

**Individual Client Master Maintenance****KDCC BANK**(For Office use Only) CIF No. Account No. Date Branch to affix rubber stamp of  
name and code no.**Instructions :**

1. Please fill up in BLOCK letters only and use black ink for signature. Please leave one box blank between two words. Tick (✓) the appropriate boxes.
2. Fields marked asterix (\*) are not mandatory.
3. Please affix a passport size photograph in the box provided. Also enclose another photograph for affixing in the pass book.
4. For opening account of minors where proof of identity/address is not available the same will be provided by Father/Mother and Natural Guardian.
5. In case of illiterate customers. Left Thumb impression (LTI) to be affixed and verified.

Branch / Office Code Customer Type : Single ☐ Joint ☐ Corporate ☐ Minor ☐ Senior Citizen ☐Number of Joint Customers  Customer IDs Relationship : Son ☐ Father ☐ Mother ☐ Brother ☐ Sister ☐ Uncle ☐ Other Specify ☐Title Code : Sri ☐ Smt. ☐ Kumar ☐ Kumari ☐ M/s. ☐First Name \* Middle Name Last Name \* Customer Alpha ID Constitution Code \*  Individual / Proprietary / MinorWeaker Section Code : SC ☐ ST ☐ Women ☐ Minorities ☐ SHG ☐ Others ☐Father Name Residential Status : Resident ☐ Non-Resident ☐Address Type : Company / Third Party Name : **Address****Permanent****Communication**House No. Street Village Mandal Pin / Zip Code Location Code Country Phone Numbers  Mobile Numbers Staying Since Years  Date **Customer Category Code**Individual ☐ Association ☐ Trust ☐ PACS/LSCS ☐ HWCS ☐ Bank ☐ Staff ☐ Public Ltd., ☐ Private Ltd., ☐**Customer Segment Code**Direct Finance to Agriculture ☐ Indirect Finance to Agriculture ☐ Cottage and small scale industries ☐Drip irrigation /sprinkler irrigation ☐ Agri Allied Activities ☐ Loans to Artisans ☐ Educational Loan ☐Professional and Self Employed ☐ Small Road and Transport Operators ☐ Others-Miscellaneous ☐**Business Division :**Retail ☐ Corporate ☐ SME / FIRM ☐ PACS/LSCS ☐ HWCS ☐ Other Societies ☐ Others ☐**Personal Details :**Date of Birth  Place of Birth Sex : Male ☐ .Female ☐ Marital Status : Single ☐ Married ☐**Spouse Details :**Spouse Customer Number  Date of Birth Spouse Name  Wedding Date

**Proof of identity**

- A) Passport where the address differs ☐
- B) Voter ID Card ☐
- C) PAN Card ☐
- D) Govt./Defence ID Card ☐
- E) ID Card of reputed employer ☐
- F) Driving License ☐
- G) Photo - ID card issued by Post Office ☐
- H) Photo - ID card issued by Universities/  
Institutes approved by UGC / AICTE ☐
- I) Letter from a recognized public  
authority or public servant verifying  
the identity and residence of the customer\* ☐

**Proof of address (Correspondence Address)**

- A) Credit card statement ☐
- B) Salary Slip (with address) ☐
- C) Income tax/Wealth tax assessment order ☐
- D) Electricity bill ☐
- E) Telephone bill ☐
- F) Bank Account statement ☐
- G) Letter from a reputed employer ☐
- H) Letter from any recognized public authority ☐
- I) Ration Card ☐
- J) Copies of Registered Leave & License Agreement/  
Sale Deed/Lease Agreement ☐
- K) Certificate issued by hostel warden of University /  
Institute (approved by UGC/AICTE)  
where the student resides\* ☐
- L) For students residing with relatives, address proof  
of relatives along with their identity proof\* ☐

No.:

Issued at :

Issue Date :

Expiry Date :

No.:

Issued at :

Issue Date :

Expiry Date :

**Contact Person Details & Introduction Details : Please Tick(✓) ( \* )**

Contact Person Available

Yes ☐No ☐

Contact Person Name

Designation

Residence

Office

Telephone Numbers

Mobile

Email Id.

