



बचत खाते उघडण्याचा फॉर्म / ACCOUNT OPENING FORM

To,
The Branch Manager,
_____ Branch

Date : _____

Customer ID No. : _____

Account No. : _____

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

(खात्याचे प्रकार)

A/c Type : ☐ SAVINGS ACCOUNT ☐ RECURRING DEPOSIT ☐ TERM DEPOSIT ACCOUNT

(खात्याचे नांव)

Title of Account : _____

(खात्याचा प्रकार)

Category of Account : ☐ General, ☐ Staff, ☐ Sr. Citizen, ☐ Minor, ☐ Society, ☐ Trust, ☐ HUF

Details of A/c Holders ☐ Other (Please Specify) _____

(खातेदाराची माहिती)	Gender	1st Holder	2nd Holder	3rd Holder	4th Holder
First Name	M F				
F/S Name	M F				
Surname	M F				
Mothers Name	M F				

(इतर माहिती)

Other Details ☐ 1st Holder ☐ 2nd Holder ☐ 3rd Holder ☐ 4th Holder

PAN No./Form 60 Submitted : _____

Tel. (Resi)				
Aadhar No.				
Mobile No.				
Email ID				
Date of Birth				
Religion				
Cast				
Occupation				
Company Name				
Annual Income	₹	₹	₹	₹

Mode of Operation of Account / (खात्यावरील व्यवहारासंबंधी अधिकार)

☐ Single (_____ Applicant) ☐ Either or Survivor ☐ Former or Survivor ☐ Self
☐ Jointly by all ☐ Minor by Guardian ☐ Any other (Please Specify) _____



दि हिंदुस्थान को-ऑपरेटिव्ह बँक लि., मुंबई

	पत्रव्यवहाराचा पत्ता (नि.) / Postal Address (Resi.)	नोकरी, व्यवसाय पत्ता / Service, Business Address
1st Holder	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>
2nd Holder	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>
3rd Holder	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>
4th Holder	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>	<div></div> <div></div> <div></div> <div>City : Pin code : <div></div><div></div><div></div><div></div><div></div><div></div></div>

Proof Of Identity : (Separately for Each Holder) (Please attach photo & self attested photo copies and provide original for verification. Any one document from each of the under noted two columns for a photo identity and proof of address :

PROOF OF PHOTO IDENTITY

- ☐ Passport (Where the address differs)
- ☐ PAN Card
- ☐ Voter's ID Card
- ☐ Driving Licence
- ☐ Photo ID Issued by Post Office
- ☐ ID Card / Conformation from Employer
- ☐ Aadhar Card
- (Subject to satisfaction of bank)

Proof of Present Address

- ☐ Electricity Bill
- ☐ Telephone Bill
- ☐ Driving Licence / Voter's ID Card
- ☐ Passport
- ☐ Ration Card
- ☐ Aadhar Card
- ☐ Any other (Specify _____)
- (Subject to satisfaction of bank)

For Society / Trust (Additional)

- ☐ Trust Deed
- ☐ Certificate of Reg.
- ☐ Resolution
- ☐ By-laws/Rules
- ☐ Minute Copy
- ☐ Any other (Specify _____)
- (Subject to satisfaction of bank)

अज्ञान खातेदाराबाबत / In case of Minor Account Holder

अज्ञानाची जन्मतारीख

Minor's Date of Birth :

D

D

M

M

Y

Y

Y

Y

पालकाचे नांव

Name of Natural / Legal Gardian :

अज्ञानाशी नाते

Relation :

पत्ता :

Address :

मुदत ठेव / Term Deposit : ☐ Fixed Deposit, ☐ STD, ☐ QIC ☐ Dam Duppat

Amount Rs. _____ Period _____ Years _____ Month _____ Days _____ Rate of Interest _____ %

In Case of Fixed Deposit Interest Payable : ☐ Monthly, ☐ Quarterly, ☐ Half Yearly, ☐ Yearly

And payment of Interest is by Credit to Account No. _____ ☐ Other (Please Specify) _____

आवर्तक ठेव / Recurring Deposit

Monthly Installment amount Rs. _____ Period Year Months Rate of Interest _____ %

Satnding Instruction : Monthly Debit to Account No. _____



अपेक्षित सुविधा / Service Required

ATM Card ☐ Yes ☐ No Name display in card

SMS Banking ☐ Yes ☐ No Mobile No.

