



CUSTOMER REGISTRATION FORM FOR INDIVIDUAL



Important Instructions:

- A) Fields marked with "\*" are MANDATORY
- B) Self-attestation of documents is mandatory
- C) Please fill the form in English and in BLOCK Letters
- D) Please fill the date in DD-MM-YYYY format
- E) Please read section wise detailed guidelines / instructions
- F) Please counter sign in full for any overwriting / alteration.
- G) List of State/UT code as per Indian Motor Vehicle Act, 1988 is available with the Bank
- H) List of two character ISO 3166 country codes is available with the Bank
- I) KYC number of applicant is mandatory for updating application
- J) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated

For Office Use only

Application Type\*  New  Update Existing  KYC No.\* (Mandatory for KYC update)

Account Type\*  Normal  Small  Customer No.\* (Mandatory if existing Customer)

Case No.\*

1. PERSONAL DETAILS (Refer instruction A)

APPLICANT TITLE (Lastname) FULL NAME (First Name) (Middle Name)

Name\* (Same as ID Proof)

Maiden Name\* (If any)

Fathers's Name\*

Mother's Name\*

Spouse's Name\* (If applicable)

Gender\*  Male  Female  Transgender Marital Status\*  Married  Unmarried  Others

Date of Birth\* DD - MM - YYYY City of Birth\*

Country of Birth\* (ISO-3166) Staff  Nationality\*  Indian  Others Country Code\* (ISO-3166)

Residential Status\*  Resident Individual  Non Resident Individual  Foreign National  Person of Indian Origin (Attach Annexure A2)

Occupation\*  Service -  Public Sector  Private Sector  Government Sector

Type  Other -  Professional  Self Employed  Retired  Housewife  Student

Business ACTIVITY -  Not Categorized  Seafarer (Attach Annexure A2)

Religion\* Caste\* GST

2. DECLARATION OF TAX RESIDENCY / CITIZENSHIP: (Refer instruction B)

(Kindly fill in details of all countries of Tax Residence, if more than one)

For the purpose of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/ functional equivalent in each country is listed below:

Country of Tax Residence* (ISO-3166)	Tax Identification Number (TIN) or equivalent* (Documentary evidence required for each TIN OR EQUIVALENT)	TIN issuing Country* Code (ISO-3166)	Expiry Date
			DD - MM - YYYY
			DD - MM - YYYY
			DD - MM - YYYY

3. PROOF OF IDENTITY (PoI)\* (Refer instruction C) (Certified copy of any one of the following Proof of Identity [PoI] needed)

Passport No.  Passport Expiry Date DD - MM - YYYY

Passport Place of Issue  Passport Date of Issue DD - MM - YYYY

Proof of Visa  Visa Expiry Date DD - MM - YYYY

Voter ID Card

PAN No.  Form 60/61

Driving License  Expiry Date DD - MM - YYYY

UID (Aadhaar)  Do you wish to link the Aadhaar no. to A/C for subsidy ?

NREGA Job Card  Yes  No





- c) I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence.
- d) I also agree that my failure to disclose any material fact known to us, now or in future, may invalidate our application and the Bank would be within its right to put restrictions in the operations of my account or close it or report to any regulatory and / or any authority designated by the Government of India (GOI) / RBI for the purpose or take any other action as may be deemed appropriate by the Bank if the deficiency is not remedied by me within the stipulated period.
- e) I hereby accept and acknowledge that the Bank shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the Bank.
- f) It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285 BA of the Income Tax Act read with the Rules thereunder
- g) I also agree to furnish such information and / or documents as the Bank may require from time to time on account of any changes in law either in India or abroad in the subject matter herein.
- h) I shall indemnify the Bank for any loss that may arise to the Bank on account of providing incorrect or incomplete information.
- l) The information provided in the form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income Tax Rules, 1962.

As per RBI directions, the Bank has to validate the mobile number before activation of the account. The customer should give missed call on the Bank's prescribed number from the registered mobile number for validation.

The customer should maintain minimum quarterly average balance as may be required from time to time in the account and communicated at the time of opening of the account as well as sufficient balance to honour cheques issued to third parties. Changes in the Bank / Service charges or minimum balance requirements are displayed on the Notice Board of the Branches and on the website. The non-maintenance of the adequate balance shall automatically entitle the Bank to levy the charges for non-maintenance of the average balance.

