

1. Professional / Self-employed 2. Wage / Salary Earner 3. Trade / Business 4. Agriculture 5. House Wife 6. Retired Person  
7. Student 8. Others **M** : Male **F** : Female **T** : Transgender

**Contact Details** (All communications will be sent on Registered Mobile No. & Email ID )

Mobile No.

Aadhar No.

E-mail ID

1. Applicant

2. Applicant

3. Applicant

4. Applicant

**CORRESPONDENCE ADDRESS**

H.No. / Plot No.

Building /  
Apartment

Street / Road

Area

Landmark

City

State

Pincode

Fax No.

**PERMANENT ADDRESS**

H.No. / Plot No.

Building /  
Apartment

Street / Road

Area

Landmark

City

State

Pincode

Fax No.

**MODE OF OPERATION**☐ Self☐ Either / Any one or Survivor☐ Jointly☐ Others (Please specify) \_\_\_\_\_**RuPay DEBIT CARD**☐ Personalised Card - Name to be embossed \_\_\_\_\_☐ Instant Card Ref No. \_\_\_\_\_ PIN Mailer Ref No. \_\_\_\_\_**DBT Declaration** (Tick (✓) only one from below for NPCI Mapper for getting DBT benefits)☐ Map my Account No. \_\_\_\_\_ at NPCI to enable me to receive Direct Benefit Transfer (DBT) from Govt. of India in my account. I understand that if more than one benefit transfer is due to me, I will receive all Benefits transfer in this account.☐ I already have an account with another bank linked to Aadhaar card only that will be used for NPCI mapper and for receiving Direct Benefit Transfer (DBT) from Govt. of India (or) I do not wish to seed my accounts from your bank with NPCI Mapper.



Membership No. \_\_\_\_\_ No. of Shares held \_\_\_\_\_ Value per Share \_\_\_\_\_

12) Total Value of Assets / Networth ₹ \_\_\_\_\_

13) Educational Qualification : \_\_\_\_\_

14) Marital Status : \_\_\_\_\_

15) Nationality : \_\_\_\_\_

16) Domicile : \_\_\_\_\_

17) Category - GEN/SC/ST/OBC/Minority (Specify) \_\_\_\_\_

18) Name and Address of employer\_\_\_\_\_

19) (a) Source of Income \_\_\_\_\_

b) Anticipated level / nature of activity \_\_\_\_\_

20) Family Members : **Adults** : M \_\_\_\_\_ F \_\_\_\_\_ T \_\_\_\_\_ **Minors** : M \_\_\_\_\_ F \_\_\_\_\_ T \_\_\_\_\_

21) Mother's Maiden Name : \_\_\_\_\_

22) Politically exposed person ☐ Related to Politically exposed person ☐ None ☐

[illegible]

25) Religion : \_\_\_\_\_

Place \_\_\_\_\_

(Signature/Thumb Impression of Customer)

Date \_\_\_\_\_

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**FOR OFFICE USE**

1) Threshold Limit (as per KYC Norms) ₹ \_\_\_\_\_

2) Risk Categorisation (as per KYC Norms) - **LOW / MEDIUM / HIGH**  
(to be revised according to development in the account / Social Status)

Authorised Officer / Branch Manager



**DOCUMENTATION CHECK LIST****Officially valid Documents : OVD**

1. Passport
2. Driving Licence
3. Aadhaar Number
4. Proof of possession of Aadhaar number
5. Voter's identity Card issued by the Election Commission of India.
6. Job Card issued by NREGA duly signed by an officer of the State Government and
7. Letter issued by the National Population Register containing details of name and address.