I \_\_\_\_\_ confirm that know the applicant(s) for more than \_\_\_\_\_  
months/years and confirm his/her/their identity and address as stated above.

Date

D	D	M	M	Y	Y
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Signature of the Introducer

Sign verified by (Sign.ENo. &amp; Stamp)

KDCC bank agreeing to open my Small Deposit account under liberalized KYC norms specified by RBI, I undertake to submit the required KYC documents as and when the balance or total annual transaction in account exceed the stipulated limits in this regard. In the event of non compliance the Bank is within its rights to stop operations in account after advance notification as per RBI instructions.

Signature of the Applicant

**Credit limits with other Bank / PACS :**Yes ☐ No ☐

Accounts with Other Banks

Yes ☐ No ☐

Sl.No.	Bank Name	Branch Name	Account Number	Type & Facilities

**Employment Details : Type of Employment : Please Tick(✓) ( \* )**Employed ☐ Self Employed/Own Business ☐ Not Employed ☐

Retired / Pensioner

Retired ☐ Pensioner ☐ Others ☐

**Relation with Bank :**Employee ☐ Director ☐ Outsourced staff ☐ Staff Family Members ☐ Former EmployeeEmployee / Staff Number ☐**Occupation**Farmer/ Agriculturist ☐ Self Employed ☐ Pensioner ☐ Home Maker/Housewife ☐ Service ☐Businessman ☐ Advocate / Lawyer ☐ Doctor ☐ Architect ☐ Engineer ☐Others ☐ Student ☐Employee with company ☐Employee number assigned by ☐Employer ☐Company Address ☐Position / Designation ☐Working since Date  Retirment Date **Income Details : Please Tick(✓) ( \* )**Annual Income Annual Income Slab <= 1Lakh ☐ > 1Lakh <=2.5Lakh ☐ > 2.5Lakh <= 5 Lakh ☐ Above 5 Lakh ☐**TDS / PAN Details :**PAN / GIR Number  or **Form 60**

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

Full name and address of declarant Particulars of transaction - Opening of  account (s)Amount of transaction Are you assessed to tax ? Yes ☐ No ☐If yes. i) Details of Ward/Circle/Range where the last return of income was filed, ii) Reason for not having Permanent Account Number / General Index Register Number Details of documents being produced in support of address in column(1) IT Status Code ☐ Resident Individuals ☐ Non-Resident Individuals ☐ Nominal Members ☐ Form 15G ☐ Form 15H ☐IT Sub Status Code  TDS Exemption Yes ☐ No ☐**Verification**,do hereby declare that is stated above is true to the best of my knowledg and belief. Verified today, the  day of  20Place : Signature of the Declarant **Type of Accommodation : Please Tick(✓) ( \* )**Own Independent House ☐ Own Flat ☐ On Rental ☐ Company Provided ☐ Joint Family ☐ Others ☐Customer Owns a Two Wheeler Yes ☐ No ☐Customer Owns a Car Yes ☐ No ☐Insurance Policy Information : Available ☐ Plan to take new Policy in the near future ☐**Corporate Cleint Details :**Customer Name : Constitution Code :  Private Ltd., Company ☐ Public Ltd., Company ☐ Bank ☐Authorized Capital Issued Capital  Paid up Capital  Networth Date of Incorporation  Reg. Number  Reg.Authority Registration Date  Reg. Expiry Date Reg. Office Address

Years in Business   Gross Turnover     Employee Size     Number of Offices / Branches

**Account Opening Details : Please Tick(✓) ( \* )**

Product Code     SB ☐ CA ☐ FD ☐ JD ☐ RD ☐ SHG ☐ LOCKER Others. ☐

Customer Number                 Account Type Single ☐ Joint ☐

Cheque Book Facility Required Yes ☐ No ☐ Date of Opening

Account Holder Name

Salary Account Yes ☐ No ☐ Mailing Address Choice Address ☐ Passbook Required Yes ☐ No ☐

Account Statement Required Yes ☐ No ☐

Account Statement Frequency Daily ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly ☐

