



THE GUNTUR CO-OPERATIVE URBAN BANK LTD.

(Regd. Under A.P. Mutual Aided Co-op. Societies Act. 1995)

_____ Branch

ACCOUNT OPENING FORM (Deposit Account)

- Savings Account
- Current Account
- Fixed Deposit
- Re-Investment Deposit
- Recurring Deposit
- Urban Nitya Deposit

CIF

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A/c No

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Date

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Administrative Office : 3rd Lane, Brodipet, GUNTUR.

E.mail : gcubltd@yahoo.com, web site : www.guntururbanbank.com

Toll Free No. : 1800 425 4847

ACCOUNT OPENING (for Individuals and Joint Accounts)

I/We request you to open a Current / Savings / account in your bank in the name _____ to be operated by me/us. We agree to abide by the rules Governing the Current / Savings / accounts.

With Cheque Book

Without Cheque Book

ATM -CUM - Debit Card

Name as would appear on the card: _____

Signature

Signature

Signature

ACCOUNT OPENING (for Joint Hindu Family)

We, the members of the Joint Hindu Family/firm, request you to open a Current/Savings Bank Account in the name and style of _____

The Joint Family (HUF) Letter signed by all the adult members is enclosed for your reference and records.

We, the undersigned, hereby authorize _____ of us to operate upon the account severally/jointly. All transactions entered into and obligations incurred or to be hereafter incurred by them will be binding on all of us. Any acts done/to be done to comply with the Bank's rules which are in force or as amended from time to time in the matter of maintaining and conduct of such accounts will also be binding on us.

We request and authorize you to honour all cheques, withdrawal slips or other orders drawn by _____ of us severally/jointly on the said account or bills of exchange accepted or notes drawn by _____ of us severally/jointly and we request to debit such cheques and other orders and bills of exchange and notes as also the amount of any dishonoured bills, notes and cheques to the said account whether such account be for the time being in credit or overdrawn.

We agree to comply with the Bank's rules for the time being in force and such other changes effected from time to time for conduct of such account.

Please issue the cheque book and pass book for our use.

Signature

CURRENT ACCOUNT OPENING (for Proprietor Firms)

I/We request you to open a Current account in your bank in the name of M/s _____ to be operated by me. We agree to abide by the rules Governing the Current accounts. Please furnish us with a cheque book for our use.

I, the undersigned _____, trading in the name and style of

M/s _____ sole proprietor of the said firm/concern and that no other person is interested in it as partner or otherwise. I further undertake to inform your bank in case there is change in the constitution of the said firm/concern.

Signature of the Proprietor

CURRENT ACCOUNT OPENING (for Partnership Firms)

We request you to open a Current Account in the name of our firm _____

_____ (Name and address of the firm) in the Books of the Bank and we herewith tender Rs _____ for credit thereto.

The names of all the partners in our firm are given below, We undertake to notify you of any future changes in the partnership. We produce herewith the partnership deed with registration / with out registration.

We agree to comply with the rules of the Bank governing Current Account.

The following persons are authorized to operate the account severally / jointly / Any Two

1) _____ 2) _____ unless you receive notice to the Contrary from either/any one of us.

Name of all partners in full with designation, address & Signature's

Signature

Signature

Signature

ACCOUNT OPENING (for Clubs, Associations, Committees, Etc.)

We request you to open a Current / Savings Bank Account in your books in the name of _____

_____ (Name and address of Club/Association.)

We send herewith

- i) Certified copy of the latest rules and bye-laws of the Club / Association, as amended up to date,
- ii) A certified copy of the Certificate of Registration/incorporation and iii)

A certified copy of the Resolution to open and operate the account.

We have read the Bank's Rules now in force and agree to comply with and be bound by the same and changes that may be made therein from time to time.

We undertake to advise the Bank in writing of any change in the constitution and bye-laws or in the composition of the Managing Committee/Governing Body, etc., and until such information is given to the Bank, the Bank is to rely on the constitution and bye-laws or the information regarding composition of the Managing Committee/Governing Body, etc., herewith furnished.

Please furnish us with a cheque book for our use.

Signature

CURRENT ACCOUNT OPENING (for Public / Private Ltd., Co.)

We request you to open a Current account in your bank in the name of M/s _____ . We agree to abide by the rules Governing the Current account.

We produce the following for opening of the Current account in our Company's Name

1. Copy of Memorandum and articles of Association
2. Copy of Certificate of Incorporation
3. Copy of Certificate of Commencement of Business in case of Public Limited Company
4. Board resolution to open the account and authorize the persons to operate the account

Please furnish us with a cheque book for our use.

Signature

ACCOUNT OPENING (Fixed / Re-Investment / Recurring / Urban Nitya Deposits)

I/We request you to open a Fixed / Re-Investment / Recurring / Urban Nitya account in your bank in the name

_____ to be operated by me/us. We agree to abide by the rules Governing the Fixed / Re- Investment / Recurring / Urban Nitya accounts.