Constitution	Documents to be Submitted
Account of Individual Current Account	<ol style="list-style-type: none"> <li>1. Any of the Officially Valid Documents (OVD).</li> <li>2. Permanent Account Number (PAN) and any of the following :               <ol style="list-style-type: none"> <li>i. GSTIN registration certificate.</li> <li>ii. Certificate / Licence issued by the Municipal Authorities under Shop &amp; Establishment Act.</li> <li>iii. Certificate/Registration document issued by Professional Tax Authorities.</li> <li>iv. License issued by the registering authority like Certificate of Practice in the name of individual issued by any of the following professional body incorporated under a statute.                   <ul style="list-style-type: none"> <li>• Institute of Chartered Accountants of India</li> <li>• Institute of Cost Accountants of India</li> <li>• Institute of Company Secretaries of India</li> <li>• Indian Medical Council</li> <li>• Food and Drug Control Authorities</li> <li>• Institutions associations like bar council and institute of valuers.</li> </ul> </li> <li>v. Registration/License document issued by the Central Government / State Government / Authority Department.</li> </ol> </li> </ol>
HUF - Account	<ol style="list-style-type: none"> <li>1. Joint Family Statement</li> <li>2. PAN in the name of HUF</li> <li>3. Any of the Officially Valid Documents (OVDs) for Karta and Co-parceners</li> <li>4. Permanent Account Number (PAN) in respect of Karta and Co- parceners</li> </ol>
Account of a Company	<ol style="list-style-type: none"> <li>1. Certificate of Incorporation</li> <li>2. Certificate of Commencement of Business, if it is not available, undertaking should be submitted</li> <li>3. Memorandum and Articles of Association:</li> <li>4. A resolution from the Board of Directors and power of attorney granted to person's to transact on its behalf;</li> <li>5. PAN in the name of company</li> <li>6. GSTIN / UIN</li> <li>7. List of Directors</li> <li>8. (a) Any of the Officially Valid Documents (OVD) &amp; (b) PAN in respect of all directors</li> <li>9. (a) Any of the Officially Valid Documents (OVD) &amp; (b) PAN in respect of the person's holding an attorney to transact on its behalf.</li> </ol>
Account of a Proprietary concern	<ol style="list-style-type: none"> <li>1. Any of the Officially Valid Documents (OVDs)</li> <li>2. Permanent Account Number (PAN) (as applicable to an individual) for the proprietor. And any two of the following in the name of Proprietary Concern:               <ol style="list-style-type: none"> <li>i) GSTIN/UIN</li> <li>ii) Registration Certificate (in the case of a registered concern);</li> <li>iii) Certificate/License issued by the Municipal Authorities under Shop &amp; Establishment Act</li> <li>iv) Certificate/Registration Document issued by Professional Tax Authorities</li> <li>v) License issued by the Registering Authority, like Certificate of Practice issued in the name of proprietary concern by any professional body incorporated under a Statute</li> <li>vi) The Complete Income Tax Return (not just the acknowledgment in the name of the sole proprietor where the firm's income is reflected.</li> <li>vii) Utility bills such as electricity/woter and landline telephone bills in the name of the Proprietary concerns. The illustrative list of documents covered under point no. v is as below :                   <ol style="list-style-type: none"> <li>a) License issued by the Registering authority like Certificate of Practice issued by                       <ul style="list-style-type: none"> <li>• Institute of Chartered Accountants of India</li> <li>• Institute of Cost Accountants of India</li> <li>• Institute of Company Secretaries of India</li> <li>• Indian Medical Council</li> <li>• Food and Drug Control Authorities</li> <li>• Institutions/associations like bar council and institute of valuers.</li> <li>• institute of valuers.</li> </ul> </li> <li>b) Registration/Licensing document issued in the same of the proprietary concern by the Central Government or State Government Authority / .Department</li> <li>c) IEC (Importer Exporter Code) issued to the proprietary concern by the office of DGFT.</li> </ol> </li> </ol> </li> </ol>



Constitution	Documents to be Submitted
Account of a partnership firm	<ol style="list-style-type: none"> <li>1. Registration Certificate</li> <li>2. Partnership Deed</li> <li>3. PAN in the name of firm</li> <li>4. GSTIN/UIN</li> <li>5. (a) Any of the Officially Valid Documents (OVDs) &amp; (b) PAN in respect of all the partners of the firm</li> <li>6. (a) Any of the Officially Valid Documents (OVDs) &amp; (b) PAN in respect of the person's holding an attorney to transact on its behalf</li> </ol>
Account of a Limited Liability Partnership (LLP)	<ol style="list-style-type: none"> <li>1. Certificate of registration.</li> <li>2. Limited Liability Partnership agreement.</li> <li>3. Letter of authority for opening and operating account granted to the authorized signatories.</li> <li>4. List of designated partners</li> <li>5. PAN in the name of LLP</li> <li>6. GSTIN/UIN.</li> <li>7. (a) Any of the Officially Valid Documents (OVDs) for POA &amp; (b) PAN in respect of all designated partners.</li> <li>8. (a) Any of the Officially Valid Documents(OVDs) for POA &amp; (b) PAN in respect of authorized signatories to transact on its behalf.</li> </ol>
Account of Trust & Foundation / Society / Club	<ol style="list-style-type: none"> <li>1. Registration Certificate</li> <li>2. Trust Deed</li> <li>3. PAN in the name of Trust/ Society/Club</li> <li>4. (a) Any of the Officially Valid Documents (OVDs) for POA &amp; (b) PAN in respect of all trustees of the Trust Office Bearers of Society/Club</li> <li>5. (a) Any of the Officially Valid Documents (OVDs) for POA &amp; (b) PAN in respect of the person's holding a Power of Attorney to transact on its behalf.</li> </ol>
Account of Unincorporated Association (or) Body of Individuals	<p>Resolution of the Managing Body of such association or Body of Individuals</p> <ol style="list-style-type: none"> <li>1. Power of Attorney granted to a person's to transact on its behalf</li> <li>2. PAN in the name of Association/Body of Individuals</li> <li>3. (a) Any of the Officially Valid Documents (OVDs) for POA &amp; (b) PAN in respect of Office Bearers</li> <li>4. (a) Any of the Officially Valid Documents (OVDs) for POA&amp; (b) PAN in respect of the person's holding an Attorney to transact on its behalf</li> <li>5. Such information as may be required by the bank to collectively establish the legal existence of such an association or Body of Individuals</li> </ol>
<b>JURIDICAL PERSONS</b>	
(Juridical Persons such as Government or its Departments, Societies, Universities and Local Bodies like Village Panchayats, Town Panchayats, Municipal Corporations etc.,)	<ol style="list-style-type: none"> <li>1. Required documents to establish the legal existence of such an entity/juridical person.</li> <li>2. Power of Attorney granted to a person's to transact on its behalf</li> <li>3. (a) Any of the Officially Valid Documents (OVDs) for POA &amp; (b) PAN in respect of the person's holding a power of attorney to transact on its behalf.</li> </ol>

