



The Jamkhandi Urban Co-operative Bank Limited, Jamkhandi.

Customers ID _____

Account No. _____

BRANCH NAME : _____

L.F. _____

Current Account Opening Form

Date _____

IN CASE OF FIRMS, INSTITUTIONS ETC.

Title of Account _____

Constitution : PROPRIETORSHIP PARTNERSHIP PVI. LTD. LTD. OTHERS

Date of Establishment/ Incorporation _____

PERSONAL DETAILS

Sr.	First Name	Middle	Surname	Occupation
1.				
2.				
3.				
4.				

PHOTOGRAPHS & SIGNATURE

PAN No. _____

UID No. _____

DOB:

D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y
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MODE OF OPERATION

Self Either or Survivor Anyone or Survivors or Survivor Any two Jointly
 Former or Survivor Jointly or Survivor Guardian Any other [Please specify] _____

Residential Address _____

City _____ Pin Code _____

Mobile _____ Tel. Resi. _____ Email _____

TYPE OF BUSINESS (✓ Tick one) Mobile _____

Manufacturing Real Estate Service Provider Trader Agriculture Stock Broker Other (Specify) _____

PROFESSIONAL (✓ Tick one)

Doctor Architect CA / CS IT Professional Engineer Lawyer Other (Specify) _____

Business Address _____

City _____ Pin Code _____

Mobile _____ Tel. Resi. _____ Email _____

GST No. _____ (If business, please specify type and GST No.)

Annual Turnover (Rs.) _____

INTRODUCTION DETAILS

I/We personally know Mr./Ms. for a period of months/ years and confirm his/her identity & address mentioned in the form.

Name of the Introducer A/c No.

Branch

Introducer's Signature verified by

Authorised Officer signature

Signature of the Introducer

I hereby declare that I am sole proprietor of _____ and I undertake to inform the bank in case of change in the constitution of the concern.

DECLARATION

I/We have read and understood the terms and conditions governing the opening of an account with **The Jamkhandi Urban Co-Op. Bank Ltd**, I/We agree to abide by the Banks Rules & Regulations relating to conduct & operations of the Bank Accounts which are in existence & which may be changed from time to time by the Board of Directors. I/We authorize the Bank to verify the details given herein through any means/ person(s), as may be perceived necessary by the Bank. I/We hereby declare that the information furnished above is true and correct to the best of my/our knowledge.

I/We undertake to maintain sufficient balance to meet the amount of cheques issued by me.

For Personal Accounts

Specimen Signatures

1.Name	2.Name	3.Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Signature	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Signature	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature	Signature	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>

In Case of firms / Institutions / Ltd. Co. Rubber Stamp to be affixed

Signed before me

Signature

Signature of the Bank Official with Stamp

OFFICE USE ONLY

	NAME	SIGNATURE
Account market by	<input type="text"/>	<input type="text"/>
Account opened by	<input type="text"/>	<input type="text"/>
Account authorised by	<input type="text"/>	<input type="text"/>

Risk Category : A/C is classified as Low Risk Medium Risk High Risk

Account holder personally signed before me

Approved

Manager/Br.Manager/Asst. Manager/Accountant