PUNE PEOPLE'S CO-OP. BANK LTD., PUNE.			
(Multi State Bank) H.O. : First Floor, Plot No. 477/478, Market Yard, Gate No. 04, Gultekadi, Pune - 411 037. Mob. : 7066051999 / 706605099			
Branch Date D M Y Y Y			
Customer No.			
C/A ACCOUNT OPENING FORM FOR FIRM / TRUST / CORPORATE /			
SOCIETIES / HUF ACCOUNTS Pan No.			
Title of Account : (Fill in block letters) (संपूर्ण नाव)			
Address : (संपूर्ण पत्ता)			
City : Pin No. State :			
Telephone : Fax No Mobile No			
Email : Activity :			
Amount Rs In Words Vat Tin :			
Member / Non Member No. G.S.T. :			
Sole Proprietorship HUF Private / Public Trust Private / Public Ltd. Co. Partnership Firm Society Educational Institution Club / Association Others			
Attested Documents Attached : Addhar Card			
Bye-laws of Society Trust Deed Certification of Incorporation			
Resolutions Copy of Regn. Certificate Regd. Partnership Deed Memorandum & Articles of Association Shop Act Licence Regd. of Trust Deed with Charity Commiss.			
Please offer us :			
Cheque Book Net Banking ATM / Debit Card Mobile Banking			
□ Account Statement - Printout □ on Email □ Sms Banking			
Declaration of ATM : I / We declare that the above information is correct and I/We have read and hereby accept the ATM / Debit CARD terms and conditions and to the amendments thereof. I / We hereby request the Bank to issue us an ATM / Debit CARD as requested and authorize the Bank to debit my / our above mentioned Account for all withdrawals to be made using the card and also to recover the Bank's charges/fees as applicable from time to time. Name to be embossed on ATM Card :			
Operating Instructions : No. of Partners / Trustees / Directors / Office Bearers			
(Customers information forms for each official if enclosed)			
Place : Signature of Authorised Signatory			

We declare that :

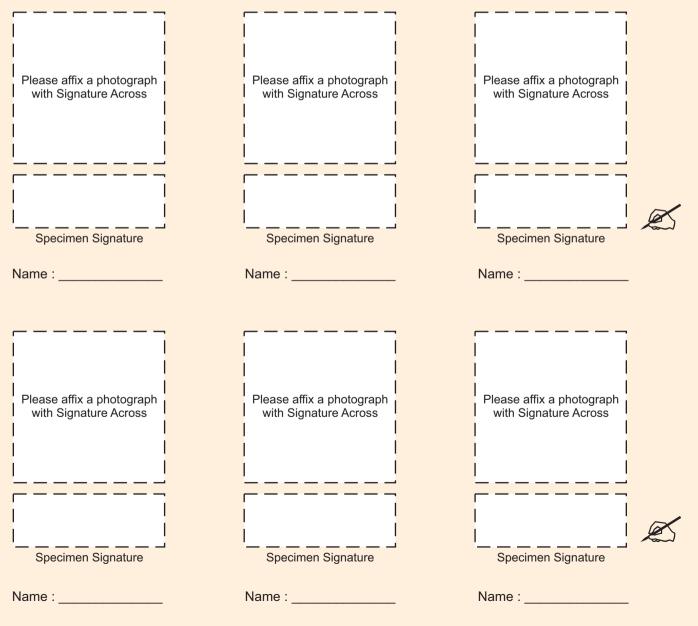
- i) We do not enjoy any credit facilities with any Bank.
- ii) We enjoy the following credit facilities with other Banks at present.

1	Name of the Bank	Nature of facility	Amount
2			
3			

I/We agree to comply with and be bound by the Bank's Rules (as amended from time to time) 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,

Note: Bank reserves the right to increase the charges, minimum balance to be maintained or to discontinue any of the free services without prior notice.



Letter of declaration from Proprietorship Concern			
The Pune Peoples Co-operative Bank Ltd.	Date D D M M Y Y Y		
Branch	Place :		
Dear Sir,			
Re : Opening of new account in the name of			
We refer to the captioned account opened by you and declar	are as under :		
I, the undersigned, am the sole proprietor of the concern and am solely responsible for liabilities thereof, I shall advise you in writing of any change that take fully place in the constitution of the concern and I will be liable to you for any obligation which may be standing in the name of concern in your books on the date of the receipt of such notice and until all such obligations shall have been fully liquidated.			
Personal Signature	Yours faithfully,		
Name	Signature on behalf of the Concern		
Letter of declaration from Partnership Firm			
The Pune Peoples Co-operative Bank Ltd.	Date D D M M Y Y Y		
Branch	Place :		
Dear Sir,			
Re : Opening of new account in the name of			
We refer to the captioned account opened by you and declare as under :			
we, the undersigned, are the only partners in the firm and are jointly and severally responsible for liabilities thereof. We shall advise you in writing of any change that take place in the partnership and, all the present partners will be liable jointly to you on any obligation which may be standing in the firm's name in your books on the date of the receipt of such notice and until all such obligations shall have been fully liquidated.			
We declare that the Partnership is registered. Mode Account Operation : Jointly / Eors / Any Two / Any Other Instruction			
Full Name of all the Partners Individual Sign	natures Signatures on behalf of the firm		
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·			
INTRODUCTION DETAILS : Introducer's Name :	Cust. No. :		
Branch : Type of Account :	Account No. :		
I know the applicant/s for the last Address of the applicant/s.			
Date D D M M Y Y Y Y	Introducer's signature :		
Signature verified by :			