Statement Mode Mail Id                 Fax

Account Opened Delivery Channel General ☐ SMS Banking ☐ Mobile Banking ☐ Internet Banking ☐

Marketing Channel Code Walk in Customers ☐ Marketing Agent ☐ Staff ☐ Others ☐

**Mode of Operation : Please Tick(✓) ( \* )**

Self ☐ Joint ☐ Either / Survivor ☐ Former / Survivor ☐ Anyone/Survivor ☐ Gaurdian ☐

Joint ☐ Anytwo ☐ Power of Attorney ☐ Sole proprietor ☐ Karta of HUF ☐

**Mode of Operation Additional Information :**

Illiterate Account Yes ☐ No ☐

**Repayable To : Please Tick(✓) ( \* )**

Self ☐ Joint ☐ Either / Survivor ☐ Former / Survivor ☐ Anyone/Survivor ☐ Gaurdian ☐

Joint ☐ Anytwo ☐ Power of Attorney ☐ Sole proprietor ☐ Karta of HUF ☐

Credit Intrest Required Yes ☐ No ☐ Special Account Yes ☐ No ☐

Minor Account Yes ☐ No ☐ Date of Birth Yes ☐ No ☐

Power of Attorney Yes ☐ No ☐ Nomination Required Yes ☐ No ☐

**Nomination Details : Please Tick(✓) ( \* )**

Nomination under section 45ZA of the Banking Regulation Act, 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985 in respect of bank deposits 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 KDCC Bank.

Connected Role (Nominee) : Son ☐ Father ☐ Mother ☐ Brother ☐ Sister ☐ Uncle ☐ Other Specify ☐

Date of Birth in case of minor :           (Name and address of branch / office in which the deposit is held)

As the nominee is a minor on this date, I/We appoint Shri/Smt./ \_\_\_\_\_ age \_\_\_\_\_ Years

Address : \_\_\_\_\_

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 :

Palce : \_\_\_\_\_ Signatures / Thumb impressions of depositor(s)

**Address :**

House No.

Village & Mdl.

District

State / Country

Street

Zip Code

Mobile Number

**Account Privileges : Please Tick(✓) ( \* )**

Teller operation Permitted Yes ☐ No ☐ ATM Operation Permitted Yes ☐ No ☐

Call Center Operation Yes ☐ No ☐ Internet Banking Facilities Yes ☐ No ☐

Credit Card Allowed Yes ☐ No ☐ Kiosk Banking Permitted Yes ☐ No ☐

SMS Operation Permitted Yes ☐ No ☐ Overdraft Allowed Yes ☐ No ☐ ARM / CRM

Cheque Book Requird Yes ☐ No ☐ ARM Role       Business Division

**Locker Details : Please Tick(✓) ( ✖ )**

Locker No.       Locker Size :    Cabinet No.

Locker Identification No.       Key Number :

Locker Rent / Charges Recovery Account No.

Locker Rent Recovery Choice Automatic ☐ Manual ☐

Extra Lock Required Yes ☐ No ☐

**TERM DEPOSIT / SPECIAL TERM DEPOSIT**

Amount : Rs. \_\_\_\_\_ (in words) \_\_\_\_\_

Period : \_\_\_\_\_ year(s) \_\_\_\_\_ month(s) \_\_\_\_\_ days. In case of Term deposit. Interest payable: ☐ Monthly ☐ Quarterly

Maturity instruction :		Payment instruction (Maturity Proceeds/Residual Amount)
<input type="checkbox"/> Auto renew* principal	Auto renew for period : _____ year(s) _____ month(s) _____ day(s)	<input type="checkbox"/> By credit to my bank account no.
<input type="checkbox"/> Auto renew* principal & Interest		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Auto renew* Rs. _____		<input type="checkbox"/> By Banker's Cheque / Demand Draft
<input type="checkbox"/> Pay Principal & Interest <input type="checkbox"/> Pay Principal		

**RECURRING DEPOSIT**

Monthly installment : Rs. \_\_\_\_\_ ☐ Standing instruction (if any) Debit account no.

Period : \_\_\_\_\_ year(s) \_\_\_\_\_ month(s) ☐ On Maturity. Credit proceeds to account no.