Tele Banking ☐ Yes ☐ No Mobile No.

I/We declare that your Bank's rules and regulations governing above schemes/facilities have been read and understood by me/us. I/We accept them as well as any other changes made by the Bank from time to time and they are binding upon me/us.

I/We request you to provide ATM Card in the name as stated above in our Savings Account. We understand that in case of Savings Account, ATM Card facility will be provided if the A/c. is operated only by Any One.

Please affix your recent passport size photograph and please sign across it :

Signature (1st Holder)

Signature (2nd Holder)

Signature (3rd Holder)

Signature (4th Holder)

Signed in my presence

Signature & Emp. Code of Bank Official

Particulars of Introductions (शिफारसदाराची माहिती)

Introducer's Name : Surname First Name Middle Name

Account No. Customer ID :

I confirm that I am an account holder with **Hindusthan Co-op. Bank Ltd.** for over six months. I confirm that I personally known the applicant/s detailed above more than six month and confirm his/her/their identity, occupation and address.

Date : / / Signature of Introducer's :

(FOR BANK USE ONLY)

Introducer's signature verified & found correct Date of A/c opened :

Authorised Officers Sign :
Date : / /

FOR OFFICE USE (कार्यालयीन कामकाजाकरिता)

● Applicant(s) interviewed and purpose ascertained (description)
Introducer called at the Branch & interviewed by

● Introducer did not call at the branch but confirmation obtained by (mode of confirmation)

● Particulars of Identification (Xerox copy of the documents obtained)

OPEN THE ACCOUNT

ACCOUNT No.

खाते क्रमांक :

Letter of thanks sent to customer on & introducer on

Acknowledgement received from customer on & introducer on

Nomination form entered in Register

Document Received : ☐ Self-Certified ☐ True Copies ☐ Notary

Risk Category : ☐ High ☐ Medium ☐ Low

IN PERSON VERIFICATION CARRIED OUT BY

INSTITUTION DETAILS

Identity Verification ☐ Done Date

Name

Emp. Name

Code

Emp. Code

Emp. Designation

Jr. officer / Sub Accountant

Branch Manager

Emp. Branch

Staff No. :

Staff No. :



(वारसदाराची माहिती)

Nomination Details (Form DA1)

Nomination under Sec. 45ZA read with section 56 of the Banking Regulation Act 1949 and Rule 2(1) of the Co-op. Bank's (Nomination) Rule 1985, in respect of Bank deposits.

I/We (Name) _____ (Address) _____

nominate the following person to whom in the event of my / our / minor's death the amount of deposit in the above account, may be returned by

The Hindusthan Co-op. Bank Ltd. _____ Branch.

Nature of Deposit & Number	Name & Address of Nominee	Relationship with Depositor, if any	Age	If nominee is a minor, his date of birth

*As per nominee is a minor on this date, I/We appoint (name) _____
 _____ (Name, Address & Age)

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.

Place : _____

Date :

**** Signature(s) # Thumb impression(s) of Depositors**

Signature of witness No. 1 _____ Signature of witness No. 2 _____

Name(s) _____ Name(s) _____

Address(es) _____ Address(es) _____

** 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.

Thumb impression shall be attested by two witnesses

Nomination Registration No. _____ Date :

Signature of Account Holder _____

Acknowledgment of nomination received on _____

Declaration / Undertaking

I/We confirm having received, read and understood the rules relating to the conduct of account and hereby agree to abide by the said rules and various services including but not limited to ATM Card / Tele banking.

I/We understand that the Bank may at its discretion discontinue any of the services completely or partially without any notice to me/us. I/We agree that the Bank may debit my account for service charges as applicable from time to time.

I/We confirm that I/We am / are resident of India.

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

I authorize the Bank to collect the cheques / drafts etc., handed over to Bank for collection/negotiation as per rules of the Bank at our risk and responsibility and indemnify you for any loss suffered by you in the matter due to any cause. I also authorize you to recover your commission, Debit balance in the account caused at our request or otherwise interest applicable rates and incidental charges.

In the event of death of my/us, Bank shall be at liberty to make payment of the deposit to the survivor/s without the concurrence of the legal heirs of the deceased.

I/We hereby declare that the amount deposited belongs to me / us absolutely and it has been deposited in joint names / minor's name for the purpose of convenience only.

I hereby declare that I am the sole proprietor / proprietress of the aforesaid concern.

