	ID	(U	CIC	)							
Me	emb	ers	nip	No.									
Ac	cou	nt N	lum	ber									
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ACCOU	NT OPENING FORM FOR INDIV	/IDUALS
To, Branch Manager Jamia Cooperative Bank Ltd. New Delhi	Da <sup>*</sup> Bra	te: D D M M Y Y Y Y
Please Open a Bank Account as per	details given below for which I/We depo	osit ₹/-
(Rupees in words )		)
Type of Account		
Savings Bank Current	Fixed Deposit	Recurring Deposit Others (Specify)
Single Account Joint Ac	count Minor Account C	Others (specify)
Account Category		
Basic Silver	☐ Gold ☐ F	Platinum Member A/c.
Mode of Operation		
	r Survivor Former or Survivor A	
In case of MINOR ACCOUNT (Full d	etails of minor)	
Minor's Date of Birth:	/ Y Y Y Y	
The Minor's Account will operated by I	Mr./Ms	
	relationship with Minor Father/Motl	her/Legal Guardian
Personal Detail of Account Holders		
1 <sup>st</sup> Applicant Mr./Mrs./Ms	2 <sup>nd</sup> Applicant Mr./Mrs./Ms	3 <sup>rd</sup> Applicant Mr./Mrs./Ms
Male Female Gender	☐ Male ☐ Female ☐ Third Gender	Male Female Third Gender
Date of D D M M Y Y Y Y	Date of Birth	Date of Birth
Please Affix Passport size photograph	Please Affix Passport size photograph	Please Affix Passport size photograph
Signature	Signature	Signature

	1st A	ppli	can	ıt					2n	ıd A	ppl	ica	nt					3rc	<b>IA</b> p	pli	car	ıt					
PermanentAddress																											
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	State Pin C		_		Т	T				ate- n Co		_	Т	T	T	Т			ile - i Co		_	$\overline{}$	$\overline{\top}$	$\overline{}$	$\overline{}$		
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Communication, if Different from above									-									—									
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KYC Documents																											
Identity Proof (Any of the following)	1st <i>F</i>	Appli	can	t					2r	nd A	Appl	icar	nt					3r	d A	ppli	icar	nt					
PAN																											
Aadhar Card No.																											
Passport No.																											
Voter ID Card no.																											
NREGA/DL/Emp. ld Card																							L		<u>L</u>		
Address Proof (Any of the	ne follo	owing	g)																								
Ration Card No.																											
Latest Electricity Bill CANo.																											
Latest Telephone Bill CANo.																											
Bank account statement or	Bank Name								Bar Nar									Bar Nar									
passbook	A/c								A/c									A/c									
Latest Copy of LIC Insurance	LIC								LIC									LIC				Т	Т	$\top$	$\overline{}$		
Premium receipt	Policy Branc								Poli Bra	icy nch								Poli Bra	-			T	T		Ħ		
Letter from employer certifying			<u> </u>						1				<u> </u>		 <u> </u>								_	<del></del>			
the current mailing address	Name	of En	nploy	er					Nar	ne o	f Em	ploy	er_					Naı	ne o	f En	nploy	yer_					
(only from private limited/ limited companies)	Desigr	nation	of S	ignat	ory_				Des	signa	ation	of S	igna	tory				Des	signa	ation	of S	Signa	ator	y			
Existing valid registered lease agreement on stamp paper (in case of rented/ leased accommodation or shifting/transfer of residence)	ID of L	andlc	ord						ID o	of La	ndlo	rd						ID (	of La	ndlo	ord_						