If there is no transaction in the account for 2 years the account automatically gets classified as an 'inoperative account'. Spl. Instruction for Term Deposit : In the event of death of any of the joint depositors prior to maturity of the deposit or otherwise, the Bank will be, at the request of the surviving depositor or all surviving depositors will be 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 and all applicable agree to the above.

Auto renewal of term deposits : The Term Deposits would be automatically renewed under the Auto Renewal Process on the date of maturity, at a rate of interest prevailing on the date of renewal and for the same period for which the existing deposit was kept. In case any depositor wishes to alter the period of deposit confirmation advice /s or withdraw the proceeds of the confirmation advice /s renewed under Auto Renewal process, they may do so as per Bank's prevailing guidelines in this regard in the Bank's Deposit Policy on the website.

Our deposits are insured under the Deposit Insurance and Credit Guarantee Corporation of India (DICGC) scheme

Place

Signature of applicant

Signature / Thumb Impression

Date :

Witnessed by (Signature):

Signature

Thumb impression shall be attested by the witness

Name of witness:

### Attestations / For Office Use

Documents received:  Self Attested  Verified from Original  Verified by Indian Embassy/Banker Abroad/Notary Public

Risk category:  High  Medium  Low

#### IN PERSON VERIFICATION DETAILS

Identity Verification:  Done PAN Verification:  Done Banned List Verification:  Done  
(Lastname) (First Name) (Middle Name)

Employee Name :

Employee Code :  Emp. Designation:

Emp Branch Name :

I certify that I have scanned all required documents as per our policy for registering the customer

FOR SARASWAT CO-OPERATIVE BANK LIMITED

IFSC CODE : SRCB0000

Place

Signature of Employee

Signature

Bank / Branch Stamp & Seal

Date :



ACCOUNT OPENING FORM FOR INDIVIDUAL

Instructions to Customer

- Fields marked '\*' are MANDATORY
- Please fill the form preferably in 'BLACK' ink only
- Please fill the form in CAPITAL LETTERS only
- Please write your NAME as it appears in Customer Registration Form
- Please countersign in full for any overwriting / alteration
- Please tick the appropriate boxes

NEW  UPDATE EXISTING A/C No\*:  (Mandatory if Existing)

A. ACCOUNT HOLDER'S DETAILS

Please open My / Our Bank Account

Applicant	Customer ID*	(Surname)	(First Name)	(Middle Name)
1st	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2nd	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3rd	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4th	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5th	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6th	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. TYPE OF ACCOUNT

SCHEME / CODE\*

GOLD  SILVER  ELITE  REGULAR  CUBS  CAMPUS  MMS  JANHIT  SUVIDHA  PMJDY  
 AKSHAY SALARY  EDS  NRO  NRE  NROTD  NRETD  FCNR  RFC

PLATINUM  PREMIUM  ELITE  REGULAR  OTHER -

For Salary Account  Letter from employer

Company Name

Company Seal

TERM DEPOSIT  SIMPLE INT :-  QUARTERLY -FQ  MONTHLY-FM  REGULAR  OTHER  
 Maturity proceeds disposal instructions given  CUMULATIVE :-  KALPATARU  CASH CERT.  OTHER  
 Periodic interest disposal instruction given  ANNUITY :-  RECURRING  PENSION  OTHER  
 SP. SCHEME

DELIVERY CHANNEL  CHEQUE BOOK  SMS BANKING  NET BANKING  MOBILE BANKING  
 DEBIT CARD  NON-PERSONALIZED  PERSONALIZED   
 STATEMENT ON E-MAIL  OTHER

C. DECLARATION BY GUARDIAN

Type of Guardian:  Father  Mother  Court Appointed

Full Name of Guardian:  Mr.  Ms.

I hereby declare that the date of birth of the minor who is my \_\_\_\_\_ is \_\_\_\_/\_\_\_\_/\_\_\_\_ and I am his / her natural and lawful guardian / guardian appointed by court order, dated \_\_\_\_/\_\_\_\_/\_\_\_\_ (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account until the said minor attains majority. I indemnify the Bank against the claim of the above minor for any withdrawal / transactions made by me in his / her account.

