

| | Name of the Branch | Type of Account / Facility | Account Number |
|---|--------------------|----------------------------|----------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

Do you have account in any **other Bank(s)** ? If so, Please give details

| | Name of Bank & Branch | Type of Account / Facility | Account Number |
|---|-----------------------|----------------------------|----------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

Declaration : I hereby declare that the information furnished above is true & correct to the best of my knowledge
Name(s) of Proprietor, Partners, Directors, Promoters, Office Bearers

| Sr. No. | Customer ID | | | | | | | | | Full Name | Designation | Specimen Signature |
|---------|-------------|--|--|--|--|--|--|--|--|-----------|-------------|--------------------|
| 1 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
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| 7 | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | |

Date :

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INTRODUCER

I/We certify that captioned applicant/s is/are known to me/us personally and I/We confirm that the occupation and address stated in this application from for opening account are correct to the best of my/our knowledge and belief.

| | | | | | | | | | | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|-------------|-------------|---|------------------------|--|--|--|--|--|--|
| CID | | | | | | | | Branch Code | Account No. | | | | | | | | |
| Verified By : | | | | | | | | 2 | 4 | 8 | Introductory Signature | | | | | | |
| Officer / Manager | | | | | | | | Seal | | | | | | | | | |

FOR OFFICE USE ONLY

We have perused the Original Documents and as per KYC noms all re correct. The signatory has signed before me. I authorize Opening of the account. Also I certify that according to the nature of Business/activity, this account may be treated under the below selected risk category.

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| Letter of thanks sent to customer and introducer | | | | | | |
|--|--|--|--|--|--|--|

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|----------------------------------|-----------|-------------|----------|
| Classification of the Account as | High Risk | Medium Risk | Low Risk |
|----------------------------------|-----------|-------------|----------|

Date

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Signature of Authorised Officer