**FOR JOINT ACCOUNTS WITH 'EITHER OR SURVIVOR' OR 'ANYONE OR SURVIVOR' MODE OF OPERATION**

We have to advise that KDCC Bank may pay of us, any day either before or on due date, on or after due date and where no due date is fixed. on demand the principal alongwith interest. Payment to any one of us is discharge to the Bank from all of us, until you receive a notice contrary to it from both / all of us. In case of death of any one. amount is to be paid to the survivor(s).

Signature of 1st Applicant \_\_\_\_\_ Signature of 2nd Applicant \_\_\_\_\_ Signature of 3rd Applicant \_\_\_\_\_

Paste a passport size photograph inside this box

1st Applicant

Paste a passport size photograph inside this box

2nd Applicant

Paste a passport size photograph inside this box

3rd Applicant

Signature(s) Thumb impressing (s) Sole / First Holder	Signature(s) Thumb impressing (s) Second Holder	Signature(s) Thumb impressing (s) Third Holder
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**DECLARATION BY APPLICANT (S) :**

I/We have read the rules & regulations in the application form. I/We agree to comply with and bound by RBI rules and Bank's Rules & regulations and terms & conditions regarding the conduct of the account and Any Where Banking facility (Core Banking Solutions). I/We have received a copy and read and understood / has been explained to me/us, the terms and conditions including minimum balance rules. charges etc. related to Saving Bank Account. ATM - Cum-Debit card. Internet Banking, SMS Service offered by KDCC Bank Ltd and undertake to abide by the said rules. I/We also acknowledge that the Bank may from time to time change the same. The latest terms and conditions shall be as published in the website of the Bank. [www.karimnagardccbap.org](http://www.karimnagardccbap.org). All correspondences related to should be originated from the e-mail ID registered for internet banking.

I/We also authorise the Bank to debit any charges in the account (s) related to the account(S) or the value added services.

I/We agree and understand that the Bank reserves the right to reject any application or stop any of the services, without assigning any reason.

**ACCOUNT HOLDER SIGNATURE :**

1st Applicant ..... 2nd Applicant ..... 3rd Applicant .....

**FOR OFFICE USE :**

Risk Categorization : 

LOW	Medium	High
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I hereby declare that this account opening form is complete in all respects. I have verified the signature of the introducer and it is found correct. All the signatories have signed in my presence. All KYC norms are fully complied with. Relevant documents have been obtained. I have verified the documents produced for identity and address proof with the original and certified to that effect on the copies. I authorise opening of the account.

Date \_\_\_\_\_

Manager / Sub Manager / Asst. Manager's Name \_\_\_\_\_ Signature \_\_\_\_\_

Certified that the implications and conditions for the operation of the account have been explained to the depositor (only in case of illiterate applicant)

**Open Account :**

Date 

D	D	M	M	Y	Y	Y	Y
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 (Authorised Signatory)

**Account number generated :**

Date 

D	D	M	M	Y	Y	Y	Y
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 (Authorised Signatory)