Service / Bus	iness Deta	ails	5																										
Name of Comp	any												T																
Designation													T																
Employee's ID	No.												Ī																
Service/Busine	i							-																					
(No. of years c	ompleted)																												_
Office Address		_								_	_								_	–									_
		_								_									_	-									_
State		=		_	_	_			_	=		$\overline{}$			1	_		_	=	=	_		_	_		$\overline{}$	_		≒
Pin code																				L									╛
Email ID (Office	e)																												
Facilities Red	quired																												
Cheque	Book				Per	sor	nalise	d C	hequ	ıe I	3ook				s	MS	Ale	erts											
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U Others (s	specify)					•••	•••••			• • • •									• • • •										
NOMINATION (E	DA1Form)						_	,																					
Nomination req	uired:			Ш	Ye	S	L	J	No																				
I have been exp	lained abou	t th	e b	enef	its o	f th	ne Non	nina	tion f	aci	lity; ł	nowe	vei	r, I do	not	t wis	sh to	pro	ovid	e N	omir	atio	on f	or tl	his <i>i</i>	Acco	ount		
*Nomination und respect of the Ba			of 1	the E	anki	ng	Regula	ation	Act 1	94	9, and	l rule	2(	1) of	the C	Со-о	pera	ative	Bar	nks (	Nom	ina	tion	) Ru	les,	198	5, in		
Whether nomina	tor(s) agree(	s) to	o ha	ave n	ame	of	the no	mine	e on	pas	s boo	k/Sta	ater	ment	of A	ccou	ınt		] Y	es		No	(ple	ase	tick	арр	ropr	iate	
box)																													
I/We, hereby nor below, may be pa			_					the e	event	of r	ny/ou	r/min	or's	s dea	th, th	ne a	mou	int of	the	dep	osit	part	ticula	ars o	of w	hich	are (	give	n
A/c. type	A/c. Num				_		ne of N	lomi	nee	Τ	Nor	mine	e's a	Addre	ess						Rela	tion	1				A	ge	_
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I/We appoint Mr./M	•				•																	J							
to receive the amou											-		•		-	-													
Witness detail (Two																	•		•										
Witness No. 1						Wit	ness No	. 2										#	Signa	ature	(s) /tl	numl	b Imp	oress	ion (	s)			
Name						Naı	me											0	f Dep	osito	or (s)								
Address:						Ado	dress:																						
																		1											
Signature:						Sig	nature:											2											
Place:						Pla	ce:																						
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# Where Deposit is m # Thumb Impression	ade by minor, the	Nom	ninati	on sho	uld be	sigr	ned by a	ersor	ı lawfull	y en	titled to	act on l	beha	alf of th	e mino	or													

## **Declaration:**

I/We, hereby irrevocably agree and undertake to abide by KYC norms and to submit following documents / Information to the bank:

- 1) Copies of documents for KYC updation with original for verification.
- 2) Immediately inform the Bank in writing of change in my/our residential/business address, Service/occupation/nature of business.
- 3) Any additional information as required with reference to my/our account and transaction.
- 4) Joint Account : I/We hereby authorize the Bank to make payment of deposit to the survivor without concurrence of the legal heir of the deceased account holders.
- 5) The Bank rules & regulations relating to accounts have been read& understood by me/us and I/we agree to abide by the said rules & regulations and any amendments made thereto from time to time as displayed on bank's Website/Notice Board and those relating to various services including but not limited to ATM Card, SMS Banking, Mobile Banking, Internet Banking etc.
- 6) I/We understand that the Bank may at its discretion discontinue any of the service completely or partially. I/We agree that the Bank may debit to my/our account with service charges as applicable from time to time.

<ul><li>7) I/We confirm that I/we am/are reside</li><li>8) I/we am/are not availing any credit fa</li></ul>	nt of India. cility from any other bank OR I/we am,	/ara availing fallowing cradit fa	cilitias as spa	oified		
Bank	Type of Credit Facility	Amount	cillies as spec		Tenure	
<del></del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
I/We hereby declare that the informat All the points in the above declaration	ion furnished above is true & corre have been well explained to me	ect to the best of my/our kn by the bank.	owledge.			
					Yours f	faithfully,
1st Applicant Signature (s) / thumb Impression (s		Applicant humb Impression (s)	Sig	3rd Applic nature (s) / thumb		s)
3 (7)	, , , , , , , , , , , , , , , , , , , ,	, , ,				
Introducer Details:						
Name of Introducer Mr./Mrs./Ms						Dranch
A/c. with Jamia Co-Operative Bank Lt		UCIC/Membership no.:				Branch
Account Number.		_ COTO/MEMBERSHIP NO[				
Signature		Date:				
For Bank Use Only						
Account Opened by:	Cash Received by :		Officer	/ Assistant Manage	er/Branch Ma	ınager:
Employee Code	Employee Code		Employ	yee Code		
Signature:	Signature:		Signati	ure:		

