



THE CHEMBUR NAGARIK SAHAKARI BANK LTD.

Branch _____

Date : / / 20

Customer ID No. _____ Account No. _____ Account Type _____

ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUALS

I/We request you to open in my/our name (whichever is applicable)

CURRENT ACCOUNT / SAVING ACCOUNT / TERM DEPOSIT

(Specify scheme type)

First Applicant

Surname Mr./Mrs./Ms. _____ First Name _____

Middle/Father/Husband's Name _____

Mother's Name _____ Religion _____ Nationality _____

Date of Birth _____ PAN No. _____ or Form 60/61 submitted

Occupation Service Business Housewife Ex-Servicemen Student Retired
 Agriculture/Allied Others, Please Specify _____

Professional/Self - employed Doctor Lawyer Engineer CA Others, Please Specify _____

Permanent Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Office Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Email ID _____

Tel (R) _____ Tel (O) _____ Mobile _____ Fax _____

Second Applicant

Surname Mr./Mrs./Ms. _____ First Name _____

Middle/Father/Husband's Name _____

Mother's Name _____ Religion _____ Nationality _____

Date of Birth _____ PAN No. _____ or Form 60/61 submitted

Occupation Service Business Housewife Ex-Servicemen Student Retired
 Agriculture/Allied Others, Please Specify _____

Professional/Self - employed Doctor Lawyer Engineer CA Others, Please Specify _____

Permanent Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Office Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Email ID _____

Tel (R) _____ Tel (O) _____ Mobile _____ Fax _____

Third Applicant

Surname Mr./Mrs./Ms. _____ First Name _____

Middle/Father/Husband's Name _____

Mother's Name _____ Religion _____ Nationality _____

Date of Birth _____ PAN No. _____ or Form 60/61 submitted Occupation Service Business Housewife Ex-Servicemen Student Retired
 Agriculture/Allied Others, Please Specify _____Professional/Self - employed Doctor Lawyer Engineer CA Others, Please Specify _____

Permanent Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Office Address _____

_____ City _____

Dist _____ State _____ Pincode _____

Email ID _____

Tel (R) _____ Tel (O) _____ Mobile _____ Fax _____

Account will be operated

- Self Either or Survivor Former or Survivor Jointly or Survivor
 Any one of us or any one of the survivors or the last survivor. Minor by Guardian

In case of Minor

Name of the Guardian _____

Relationship with Minor Father Mother Guardian Any other instruction _____**Documents Attached**

- Photo PAN card Ration card zerox Passport zerox Aadhar Card
 Election commission card zerox Electricity bill Telephone bill

Please offer me

- Cheque Book ATM cum Debit Card Phone Banking SMS Banking

Declaration for ATM cum Debit Card :

I/We declare that the above information is correct and I/We have read and hereby accept the ATM cum Debit Card terms and conditions and to the amendments thereof. I/We hereby request the Bank to issue me an ATM cum Debit Card as requested and authorize the Bank to debit my / our above mentioned Account for all withdrawals to be made by using the card and also to recover the Bank's charges / fees as applicable from time to time.

Name to be embossed on ATM cum Debit Card :

Signature

INTRODUCTION DETAILS :

Introducers Account No. _____ Type of Account : _____ Branch : _____

I know the applicant/s for the last _____ months / years. I confirm the Identity, Occupation and Address of the applicant/s. I recommend that the Bank may consider to open the account.

Introducer's Name _____ Introducer's Signature : _____

Date : / / 201

I/We agree to comply with and be bound by the Bank's Rules for the time being in force for the conduct of such account. I/We authorize the bank to collect bills, cheques, etc. for and on behalf of me/us and undertake to abide by and be bound by the the Terms and Conditions in this behalf.

Spl. Instruction for Term Deposits: "In the event of death of any of the joint depositors prior to maturity of the deposit, the deposit, the Bank will be, at the request of the surviving depositor or all surviving depositors at liberty though not bound and at its absolute discretion to add/delete any name, or to repay the deposit before maturity or grant an advance against the security thereof, on such terms and conditions as the Bank may decide and such payment before maturity shall constitute a valid discharge to the Bank".