Resolution of a Company / Society / Trust e	tc. For opening a Bank Account
	Date D D M M Y Y Y
A certified copy of the Extract from the minutes of the me Management of the Society / Trust of	
duly convened, at which a proper quorum was present held on	at
We hererby certify that the following resolution of the Board the Society / Trust meeting of the Board / the Committee held on minute book of the said	was passed at the and has been duly recorded in the
Resolved that an account for the Company / Society / Trust be of Ltd Bran authorised to honour collect the Cheques / Draft / any other Ma act upon any instructions so given relating to the account whe transactions of the Company / Society / Trust.	ch and that the said Bank be and is hereby andate drawn by Company / Society / Trust and to
CERTIFIED TRUE COPY.	
SECRETARY	
SECRETARY	CHAIRMAN OF THE MEETING

FOR BANK'S USE ONLY				
Activity code No.	Introducer's Customer No.			
Address of the applicant/s has been confirmed on the basis of				
Photograph/s has / have been affixed and signed in my presence. Applicant / Introducer has / have signed in my presence. Introduction confirmation letter sent to the Introducer on				
Confirmation received on	. Signature on confirmation letter verified.			
Risk Classification				
Signature & code no. of Branch Official.				

Branch	Date D D M M Y Y Y Y			
Customer No.	count No. Account Type			
	y Account holder / Joint A/c holder / Guardian) mation will be kept strictly confidential.)			
Name : Mr. Mrs. Miss. Ma				
Surname F	irst Name Middle Name			
DATE OF BIRTH # GENDER N	/INOR PAN NUMBER***			
	Blood Group			
# If Senior Citizen, provide proof of Date of Birth ** If Minor, Please	e fill-up minor declaration section below *** If PAN No. is not available, please attach form 60 or 61			
Member / Non Member No.				
Residential Address :	Attach Documentary evidence for Minor / Senior Citizen (above 60 years)			
Tel. No. : Mobile No	Email :			
Office Address :				
	Email :			
Religion :	Caste :			
Marital Status : Single Marrie	d 🛛 No. of Children :			
Education : Non-SSC SSC /	HSC 🛛 Undergraduate 🗋 Graduate 🗌 Post. Grad.			
□ Professional				
Occuration :	If Self Employed, Profession :			
Occupation :	CA Engineer Doctor			
	□ Trader □ Lawyer □ Consultant □ Software □ Other			
Business				
	If in Business :			
Self-Employed / Professional	Public Ltd. Pvt. Ltd. Partnership Contemporation Otherse			
	Proprietorship Trust Others			
□ Other	Monthly total family Income (approx.) Rs. :			
	□ Upto Rs.5000 □ 5001-20000 □ 20001-50000			
	□ 50001-100000 □ Above 100000			
Banking Relations with Other Banks :				
Name of the Bank	Branch A/c. No.			
Name of the Bank				
Debit / Credit Card No. Bank :				
Debit / Credit Card No. Bank :				
	(16 digit card number)			
Passport No.	date at : Date of expirty :			

Asset Ownership				
Consumer Durable Ownership	: Computer	Microwave	🗆 LCD Televi	sion
	Digital Camera	DVD Player	Home Thea	atre Sytem
	Projection Television	Airconditioner		
Vehicle Ownership :	Two Wheeler	□ Four wheeler	None	Both
The house you currently live in : \Box Rented		Ownership	Family	Ancestral
□ Company provided		Purchased agai	inst a Loan	
Insurance Policy	□ Below 1 Lac	🗆 1 - 2 Lac	🗆 2 - 5 Lac	□ Above 5 Lac

Type of Loans	Loan facilities whether availed	Number of years since you last availed the loan	In the next 6 months do you intend availing any of these loans ?
1. Car	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
2. Housing	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
3. Consumer Durable/PC	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
4. Business	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
5. Loan against shares	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
6. Insurance Policy	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
7. Travel Abroad	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗆 No
8. Educational Loan	: 🗆 Yes 🗆 No	□ 1 □ 2 □ >2	🗆 Yes 🗌 No

How you came to know about us?_____

Any other information you wish to share with your Bank : _____

You may send promotional material - Yes / No

I confirm that, information furnished herein above is true and authentic to the best of my knowledge.