Date :

Signature of Guardian

Signature



D. MODE OF ACCOUNT OPERATION

A/c Closure  Premature withdrawal

Self  Either or Survivor  Any other Instruction  Jointly or Survivor  Any one or survivor  Minor by Guardian
Power of Attorney  Jointly  Former or Survivor
Any other Instruction

I / We agree to abide by existing Rules, Terms and Conditions of all schemes / accounts and facilities enumerated in the Deposit policy given on website www.saraswatbank.com and changed from time to time.

Signature/s Thumb Impression

E. 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-operative Banks (Nomination) Rule 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 deposit in the above account, may be returned

Table with 5 columns: Nature of Deposit & Number, Nominee Name, Relationship with Depositor, if any, Age, If nominee is a minor, his/her date of birth

NOMINEE ADDRESS

\*As the 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.

NOMINEE NAME MAY BE PRINTED ON MY/ OUR PASSBOOK AND DEPOSIT CONFIRMATION ADVICE

I/we the undersigned do not wish to make nomination in my/our aforesaid A/c.

Place : Date : \*\*Signature(s) # Thumb impression(s) of Depositors

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

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 Signature of Account Holder/s

Nomination Registration No. Date : Acknowledgement of nomination received on

(For Office Use Only)

Date : A/C to be opened at Branch Code Branch Reconciliation No. DEPOSIT DETAILS Payment by Cash Transfer Cheque No. Date: Drawn on Bank Branch Debit existing SB/CA/OD A/C No. Deposit Amount ₹

DECLARATION BY THE BRANCH : I hereby certify that this account opening form is complete in all respects and relevant documents have been obtained. The Account may please be opened. ( This information must be filled-up by the branch before sending AOF for processing)

Name: EMR No. Date : Round seal of Branch

Saraswat Co-op. Bank Ltd. Branch Head / Authorised Signatory Signature of Bank Official in whose presence signed



Acknowledgement - DA 1

Date:

We acknowledge receipt of nomination made by you with respect to your a/c Application Name

in favour of :Name of the nominee Age: years, residing at

Yours faithfully,

Signature of bank official with seal



## GUIDELINES FOR FILLING INDIVIDUAL CUSTOMER REGISTRATION FORM

### General Instructions:

- 1) Fields marked with " \* " are mandatory fields
- 2) Tick ( ✓ ) wherever applicable.
- 3) Self-attestation of documents is mandatory
- 4) Please fill the form in English and in BLOCK Letters
- 5) Please fill dates in DD-MM-YYYY format.
- 6) Wherever state code and country code is to be furnished, the same should be the two-digit code as per Indian Motor Vehicle, 1988 and ISO 3166 country code respectively, details of which are available with the Bank.
- 7) KYC number of applicant is mandatory for updation of KYC details
- 8) For particular section update, please tick ( ✓ ) in the box available before the section number and strike off the sections not required to be updated.
- 9) Annexure 2 should be obtained in case of seafarers.
- 10) Annexure 3 should be obtained in case of NRO/NRE a/cs where resident joint-holder shall operate the accounts.

### A. Clarification / Guidelines on filling 'Personal Details' section

- 1) Name: Please state the name with Prefix (Mr./Mrs/Ms/Dr/etc.). The name should match the name as mentioned in the Proof of identity submitted failing which the application is liable to be rejected.
- 2) Either father's name or spouse's name is to be mandatorily furnished. In case PAN is not available father's name is mandatory.
- 3) If senior citizen / minor provide proof of Date of Birth.
- 4) If PAN No. is not available please attach form 60 or 61.

### B. Clarification / Guidelines on filling details if applicant residence for tax purposes is jurisdictions(s) outside India

- 1) Jurisdiction(s) of Residence: Since US taxes the global income of its citizens, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
- 2) Tax Identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security / insurance number, citizen personal identification / services code / number and resident registration number.

### C. Clarification / Guidelines on filling "Proof of identity (POI)" section

- 1) If driving license number or passport is provided as proof of identity then expiry date is to be mandatorily furnished.