## DECLARATION

☐ I / We have read and understood the terms & conditions governing the opening of a Savings Account / Current Account with The Agrasen Co-operative Urban Bank Ltd. I/We accept and agree to be bound by the said terms and conditions including those excluding / limiting the Bank's liability. I/We understand that the Bank may, at its absolute discretion, discontinue any of the services completely or partially without any notice to me/us. I/We agree that the terms & conditions governing the service are subject to amendment, alteration or modification from time to time and I/We undertake to be bound by the same. I /We further agree to receive promotion offer from the Bank from time to time by mailers / SMS, unless stand otherwise by me / us in writing.

☐ I / We am/are not operating account with any other Bank.

☐ I / We am / are not enjoying any credit facilities with any other Bank / branch of your Bank and undertake to inform you as and when credit facilities are availed by me/us with other Banks / branches of your Bank.

☐ I / We hereby request you to register for the RuPay Debit Card / SMS alert / E-Statement / IMPS/UPI/ Internet Banking view only facility offered by Agrasen Bank and authorise you to debit the charges, if any, to above referred account.

☐ I / We are operating account with \_\_\_\_\_ Bank/s at their \_\_\_\_\_ branch.

☐ I / We am / are enjoying credit facilities with \_\_\_\_\_ Bank \_\_\_\_\_ branch and relative no objection certificate is enclosed.

☐ I / We have read the copy of Terms and Conditions of the account opening form give to me. The terms and conditions have been explained to me / us and having understood, I accept the same.

a) I hereby declare that I / We 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.

b) I hereby consent that the bank may verify the same with the UIDAI expressly to release the identity and address through bio-metric authentication to the bank.

YES ☐ NO ☐

☐ I / We hereby declare that the particulars given above are true and correct.

1st Applicant Photo

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Signature

3rd Applicant Photo

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Signature

2nd Applicant Photo

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Signature

4th Applicant Photo

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Signature



**\* NOMINATION**☐ Yes☐ No

If, Yes please fill form DA1

**FORM DA1**

Nomination : Nomination under Sec 45 ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules 1985 in respect of Bank Deposits (Form DA 1)

I / We \_\_\_\_\_ (Name/s) nominate the following person whom, in the event of my / our / minor's death, the amount of the deposit in the account may be returned by The Agrasen Co. Operative Urban Bank Ltd., \_\_\_\_\_ Branch.

Name & Address of the Nominee	Relationship with Depositor	Age	If Nominee is minor, his / her Date of Birth

\* As the nominee is a 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.

Signature (Depositor/s) \_\_\_\_\_

**Introduction from an existing account holder (atleast six months old satisfactory operations) and KYC compliant account.**

Name		Type of A/c	
Address		Account No.	
		Customer ID	
		Branch Name	
Pin Code		Email :	Dt. of opening of the A/c.
Tel. No.		Mobile No. :	

I / We certify that, Mr. / Mrs. / Ms. \_\_\_\_\_ is / are known to me/us personally since last \_\_\_\_\_ months / years and confirm the occupation and address stated in this application form for opening account are correct to the best of my / our knowledge & belief.

**Date :****(Signature of the Introducer)****FOR BANK USE**

1. Applicant is interviewed & purpose ascertained.
2. Document/s of identification / Address Proof listed above were verified with original by \_\_\_\_\_

**Signature of the Officer****KYC CERTIFICATION:**

I hereby confirm that the KYC Norms are fully complied with and further confirm that

- i) The signature of the introducer is verified and his/her/their Account is more than six months old and KYC compliant.
- ii) I have verified the documents submitted and confirm that KYC Norms are fully complied with.

**Signature of the Branch Manager****Date :**