Other Information			
Residence	Owned by self	Owned by self Owned by s	self
	Owned by Family	Owned by Family Owned by F	-amily
	Company Owned	Company Owned Company C	)wned
	Rented House	Rented House Rented House	ıse
	Others Specify	Others Specify Others Spe	cify
Religion	Hindu Muslim	Hindu Muslim Hindu	Muslim
	Sikh Christian	Sikh Christian Sikh	Christian
	Jain	Jain Jain	
	Others Specify	Others Specify Others Spe	cify
Caste	General SC	General SC General	SC
	ST OBC	ST OBC ST	OBC
	Others Specify	<del>                                     </del>	ecify
Marital Status	Unmarried Married	Unmarried Married Unmarried	Married
If married, date of Marriage	D D M M Y Y Y		M Y Y Y Y
No. of Dependent			
(Spouse+Parents+ Children)	++=	+	+=
Annual Income	Upto Rs.2.00 Lakh Above Rs.2.00 Lakh to Rs.5.00 Lakh		00 Lakh to Rs.5.00 Lakh
	Above Rs.5.00 Lakh to Rs.10.00 Lakh Above Rs.10 Lakh (Specify)		00 Lakh to Rs.10.00 Lakh 0 Lakh (Specify)
Profession/Occupation	Salaried (Govt./Non-Govt.)-	Salaried (Govt./Non-Govt.)- Salaried (G	Govt./Non-Govt.)-
	Non-Govt. Specify	Non-Govt. Specify Non-Govt.	Specify
	Business/Profession (Specify)	Business/Profession (Specify) Business/P	Profession (Specify)
	House wife/ Retired/Student		/ Retired/Student
	Politician	Politician Politician	.,
	Others Specify		ecify
Educational Qualification	Engineer Doctor	Engineer Doctor Engineer	=
	Architect Lawyers	Architect Lawyers Architect	Lawyers
	CA Post Graduate	CA Post Graduate CA	Post Graduate
	Graduate Undergraduate	Graduate Undergraduate Graduate	
	Others Specify	Others Specify Others Sp	pecify
Accet Ownership Det	aile.		
Asset Ownership Det	ans		
Flat/House	Yes No	Yes No Yes	No
Commercial Property	Yes No	Yes No Yes	No No
Car	Yes No	Yes No Yes	No
Two Wheeler	Yes No	Yes No Yes	No

## Form No. 60

	[See second proviso rule 114B]
	m of declaration to be filled by a person who does not have a permanent account number and who enters into any esaction specified in rule 114B
1	Full name & address of the declarant
2	Particulars of transaction
3	Amount of transaction
4	Are you assessed to Tax? Yes No
5	If yes,
	Details of Ward / Circle / Range where the last return of income was filed Reason for not having PAN
6	Detail of the document being produced in support of address in column (1)
	l,
	do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today(Date)
Da	e:
Pla	ce: Signature of the declarant
	Form No. 61 [See second proviso to clause (a) of rule 114C (1)]
	. **********
ch	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant
ch	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant
1 2	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction
ch	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction
1 2	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction  Yes No
2 3	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction  Yes No  If yes,
2 3 4	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction.  Are you assessed to Tax?  Yes  No  If yes,  Details of Ward / Circle / Range where the last return of income was filed.
2 3 4	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction.  Are you assessed to Tax?  Yes  No  If yes,  Details of Ward / Circle / Range where the last return of income was filled.  Reason for not having PAN.
2 3 4	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction.  Are you assessed to Tax?  Yes  No  If yes,  Details of Ward / Circle / Range where the last return of income was filed.
chi 1 2 3 4 5	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction  Are you assessed to Tax? Yes No  If yes,  Details of Ward / Circle / Range where the last return of income was filed  Reason for not having PAN.  Detail of the document being produced in support of address in column (1)  I,  do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today
2 3 4 5	[See second proviso to clause (a) of rule 114C (1)]  m of declaration to be filled by a person who has agricultural income and is not in receipt of any other income regeable to income-tax in respect of transactions specified in rule 144B  Full name & address of the declarant  Particulars of transaction  Amount of transaction  Are you assessed to Tax?  Yes  No  If yes,  Details of Ward / Circle / Range where the last return of income was filed.  Reason for not having PAN.  Detail of the document being produced in support of address in column (1)  I,  do hereby declare that what is stated above is true to the best of my knowledge and belief. Verified today
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