Signatures of Holder :

1st Holder

2nd Holder

3rd Holder

4th Holder



Savings Bank - Rules & Regulations :

1. The Savings Banks Accounts should be used to route transactions of only non-business / non-commercial nature. In the event of occurrence of such transactions or any such transactions that may be constructed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and / or close the accounts.
2. Interest on the Savings Bank Deposit is calculated at a rate fixed by RBI from time to time. This interest will be paid at half yearly rests on the daily balance in the account.
3. The customer should maintain minimum balance as may be required from time to time in the account and communicated at the time of opening of the account. Changes in the bank / Service charges or minimum balance requirements are displayed on the Notice Board of the Branches. The non-maintenance of the adequate balance shall automatically entitle the Bank to levy the charges for non-maintenance of the minimum balance. In such an event, the Bank shall have the first right to set-off any available credit that may be available in the account including from amounts flowing into the said account from the collection proceeds or any deposit.
4. Notwithstanding the above, if the Bank is of the opinion that if the customer does not maintain the minimum balance and / or if the account remains a Zero balance account and / or the overall conduct of the account is not satisfactory, the Bank shall have a right to close the account by issuing fifteen days notice. In the event, if the said account is funded within fifteen days period the Bank may not exercise the said right of closure. If not, the Bank shall close the account without any further notice to the customer.
5. If there is no transaction in the account for 2 years the account automatically gets classified as a 'Dormant 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 in both cases.
6. Satisfactory conduct of the account entails maintaining stipulated minimum balance as well as sufficient balance to honour cheques issued to third parties. If there are high incidences to the contrary, the Bank reserves the right to close the account under intimation to the customer.
7. Any special instructions, both financial and non-financial in nature, like standing instructions, stop payment instructions, issuance of cheque books, Demand Drafts, Pay Orders, request for hot listing ATM/DEBIT Cards, issuance of duplicate card / PIN must be communicated in writing. Otherwise, it shall not be binding on the Bank to comply with such instructions. Charges as applicable will be leviable to the customer.
8. The Savings Bank Account entitles free access to The Hindusthan Co-op. Bank Ltd. ATMs and Internet Banking unless otherwise stated.
9. Any change of address should be immediately communicated in writing to the Bank along with Address Proof.
10. I / We agree to maintain a minimum balance of Rs. _____ in the Regular Savings account failing which, the Bank may deduct charges as per rules prescribed schedule of charges.
11. **The bank at its option but at the risk and responsibility of the account holder may** 1) Collect proceeds of the instrument lodged by the account holder from time to time. 2) Appoint an agent/s to collect the proceeds of the instrument lodged by the account holder and as such agent's appointed shall be the agent/s of the account holder to collect such instrument. 3) Recover preceeds of instrument lodged by the account holder by way of bank draft / cheques or any other mandate in lieu of cash. 4) Take action / steps as deemed necessary to have proceeds of the instruments lodges. 5) The bank is hereby empowered to recover the various charges, if any by debiting the same to the account holder.
12. I / We agree to comply with and be bound by the Bank's Rules for the time being in force for the conduct of such account. I / We authorize the bank to collect bills, cheques, etc. for and on behalf of me / us and undertake to abide by and be bound by the Terms and Conditions in this behalf.
13. Spl. Instruction for Term Deposit: In the event of death of any of the joint depositors prior to maturity of the deposit, the Bank will be, at the request of the surviving depositor or all surviving depositors at liberty though not bound and at its absolute discretion to add / delete any name or to repay the deposit before maturity or grant an advance against the security thereof, on such terms and conditions as the bank may decide and such payment before maturity shall constitute a valid discharge to the Bank.
14. Our deposits are insured under the Deposit Insurance and Credit Guarantee Corporation of India (DICGC) scheme.
15. ATM Card : The usage of the ATM Card issued to special categories of customers will be in accordance with the rules and regulations. The Bank reserves the rights to suspend the services of ATM card unilaterally without any prior notice or assigning any reason.
16. SMS Banking : The account holders are responsible for the registration of Mobile Banking for the Cell phone Number/s mentioned. The charges associated with these services will be as applicable. In case of mistake on part of the account holder or that of the mobile service provider in respect of these services, the Bank will not be responsible and the account holders agree that no claim will be made against the Bank.
17. "I hereby declare that I or any of my relatives have not been entrusted with prominent public functions in a foreign country e.g. Heads of States or Governments, senior politicians, senior government / Judicial / military officers, senior executives of state owned corporations, important political party officials, etc. I hereby further declare that in case in the future, I or any of my relatives have been entrusted with prominent public functions in a foreign country as stated above. I will immediately notify the bank about the same."
I/We agree to abide by existing Rules, Terms and Conditions of all the schemes / accounts and facilities enumerated above and changed from time to time.

