

ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUALS

(Please fill up the form in block letters only)



NKGSB Bank
NKGSB Co-op. Bank Ltd.

Application Docket No.

Branch CBS Code Date :

New Customer ID Account No.

I/We request you to accept in Cash/Cheque a sum of Rs. (Rupees
) and open an account with you as per details given below:

Type of Account : ☐ Savings (Scheme) ☐ Term Deposit (Scheme)

Term Deposit : Rol (%) Amt (Rs.)

Period: Day/s Month/s Year/s

Maturity Instruction (Please tick any one box)

☐ Renew with interest. ☐ Renew principle & Transfer interest to my / our A/c. No. with Br.

☐ Transfer proceeds to my / our A/c. No. with Br.

Name of 1st applicant : Surname Name Middle Name

Customer ID (If existing accountholder) :

Name of 2nd applicant : Surname Name Middle Name

Customer ID (If existing accountholder) :

Name of 3rd applicant : Surname Name Middle Name

Customer ID (If existing accountholder) :

Name of 4th applicant : Surname Name Middle Name

Customer ID (If existing accountholder) :

Present Address (for this account):-

PIN Code State

Contact Number/s with City Code (for this account):- Resi. Office

Mobile E-mail ID : @

LIST OF OVD - OFFICIALLY VALID DOCUMENTS (Kindly tick on the documents submitted by you)

- Identity & Address Proof
(Any one OVD)

(i) Valid Passport (ii) Driving License (iii) PAN Card (iv) Voter's Identity Cards issued by Election Commission of India (v) Job cards issued by NREGA duly signed by an officer of the State Government (vi) Letter issued by Unique Identification Authority (UIDAI) containing details of name, address, Aadhaar Number (vii) Any other documents as notified by the Central Government in consultation with the regulator

- Address Proof (Any one OVD)
Applicable when the present address differs with that of list of OVD given above

(i) Telephone Bill- Latest 3 months (ii) Latest Electricity Bill (iii) Ration Card (iv) Letter from Employer (to the satisfaction of the Bank) (v) Sale Deed / Rent Agreement duly registered with the State Government or Similar Registration Authority

Mode of account operations : ☐ Self ☐ Either or Survivor ☐ Former or Survivor ☐ All jointly ☐ Minor by guardian

☐ Any one of us ☐ Any other instruction (Please Specify)

Add-on services: ☐ VISA Debit Card ☐ RuPay Debit Card ☐ Aadhar Card Linking ☐ SMS Banking ☐ Mobile Banking ☐ Internet Banking ☐ Cheque Book*

Name as desired on Debit Card: (Max. 20 characters)

Specify Aadhar Card No. of 1st account holder

Preferred Mobile No. for SMS Banking

Preferred E-mail ID for email correspondence

Recent Photo
1st applicant

Recent Photo
2nd applicant

Recent Photo
3rd applicant

Recent Photo
4th applicant

Specimen Signature

Specimen Signature

Specimen Signature

Specimen Signature



Nomination Details (Form DA 1)

Nomination u/s 45 ZA read with section 56 of the Banking Regulation Act 1949 and Rule 2(1) of the Co-operative Banks (Nomination) Rules 1985, in respect of the Bank deposits.

I/We _____ nominate the following person/s to whom in the event of my / our death the amount of deposit in the above account, may be returned by NKGSB Bank Ltd. _____ Branch

Name & address of nominee	Relationship with depositor	Age	* DOB of nominee if minor

* As the Nominee is minor on this date, I/We appoint _____ **Guardian's Name** _____ **Guardian's Address** _____
PIN Code _____ State _____ 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.

Date _____

**Signature/s or #thumb impression of depositor/s

Witness

Name _____ Address _____
PIN Code _____ State _____
Sign _____

**Where deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

Only thumb impression should be attested by witness.

INTRODUCTION DETAILS :

Introducer's Name _____ Cust. No. :

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Branch : _____ Type of Account _____ Account No :

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I know the applicant/s for the last _____ months / years. I confirm the Identity, Occupation and Address of the applicant/s

Date :

Introducer's Signature : _____ Signature verified by : _____ **Branch attestation**

* Cheque book will be sent to your present address as per bank record.

Debit Card Declaration

I have read and understood the terms and conditions applicable for Debit Card. I accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I understand that the Bank may, at its absolute discretion, discontinue any of the service completely or partially without any notice to me. I agree that the Bank may debit my account towards service charges as applicable for time to time.

General Banking Declaration

I/We have read the terms and conditions of the Bank pertaining to the accounts and add-on services such as SMS Banking, Tele Banking, Internet Banking and Mobile Banking. I/We have understood the same and agree to abide by such/any other terms and conditions that may be in force from time to time. I/We have also read the Bank's 'Schedule of charges' for the respective and agree to abide by the same. I/We have also understood that terms & conditions and the service charges are subject to change without any prior notice. The information furnished/declaration given by me/us in this form is true and I/We shall be held responsible for the same at all times. For the purpose of providing certain services, the bank is/may be required to engage the services of specialized and the other service providers/agents. I/We agree that the bank may/would be required to furnish any information regarding my/our account to these service providers/agents. I/We also understand that the continuation of the accounts is at the Bank's sole discretion, and in case of dissatisfaction with the conduct of the account, the bank has right to close the account after giving suitable notice or withdraw some/all services/concessions granted to me/us.

I/We hereby declare that the information and declaration/s furnished above is/are true and correct to the best of my/our knowledge.

 

Sign. of 1st A/c Holder

Name _____

 

Sign. of 3rd A/c Holder

Name _____

 

Sign. of 2nd A/c Holder

Name _____

 

Sign. of 4th A/c Holder

Name _____

Checked by

(Name and Signature of the Branch Official alongwith Employee Code)

Authorised by

(Name and Signature of the Branch Official alongwith Employee Code, Branch Seal/Stamp) 