Signature

APPLICABLE IN CASE OF MINOR ACCOUNTS

I/We hereby declare that the minor _____ (Name of the Minor) is my/our _____ (relationship) and I/We am/are natural and lawful guardian/guardian appointed in terms of court's order dated _____ (copy enclosed). I/We shall represent the said minor in all future transactions of any description in respect to the above deposit account until the said minor attains majority. I/We hereby certify that minor was born

on _____ 20

Signature of the Guardian

INTRODUCTION DETAILS

I _____ having CIF No. _____ confirm that I am an holder of account number _____ of The Guntur Cooperative Urban Bank Ltd., for the past _____ months/years and personally know the applicant(s) for more than _____ months/years and confirm his/her/their identity and address as stated above.

Signature of the introducer

FIXED DEPOSITS / RE-INVESTMENT DEPOSITS

Amount Rs. _____ (in words) _____

Period: _____ Days/Months/ Years. Rate of Interest: _____ %

In case Term Deposit, interest payable: Monthly Quarterly Half-yearly Yearly

Auto renew Principal Auto renew principal & interest Auto renew

Rs. _____ Auto renew for period: _____ Days / Months / Years.

Payment instruction:

By credit to my Bank Account No.

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, By Banker's Cheque / Demand Draft / NEFT

RECURRING DEPOSITS

Monthly installment Rs. _____ Period: _____ Years. Rate of Interest: _____ %

Standing instruction (in any) Debit Account No.

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URBAN NITYA DEPOSITS

Monthly installment Rs. _____ Period: _____ Years. Rate of Interest: _____ %

Standing instruction (in any) Debit Account No.

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DECLARATION BY THE ACCOUNT HOLDER(S)

I/We declare that all the particulars, details and information given in this Account Opening Form (AOF) and in support are true, correct, complete and up to date in all respects and I/We have not withheld any information. I/We am/are competent and fully authorized to issue such declarations, confirmations, agreements and undertakings and submit this Account Opening Form for the purposes of opening Current/Savings/Term Deposit account and this Account Opening Form has been duly and validly executed by me/us. I/We confirm that no insolvency proceedings or suits for recovery of outstanding dues or monies whatsoever or for attachment of my/our assets or properties and/or any criminal proceedings have been initiated and/or are pending against me/us and that I/We never been adjudicated as insolvent. I/We agree that the opening, operation and maintenance of account shall be governed by the rules/terms and conditions of The Guntur Coop Urban Bank Ltd. I/We read and understood the terms and conditions of the account opening, operation and transactions, and agree that the products/services offered are subject to revision from time to time, The Guntur Coop Urban Bank Ltd., shall be entitled to service charges/ fee form me/us.

I/We have agree and ensure to maintain sufficient and minimum balance/Quarterly average balance as prescribed by The Guntur Coop Urban Bank Ltd., form time to time in my/our account, failing which I/We authorize the bank to levy the penalty/ies as applicable to the account from time to time and also to discontinue completely or partially any or all of the services. I/We hereby agree and undertake to adhere to all statutory and regulatory requirements in force from time to time governing the account. I/We shall indemnify and hold the bank harmless against any actions/suits/complaints/proceedings initiated against bank or cost, loss, expenses, damages incurred of suffered by bank as a result thereof. I/We agree and aware that bank has an exclusive rights of lien/ charge/set off on the deposits/cash and shall be at liberty to recover the amounts due from me/us to the Bank.

The Guntur Coop Urban Bank Ltd., and their agents shall be entitled and are authorized to exchange, share or part with all the information and details relating to my/our account/business/transactions to other banks, credit bureaus, Companies, agencies, statutory bodies etc. as may be required, to the extents it is essential for carrying our the bank's obligation/business and shall not hold The Guntur Coop Urban Bank Ltd., liable for use/sharing of this information.

Signature(s)



A/c No.																			
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1. Please fill up in **BLOCK** letters only and use **BLACK INK** for signature
2. Please affix a passport size photograph in the box provided. Also enclose another photograph for affixing in the pass book
3. For opening account of minors, where proof of identity/address is not available, the ID/Address proof of Father/Mother and Natural Guardian is sufficient.
4. In case of illiterate customers, Left Thumb impression (LTI) to be affixed and verified.