**RULES & REGULATIONS**

- As per the extant Reserve Bank of India (RBI) guidelines, which are mandatory, photographs of all applicant(s) / Power of attorney holders (i.e. who are authorized to operate the account(s)) should be furnished to the bank.
- As per extant Government of India (GOI) guidelines, PAN / Form No. 60/61 (Where PAN is not available) is required to be furnished.
- Savings Bank A/c (SB A/c) can not be opened for business purposes as per RBI directives and hence SB a/c should be used to route transactions of only non-business / non-commercial nature. In the event of occurrence of such transactions or any other such transactions that may be construed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts.
- The balance in the account must adhere to the minimum monthly/quarterly average balance stipulation laid down by the Bank and communicated to you at the time of opening of the account. Non-maintenance of such monthly/ quarterly average balance will attract applicable penalty on a monthly/quarterly basis and on a date determined by the bank.
- If there is no transaction by the account holder in the account continuously for 24 months, the account automatically gets classified as a "dormant / inoperative account" whereupon further debit transactions are not permitted in the ordinary course. A request for activation of the account has to be made by the customer and the customer is subject to KYC norms (proof of address).
- If the balance in the account becomes zero and remains so continuously for three months or more, the Bank reserves to itself the right to close the account without any obligation to intimate the customer.
- Satisfactory conduct of the account entails maintaining stipulated monthly/quarterly average balance as well as sufficient balance to honour cheques issued to third parties. If there are high incidences (i.e. more than 3 cheque returns for want of funds) to the contrary, the Bank reserves the right to close the account under intimation to the customer.
- Any special instructions, both financial and non-financial in nature, like standing instructions, stop payment instructions, issuance of cheque books, issuance of duplicate ATM Cards / PIN etc. must be communicated in writing. Otherwise, it shall not be binding on the Bank to comply with such instructions.
- Any change of address should be immediately communicated in writing to the Bank. The bank will be sending through courier or post from time to time PIN mailers and any other notices / correspondences. Hence, it is incumbent upon the applicant(s) to intimate change in mailing address, if any, immediately without any loss of time. The bank will not be responsible for any loss, damage or consequences for wrong delivery of the above items arising out of non-intimation of change in mailing address.
- The account number is to be quoted in pay in slip / cheques issued by the account holder and in all the correspondences with the bank.
- The account holder(s) is / are expected to verify the entries made in the passbook and draw the attention of the bank to any errors or omissions that might be discovered. The bank does not accept any responsibility for any loss arising out of failure on the part of the account holder to carry out verification of entries in the pass book and to point out such error and / or omission within one month from the date of updation of pass book.
- Alterations, if any, on cheques are required to be authenticated by the drawer's full signature against each such alteration. The Bank reserves the right to refuse payment of cheques that have been altered in any way unless the alteration is authenticated by the drawer under full signature as per specimen on record with the Bank. Cheques should be drawn in such a way as to prevent alteration after issue and the drawer's signature should be uniform with that on record.
- No overdrawing is permissible in accounts.
- The bank has the authority to debit the accounts to recover any amount credited erroneously.
- Collection of outstation instruments entails collection charges. The bank does not accept any responsibility for loss, delay, mutilation or interception of the instruments in postal or courier transit.
- The total numbers of withdrawals from a savings bank account during any quarter, whether by cheque or otherwise should not exceed 25 in all. In case of cheque, the date of payment and not the date of the cheque, will be taken as the date of withdrawal for the purpose.
- Interest will be credited every six months on or about 30<sup>th</sup> September and 31<sup>st</sup> March calculated on daily product basis. No interest will be allowed unless the amount accrued during the half year amounts to Re. 1/-.
- When a customer wants his / her operative account at one branch to be transferred to another branch, he / she has to give his / her request in writing along with, unused cheque books. The bank will close the account and arrange to open a new account at the other branch and will issue new cheque book.
- Local cheques, etc., may be tendered for collection sufficiently early in the day as required vis-a-vis the local clearing house times. Drawals against clearing cheques will be normally permitted only against cleared balances as per clearing house rules.
- Please change the PIN for ATM operations, frequently. Please don't keep the blank signed cheque books. Keep the cheque books in lock and key.
- Immediate credit of outstation / local cheques up to Rs. 15,000/- is permitted to satisfactorily operated Savings Bank account holders. For further details, contact your branch.
- Nomination facility is available.
- Passbook will be given to all SB account holders. If the customers want statement of accounts, then it will be issued on specific request and on payment of necessary charges.
- The opening / operating / closing of any account are subject to the extant Know Your Customer (KYC) guidelines drafted in line with the RBI norms.
- The Bank reserves the right to close the account(s), which according to the Bank is / are not conducted satisfactorily, after due notice to the customers without assigning any reasons thereof.
- The Bank reserves to itself the right to alter, delete or add any of these rules at any time without prior intimation to individual customers or to refuse to open an account or to close any account. However such charges will be posted in the Bank's website and in the Notice Board of the branches.
- Opening of the Savings Bank Account tantamount to deemed acceptance of the aforesaid rules and regulations as well as the fact of being informed about the various service charges being levied by the Bank and the terms and conditions guiding related products and service.

Signature of Applicant \_\_\_\_\_