Signature of the Applicant/s : _____

Disclaimer :

I / We am / are aware that The Hindusthan Co-op. Bank Ltd. does not seek any information relating to login id / password in any form including through e-mails from its customers. I / We agree and undertake that I / We shall never part with any sensitive information of my / our account especially through internet / email / phone medium. I / We further agree and confirm that The Hindusthan Co-op. Bank Ltd. shall not be liable for any losses arising from my / our sharing / disclosing of login id, password, cards, card numbers or PIN (Personal Identification Number) to anyone, not shall make claims on the bank for any unauthorized use. I/We shall take all precautions to protect my / our account details so as to avoid any unauthorized use.



Personal Information Sheet (to be filled by Account holder / Joint A/c holder / Guardian) Separately

(This information will be kept strictly confidential)

Branch : Date
Customer No. Account No. Account Type

A) PERSONAL

(वैयक्तिक)

First Name

Middle Name

Surname

Maiden Name

(Application for Married Women only)

Aadhar No. (आधार नं..)

Marital Status (वैवाहिक माहिती)

☐ Single

☐ Married

☐ No. of Dependents

Education (शिक्षण)

☐ Non-SSC

☐ SSC / HSC

☐ Undergraduate

☐ Graduate

☐ Post Grad.

☐ Professional

☐

B) OCCUPATION

(व्यवसाय)

☐ Salaried

☐ Business

☐ Retired

☐ Student

☐ Housewife

☐ Self Employed

☐ Professional

☐ Other

If salaried, employed with

☐ Public Ltd Co.

☐ Pvt. Ltd. Co.

☐ Govt. Sector

☐ Multinational

Others

Name

Grade :

☐ Top Mgmt

☐ Middle Mgmt

☐ Junior Mgmt

☐ Non - Mgmt

If Self Employed, Profession

☐ CA

☐ Engineer

☐ Doctor

☐ Tarder

☐ Lawyer

☐ Consultant

☐ Software

☐ Others

If in Business

☐ Public Ltd Co.

☐ Pvt. Ltd. Co.

☐ Partnership

☐ Proprietorship

☐ Trust

☐ Nature of Business

Monthly total family
Income (approx. Rs.)

☐ Up to Rs. 5000

☐ Rs. 5001-10000

☐ Rs. 10001-25000

☐ Rs. 25001-50000

☐ Rs. 50001-100000

☐ Rs. Above - 100000

C) Banking Relation with The Other Bank :

☐ Yes

☐ No

☐ If Yes

Name of the Bank

Branch

A/c No.

Name of the Bank

Branch

A/c No.

Credit Card issued by

Card No.

D) Banking Relation with Our Bank :

☐ Yes

☐ No

☐ If Yes

Name of the Branch

A/c No.

ATM Card issued by

Card No.

E) Asset Ownership

Consumer Durable ownership

☐ Computer

☐ Airconditioner

☐ LCD TV

☐ Home Theater System

Vehicle Ownership

☐ Car

☐ Two Wheeler

☐ None

☐ Both

Car Value (Rs.)

☐ Upto 1 Lac

☐ Upto 5 Lacs

☐ Up to 9 Lacs

☐ Above 9 Lacs

House you live in

☐ Rented

☐ Ownership

☐ Employer's

☐ Purchased against Loan

any Other Assets/Investments

☐ Upto 1 Lac

☐ Upto 2 Lacs

☐ Upto 5 Lacs

☐ More than 5 Lacs

F) LOAN FACILITIES AVAILABLE OF

Types of Loan

Car

☐ Yes

☐ No

Housing

☐ Yes

☐ No

Consumer Durable / PC

☐ Yes

☐ No

Business

☐ Yes

☐ No

Types of Loan

Loan against shares

☐ Yes

☐ No

Insurance Policy

☐ Yes

☐ No

Travel Abroad

☐ Yes

☐ No

Educational Loan

☐ Yes

☐ No

Signature of Applicant