PERSONAL DETAILS

Customer Type: Public Staff Senior Citizen Minor

Constitution: Individual Proprietorship Partnership Private Ltd Co. Public Ltd Co. Others _____

Name: Mr. / Ms. / Mrs. / M/s. _____

Father / Husband / Guardian Mr. / Ms. / Mrs. / M/s. _____

Mother's Name : _____ Marital Status : Married Unmarried

Date of Birth : _____ Gender : Male Female Others

Category : General OBC SC ST Others _____

Religion : Hindu Muslim Christian Others _____

Occupation Type: Salaried Self-employed Business Retired Student Others _____

Organization's / Business Name: _____

Income Rs. _____ Monthly/Annually Pan Number : _____

Passport No : _____ Aadhaar No : _____

Voter Id No : _____ Others : _____

CORRESPONDENCE ADDRESS

Door No: _____

Land Mark / Street : _____

City: _____ Pin: _____ Mobile/Ph No: _____

PERMANENT ADDRESS

Door No: _____

Land Mark / Street : _____

City: _____ Pin: _____ Mobile/Ph No: _____



MODE OF OPERATION

Self Only E or S F or S Anyone or Survivor Jointly Others

DETAILS OF APPLICANT (S)

1st Holder Mr./Ms/Mrs.
2nd Holder Mr./Ms/Mrs.
3rd Holder Mr./Ms/Mrs.

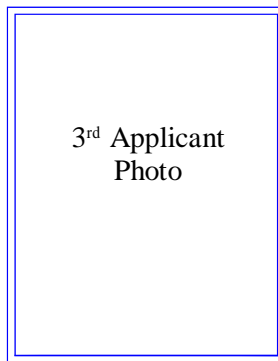
SERVICE REQUIRED

SMS Alerts: Required Not Required
Internet Banking: Required Not Required
Mobile Banking: Required Not Required
Statement Frequency: Monthly Quarterly Half-yearly
Auto Sweep Facility: Yes No

I/We authorize you to transfer amounts in excess of Rs. in my/our SB/Current Account No. on any day into a term deposit of Days tenor in units of Rs.

I/We further authorise the inadequacy of funds in my/our SB/Current account referred above is met any time by prematurely breaking the term deposit in units of Rs. and transferring the required amount into the said SB/Current account.

PHOTO (S) & SPECIMEN SIGNATURE (S)



CIF

CIF

CIF

Signature(s) Thumb impression(s) First Holder

Signature(s) Thumb impression(s) Second Holder

Signature(s) Thumb impression(s) Third Holder

FORM NO. 60

Form of declaration to be filed by a person who does not have either a Permanent Account Number or General index Register Number and who makes payment in cash in respect of transaction specified in clauses (a) to (h) or rule 114B

Full Name and address of the Declarant : _____

Particulars of transaction _____

Amount of the transaction _____

Are you assessed to tax? Yes No

If Yes,

- i) Details of Ward / Circle / Range where the last return of income tax filled?
- ii) Reasons for not having Permanent Account Number / General index Register Number?

Details of the Document being produced as support of address in column (i)

DECLARATION

(FOR CURRENT ACCOUNT APPLICANTS)

Details of the Accounts with other Banks/ Credit facilities availed from other Banks:

S.No.	Nature of facility availed TL/ OD/ CC etc.,	Bank Name	Branch

Date:

Signature of the Declarant

VERIFICATION

I _____ do hereby declare that what is stated above is true to the best of my knowledge and belief.

Verified today, the _____ day of _____ 20

Date:

Signature of the Declarant.

NOMINATION FORM - DA 1

I/We _____ nominate the following person to whom in the event of my/our/minor's death the amount of the deposit, particulars whereof are given below, may be returned by The Guntur Cooperative Urban Bank Ltd., _____ Branch.

Details of Deposits:

Type of deposit: _____ Account No. _____

Additional details, if any: _____

Details of Nominee:

Name: _____

Relationship with the depositor: _____ Age _____ DOB _____

As the nominee is a minor on this date, I/We appoint Shri/Smt. _____

_____ Age _____ Years to receive the amount of the deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Date:

*Signature(s) / Thumb impression(s)
of depositor(s)*



FOR OFFICE USE

Certified that the implications and conditions for the operation of the account have been explained to the depositor

(only in case of illiterate applicant)

- 1 Internet Banking Kit No : _____
- 2 Mobile Banking MPIN Given on dated : _____
- 3 ATM Card Data transmitted on dated : _____
- 4 Nomination serial No : _____
- 5 Admission Number : _____
- 6 Risk Category : Low Medium High
- 7 Any Future Instructions : _____
- 8 Account Closed on dated : _____

Account Opened by
Date : <i>Clerk</i>

Account Confirm by
Date : <i>Authorised Signature</i>

ADDRESS / IDENTIFICATION PROOF DETAILS

	Proof of Identity	Proof of Address
1	Passport where the address differs	Credit card statement
2	Voter ID Card	Salary slip (with address)
3	PAN Card	Electricity bill
4	Govt./ Defence ID Card	Telephone bill
5	ID card of a reputed employer	Letter from a reputed Employer
6	Driving License	Bank account statement
7	Photo - ID card issued by Post office	Ration Card
8	Aadhaar card is sufficient towards proof of identity & address	

Please attach one self- attested photocopy for identity proof and address proof each. Originals thereof will have to be produced for verification.