

The Deccan Cooperative Urban Bank Ltd Saidabad Hyderabad 500059				Account Opening Form for Deposits Individuals – (Single / Joint) / Non-Personal												
Savings Bank Account			Current Account													
Cheque Book Required	Yes	No														
FDC/MID/QID Period-----@-----% ₹----- If interest is to be credited to other Bank Name of Bank-----Branch----- IFSC:-----A/C No.																
RD. No. Months----- :Monthly Deposit ₹-----@-----% Standing Instruction: If yes, Debit A/ No:																
We Request you to open Account in the Name(s) of																
1	CUST_ID															
1.	Name in Full:											Date of Birth: --/--/----				
	AADHAR No:						PAN No:									
	Nationality															
	Occupation:															
	Address:															
													PIN			
	Mobile No:															
	Land Mark(s) for address:															
2.	CUST_ID															
2	Name in Full:											Date of Birth: --/--/----				
	AADHAR No:						PAN No:									
	Nationality															
	Occupation:															
	Address:															
													PIN			
	Mobile No:															
	Land Mark(s) for Address :															
3.	CUST_ID															
3	Name in Full:											Date of Birth: --/--/----				
	AADHAR No:						PAN No:									
	Nationality															
	Occupation:															
	Address:															
													PIN			
	Mobile No:															
	Land Mark (s) for Address :															

Mode of Operation

1.	Self	2	Joint	3	Either or Survivor	4	Former or Survivor	5	Others (Pl. specify
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1.Name:	2.Name:	3.Name:
Affix Passport size Photo of Depositor	Affix Passport size Photo of Depositor	Affix Passport size Photo of Depositor
Signature:	Signature:	Signature:
1.	1.	1.
2.	2.	2.
3.	3.	3.

Nomination – DA 1
Note: (1) Only one person can be appointed as nominee, (ii) Where deposit is made in the name of minor, the nomination should be signed by person lawfully entitled to act on behalf of minor, (iii) if the applicant(s) is /are illiterate, his /her thumb impression(s) shall be attested by two witness. I/We.....(Name(s) and address(es) nominate the following person to whom in the event of my / our / minor's death, the amount of Savings Bank/ FD / Current Account (Individuals & Sole Proprietor only) may be returned by the Deccan Cooperative Urban Bank Ltd (hereafter called the Bank) Please *mention / *do not mention the nominee's name in the pass book / deposit receipt / acknowledgement (*strikeout which is not applicable)

Nominee Particulars

Name and Address		Relationship with depositor if any	Age	If Minor, date of birth
Deposit Particulars				
Type / Scheme	Account / Receipt No.	Date	Amount	Maturity date

@ As the nominee is a minor on this date, I/ we appoint Mr. Mrs..... (Name, Address and age) to receive the amount in the account on behalf of the nominee in the event of my/ our/ minor's death during the minority of nominee (delete this para if the nominee is not a minor)

1.2.3.
Signature / Thumb Impression of the Depositor /s

Place: Hyderabad Date:.....

@ Witness for Thumb Impression(s)

1. Signature	2. Signature
Name:	Name:
Address:	Address:
Place: Date:	Place: Date:

Terms and Conditions

Applicant holder / depositor customer should notify the Change of Address / Contact details as and when there is a change.

Payment of Interest on pre-mature withdrawal

The interest rates applicable on term deposits withdrawn before the maturity date shall be as under:

- i) 2% less Interest shall be paid at the rate applicable to the amount and period for which the deposit remained with the bank and not at the contracted rate.
- ii) No interest shall be paid, where premature withdrawal of deposits takes place before completion of the minimum period specified in section 7(a) (i).

I / We have read and understood the Rules, Terms & Conditions of the Account opening given to me.

The Terms & Conditions have been explained to me / us and having understood, I accept the same.

I declare that I have submitted AADHAR card issued by UIDAI voluntarily for identification and / or address proof towards the compliance of KYC Norms under the PMLA 2002 Act.

I hereby consent that the Bank may verify the same with the UIDAI / and authorise the UIDAI expressly to release the identity and address through bio-metric / OTP authentication to the bank.