Please affix
Photograph

Please affix
Photograph

Please affix
Photograph

Specimen Signature

Specimen Signature

Specimen Signature

Specimen Signature

Specimen Signature

Specimen Signature

NOMINATION FORM DA 1

Nomination under sec. 45 AZ read with section 56 of the Banking Regulation Act 1949 and Rule 2(1) of the Co-operative Bank (Nomination) Rule 1985, in respect of Bank deposits.

I/We _____

[Name(s) & Address (es)]

Nominate the following person to whom in the event of my / our / minor's death the amount of deposit in the account, particulars whereof are given below, may be returned by THE CHEMBUR NAGARIK SAHAKARI BANK LTD. _____ Branch.

Nature of Deposit & Number	Name and Address of Nominee	Relationship with Depositor, if any	Age	If nominee is a minor, his date of birth

* As the nominee is minor on this date, I/We appoint _____ (Name, Address & Age) to receive the amount of the deposit in the Account on behalf of the nominee in the event of my / our / minor's death during the minority of the nominee.

Place : _____

Date : _____

**Signature(s) / #Thumb impression(s) of Depositors

Signature of witness No. 1 _____	Signature of witness No.2 _____
Name (s) _____	Name (s) _____
Address(es) _____	Address(es) _____
** Where deposit is made in the name of a minor, the nomination should be signed by person lawfully entitled to act on behalf of the minor. #Thumb impressions shall be attested by two witnesses.	

Nomination Registration No. _____

Date _____

Signature & code No. Of Branch Official

Terms and condition regarding collection of Cheques / Bills & Other Instruments.

The Bank at its option but at the risk & responsibility of the account holder may.

1. Collect proceeds of the instruments lodged by the Account holder from time to time.
2. Appoint an agent/s to collect the proceeds of the instruments lodged by the Account holder and such agent/s appointed shall be the agent/s of the Account holder to collect such instruments.
3. Recover proceeds of instruments lodged by the Accounts holder by way of Bank Draft/Cheque or any other mandate in lieu of cash.
4. Take action/steps as deemed necessary to have proceeds of the instruments lodged.
5. The Bank is hereby empowered to recover the various charges, if any by debiting the same to Account holder.

PERSONAL INFORMATION SHEET (Continuation)