### D. Clarification / Guidelines on filling 'Proof of Address (PoA) - Current / Permanent / Overseas Address details' section

- 1) State / U.T Code and Pin / Post code is not mandatory for Overseas addresses.
- 2) Deemed to be OVD Document Type Code
  - 01) Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill)
  - 02) Property or Municipal Tax receipt.
  - 03) Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings if they contain address.
  - 04) Letter of allotment of accommodation from employer issued by State or Central Government departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and licence agreements with such employers allotting official accommodation.
  - 05) Documents issued by Government departments of foreign jurisdiction and letter issued by Foreign Embassy or Mission in India

### E. Clarification / Guidelines on filling 'Proof of Address (PoA) - Correspondence / Local Address details' section

- 1) To be filled only in case the PoA is not the local address or address where the customer is currently residing.

### F. Clarification / Guidelines on filling 'Contact details' section

- 1) Please mention two-digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999)
- 2) Do not add '0' in the beginning of Mobile number.



**LIST OF TWO-DIGIT STATE /U.T. CODES AS PER INDIAN MOTOR VEHICLE ACT 1988**

State / U.T.	Code	State / U.T.	Code	State / U.T.	Code
Andaman & Nicobar	AN	Himachal Pradesh	HP	Pondicherry	PY
Andhra Pradesh	AP	Jammu & Kashmir	JK	Punjab	PB
Arunachal Pradesh	AR	Jharkhand	JH	Rajasthan	RJ
Assam	AS	Karnataka	KA	Sikkim	SK
Bihar	BR	Kerala	KL	Tamil Nadu	TN
Chandigarh	CH	Lakshadweep	LD	Telangana	TS
Chattisgarh	CG	Madhya Pradesh	MP	Tripura	TR
Dadra and Nagar Haveli	DN	Maharashtra	MH	Uttar Pradesh	UP
Daman & Diu	DD	Manipur	MN	Uttarakhand	UA
Delhi	DL	Meghalaya	ML	West Bengal	WB
Goa	GA	Mizoram	MZ	Other	XX
Gujarat	GJ	Nagaland	NL		
Haryana	HR	Orissa	OR		