I hereby declare that the details which are stated above are true to the best of my knowledge and belief. I undertake to inform you of any changes therein immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

We have read, understood and agree to abide by the Bank's rules relating to the conduct of the above accounts/services/products/Fee & charges which are displayed/contained in the brochures of the bank from time to time.

I/We hereby certify that the saving bank Account would be used by melus to route transaction of only non-business / non-commercial nature. In the event of occurrence of such transaction or any such transaction that may be construed as commercial/business/dubious or undesirable, the Bank reverse the right to unilaterally freeze operations in such account and/or close the account.

I/We have been advised of Minimum Balance requirement for the account to be opened and given to understand that these requirements are subject to revision/change which will be acceptable to me/ us as a notice to that effect.

I/we understand that in the event of the death of the depositor(s), premature termination of term deposit would be allowed without any penal charges to the claimant(s) after following the due procedure.

I/We understand that if the account is inoperative for 10Yrs, as per RBI directives that account will be closed and the balances will be transferred to RBI (DEA Fund)

I/We request you to renew the subject term deposit on maturity with/without accrued interest at the prevailing rate of interest for a same period. This instruction shall hold good until revoked in writing by me/us I/We understand that if the account is not linked with the PAN card then the thresh hold account balance is limited to below 50,000, further subjected to debit / credit summations in the account. (Either Debit or Credit)

I/We have been advised that if I/We don't provide my/our mobile number, I/we will not be eligible for SMSs facility. For sending SMSs, Bank can debit Charges to my / which will include GST.

I/We are aware that under the Income Tax rules, it is obligatory to deduct Tax at Source (TDS) on interest paid/accrued at an appropriate % of interest and remit the same to income tax Authorities. For such remittances an acknowledgement issued by the IT Department will be handed over to the depositor or I/We note to submit Form 15G or 15H (PAN-Holders) annually in April month which may be uploaded to the Income Tax Department for their necessary use.

For Non-Individuals opening of Current Account.

The names of all the partners in our firm are to be given with their latest addresses with contact details and we undertake to notify you of any future changes in the partnership.

"We produce herewith the partnership deed of registration / we have no deed of partnership.

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

We also agree that the account is to be operated as mentioned in mode of operation column. Unless you receive notice to the contrary from either / anyone of us.

We are not enjoying credit facilities with any other bank / any other branch of your Bank and we undertake to inform you, in writing, as soon as any credit facility is availed of by us from any other bank/any other branch of your Bank.

We are enjoying credit facilities with other bank(s) / other branches of your Bank as per details given in the enclosed sheet.

Please furnish a cheque book. We agree that the bank may, at its sole discretion, restrict the number of cheque books requested to be issued without assigning any reason whatsoever.

We undertake not to issue post-dated cheque beyond a reasonable period. We also undertake to keep the bank indemnified at all times from any loss that the bank might suffer on account of possible claims against it through our issue of post-dated cheques, including claims, if any, made after the closure of our account with the Bank. We may be furnished a passbook/periodical statement of account.

Signature:	Signature:	Signature:
1.	2.	3.

For Office Use:	Documents Received							
i) Self-Certified & documents received as part of account opening process have been verified and found correct. ii) Certified that copy of terms and conditions signed by depositor obtained. iii) Certified that the implications and conditions for the operation of the account have been explained to the depositor (only in case of illiterate applicant)								
<table border="1" style="margin: auto;"> <tr> <td>Risk Category:</td> <td style="width: 20px;"></td> <td style="width: 20px;">High</td> <td style="width: 20px;"></td> <td style="width: 20px;">Medium</td> <td style="width: 20px;"></td> <td style="width: 20px;">Low</td> </tr> </table>		Risk Category:		High		Medium		Low
Risk Category:		High		Medium		Low		
Details of one or two identification marks, such as a mole or scar (mandatory for illiterate applicants) In person verification carried out and signature / LTI of the applicant verified by:								
Employee Signature		Employee code:		Designation				
Supervisor Signature		Employee code:		Designation				
Date:								