	First Applicant	Second Applicant	Third Applicant
Education Qualification	<input type="checkbox"/> Non - Matric <input type="checkbox"/> HSC / SSC <input type="checkbox"/> Under-Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post - Graduate	<input type="checkbox"/> Non - Matric <input type="checkbox"/> HSC / SSC <input type="checkbox"/> Under-Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post - Graduate	<input type="checkbox"/> Non - Matric <input type="checkbox"/> HSC / SSC <input type="checkbox"/> Under-Graduate <input type="checkbox"/> Graduate <input type="checkbox"/> Post - Graduate
Income Details (Annual)	<input type="checkbox"/> Up to Rs. 60,000 <input type="checkbox"/> 60,000 to 1.2 Lakhs <input type="checkbox"/> 1.21 Lakhs to 1.80 Lakhs <input type="checkbox"/> 1.81 Lakhs to 3.00 Lakhs <input type="checkbox"/> 3.01 Lakhs to 5.00 Lakhs <input type="checkbox"/> Above 5 Lakhs	<input type="checkbox"/> Up to Rs. 60,000 <input type="checkbox"/> 60,000 to 1.2 Lakhs <input type="checkbox"/> 1.21 Lakhs to 1.80 Lakhs <input type="checkbox"/> 1.81 Lakhs to 3.00 Lakhs <input type="checkbox"/> 3.01 Lakhs to 5.00 Lakhs <input type="checkbox"/> Above 5 Lakhs	<input type="checkbox"/> Up to Rs. 60,000 <input type="checkbox"/> 60,000 to 1.2 Lakhs <input type="checkbox"/> 1.21 Lakhs to 1.80 Lakhs <input type="checkbox"/> 1.81 Lakhs to 3.00 Lakhs <input type="checkbox"/> 3.01 Lakhs to 5.00 Lakhs <input type="checkbox"/> Above 5 Lakhs
In case of Current Account Annual Turnover (Rs.)			
Type of Accommodation	<input type="checkbox"/> Owned <input type="checkbox"/> Office Provided <input type="checkbox"/> Rented <input type="checkbox"/> Others	<input type="checkbox"/> Owned <input type="checkbox"/> Office Provided <input type="checkbox"/> Rented <input type="checkbox"/> Others	<input type="checkbox"/> Owned <input type="checkbox"/> Office Provided <input type="checkbox"/> Rented <input type="checkbox"/> Others
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Un-married	<input type="checkbox"/> Married <input type="checkbox"/> Un-married	<input type="checkbox"/> Married <input type="checkbox"/> Un-married
Number of Dependents	<input type="checkbox"/> Children <input type="checkbox"/> Others	<input type="checkbox"/> Children <input type="checkbox"/> Others	<input type="checkbox"/> Children <input type="checkbox"/> Others
Nature of Business			
Name of Employer			
Religion			
Category	<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Others	<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Others	<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Others
Blood Group			
Name of Spouse			
Education of Spouse			
Occupation of the spouse			
Existing Bank (Name)			
Name of Branch			
Movable / Immovable Property	<input type="checkbox"/> House <input type="checkbox"/> Two - Wheeler <input type="checkbox"/> Car <input type="checkbox"/> Computer <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Cell Phone	<input type="checkbox"/> House <input type="checkbox"/> Two - Wheeler <input type="checkbox"/> Car <input type="checkbox"/> Computer <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Cell Phone	<input type="checkbox"/> House <input type="checkbox"/> Two - Wheeler <input type="checkbox"/> Car <input type="checkbox"/> Computer <input type="checkbox"/> Air Conditioner <input type="checkbox"/> Cell Phone
Type of Loans	Loan Facilities Whether available 1. Car <input type="checkbox"/> Yes <input type="checkbox"/> No. 2. Housing <input type="checkbox"/> Yes <input type="checkbox"/> No. 3. Consumer Durable <input type="checkbox"/> Yes <input type="checkbox"/> No. 4. Business <input type="checkbox"/> Yes <input type="checkbox"/> No. 5. Loan against shares <input type="checkbox"/> Yes <input type="checkbox"/> No. 6. Insurance Policy <input type="checkbox"/> Yes <input type="checkbox"/> No. 7. Travel Abroad <input type="checkbox"/> Yes <input type="checkbox"/> No. 8. Education Loan <input type="checkbox"/> Yes <input type="checkbox"/> No.	Number of years since you last availed the loan 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	In the next 6 months do you intend availing any of these loans 1 <input type="checkbox"/> Yes <input type="checkbox"/> No. 2 <input type="checkbox"/> Yes <input type="checkbox"/> No. 3 <input type="checkbox"/> Yes <input type="checkbox"/> No. 4 <input type="checkbox"/> Yes <input type="checkbox"/> No. 5 <input type="checkbox"/> Yes <input type="checkbox"/> No. 6 <input type="checkbox"/> Yes <input type="checkbox"/> No. 7 <input type="checkbox"/> Yes <input type="checkbox"/> No. 8 <input type="checkbox"/> Yes <input type="checkbox"/> No.
Whether customer is Shareholder of Bank	Membership No. _____ Date _____	Membership No. _____ Date _____	Membership No. _____ Date _____
Signature	First Applicant	Second Applicant	Third Applicant

FOR BANK'S USE ONLY

Introducer's Customer No. _____

Address of the applicant/s has been confirmed on the basis of _____

Photograph/s has / have been affixed and signed in my presence. _____

Applicant / Introducer has / have signed in my presence _____

Introduction confirmation letter sent to the introducer on _____

Confirmation received on _____ Signature on confirmation letter verified. _____

Master Entered _____ Initial _____

Master Authorised _____ Initial _____

Signature & code no. of Branch Official _____