**LIST OF ISO 3166 TWO-DIGITCOUNTRY CODE**

Country	Country Code	Country	Country Code	Country	Country Code	Country	Country Code
Afghanistan	AF	Faroe Islands	FO	Mayotte	YT	Swaziland	SZ
Aland Islands	AX	Fiji	FJ	Mexico	MX	Sweden	SE
Albania	AL	Finland	FI	Micronesia, Federated states of	FM	Switzerland	CH
Algeria	DZ	France	FR	Moldova, Republic of	MD	Syrian Arab Republic	SY
American Samoa	AS	French Guiana	GF	Monaco	MC	Taiwan, Province of China	TW
Andorra	AD	French Polynesia	PF	Mongolia	MN	Tajikistan	TJ
Angola	AO	French Southern Territories	TF	Montenegro	ME	Tanzania, United Republic of	TZ
Anguilla	AI	Gabon	GA	Montserrat	MS	Thailand	TH
Antarctica	AQ	Gambia	GM	Morocco	MA	Timor-Leste	TL
Antigua and Barbuda	AG	Georgia	GE	Mozambique	MZ	Togo	TG
Argentina	AR	Germany	DE	Myanmar	MM	Tokelau	TK
Armenia	AM	Ghana	GH	Namibia	NA	Tonga	TO
Aruba	AW	Gibraltar	GI	Nauru	NR	Trinidad and Tobago	TT
Australia	AU	Greece	GR	Nepal	NP	Tunisia	TN
Austria	AT	Greenland	GL	Netherlands	NL	Turkey	TR
Azerbaijan	AZ	Grenada	GD	New Caledonia	NC	Turkmenistan	TM
Bahamas	BS	Guadeloupe	GP	New Zealand	NZ	Turks and Caicos Islands	TC
Bahrain	BH	Guam	GU	Nicaragua	NI	Tuvalu	TV
Bangladesh	BD	Guatemala	GT	Niger	NE	Uganda	UG
Barbados	BB	Guernsey	GG	Nigeria	NG	Ukraine	UA
Belarus	BY	Guinea	GN	Niue	NU	United Arab Emirates	AE
Belgium	BE	Guinea-Bissau	GW	Norfolk Island	NF	United Kingdom	GB
Belize	BZ	Guyana	GY	Northern Mariana Islands	MP	United States	US
Benin	BJ	Haiti	HT	Norway	NO	United States Minor Outlying Islands	UM
Bermuda	BM	Heard Island and McDonald Islands	HM	Oman	OM	Uruguay	UY
Bhutan	BT	Holy See (Vatican City State)	VA	Pakistan	PK	Uzbekistan	UZ
Bolivia, Plurinational State of	BO	Honduras	HN	Palau	PW	Uzbekistan	UZ
Bonaire, Sint Eustatius and Saba	BQ	Hong Kong	HK	Palestine, State of	PS	Vanuatu	VU
Bosnia and Herzegovina	BA	Hungary	HU	Panama	PA	Venezuela, Bolivarian Republic of	VE
Botswana	BW	Iceland	IS	Papua New Guinea	PG	Viet Nam	VN
Bouvet Island	BV	India	IN	Paraguay	PY	Virgin Islands, British	VG
Brazil	BR	Indonesia	ID	Peru	PE	Virgin Islands U.S.	VI
British Indian Ocean Territory	IO	Iran, Islamic Republic of	IR	Philippines	PH	Wallis and Futuna	WF
Brunei Darussalam	BN	Iraq	IQ	Pitcairn	PN	Western Sahara	EH
Bulgaria	BG	Ireland	IE	Poland	PL	Yemen	YE
Burkina Faso	BF	Isle of Man	IM	Portugal	PT	Zambia	ZM
Burundi	BI	Israel	IL	Puerto Rico	PR	Zimbabwe	ZW
Cabo Verde	CV	Italy	IT	Qatar	QA		
Cambodia	KH	Jamaica	JM	Reunion !Reunion	RE		
Cameroon	CM	Japan	JP	Romania	RO		
Canada	CA	Jersey	JE	Russian Federation	RU		
Cayman Islands	KY	Jordan	JO	Rwanda	RW		
Central African Republic	CF	Kazakhstan	KZ	Saint Barthelemy !Saint Barthelemy	BL		
Chad	TD	Kenya	KE	Saint Helena, Ascension and Tristan da Cunha	SH		
Chile	CL	Kiribati	KI	Saint Kitts and Nevis	KN		
China	CN	Korea, Democratic People's Republic of	KP	Saint Lucia	LC		
Christmas Island	CX	Korea, Republic of	KR	Saint Martin (French part)	MF		
Cocos (Keeling) Islands	CC	Kuwait	KW	Saint Pierre and Miquelon	PM		
Colombia	CO	Kyrgyzstan	KG	Saint Vincent and the Grenadines	VC		
Comoros	KM	Lao People's Democratic Republic	LA	Samoa	WS		
Congo	CG	Latvia	LV	San Marino	SM		
Congo, the Democratic Republic of the	CD	Lebanon	LB	Sao Tome and Principe	ST		
Cook Island	CK	Lesotho	LS	Saudi Arabia	SA		
Costa Rica	CR	Liberia	LR	Senegal	SN		
Cote d'Ivoire !Cote d'Ivoire	CI	Libya	LY	Serbia	RS		
Croatia	HR	Liechtenstein	LI	Seychelles	SC		
Cuba	CU	Lithuania	LT	Sierra Leone	SL		
Curacao !Curacao	CW	Luxembourg	LU	Singapore	SG		
Cyprus	CY	Macao	MO	Sint Maarten (Dutch part)	SX		
Czech Republic	CZ	Macedonia, the former Yugoslav Republic of	MK	Slovakia	SK		
Denmark	DK	Madagascar	MG	Slovenia	SI		
Djibouti	DJ	Malawi	MW	Solomon Islands	SB		
Dominica	DM	Malaysia	MY	Somalia	SO		
Dominican Republic	DO	Maldives	MV	South Africa	ZA		
Ecuador	EC	Mali	ML	South Georgia and the South Sandwich Islands	GS		
Egypt	EG	Malta	MT	South Sudan	SS		
El Salvador	SV	Marshall Islands	MH	Spain	ES		
Equatorial Guinea	GQ	Martinique	MQ	Sri Lanka	LK		
Eritrea	ER	Mauritania	MR	Sudan	SD		
Estonia	EE	Mauritius	MU	Suriname	SR		
Ethiopia	ET			Svalbard and Jan Mayen	SJ		
Falkland Islands (Malvinas)	FK						