

## Account Opening Form For Resident Depositor/Individuals (Part A) (Please fill up all the details in BLOCK letters)

Application Date:	MYYYY	Branch:	Branch Code:
Lead Generator Code:			DSC ID: Lead Convertor Code:
(For Office use only)			
Pre-generated Welcome KIT			CIFID 1
Personalised Welcome KIT			CIFID 2
			CIFID 3
			A/c No.:
Please open the following A/c	in my/our Names :		
Small Savings	Basic Savings	Regular Savings	() ₹2,000 A/c
Salary	Cash Certificate	Premium Savings	↑₹25,000 A/c ↑₹1,00,000 A/c
Fixed Deposit	Recurring Deposit	Current	₹5,000 A/c
Photographs and Signatures o	f the A/c Holders		*Mode of Operation:
2.5 cm	2.5 cm	2.5 cm	Self Either or Survivor
Please paste latest photograph of	Please paste latest photograph of	Please paste latest photograph of	Former or Survivor Anyone or Survivor
1st Applicant and sign across	2nd Applicant and sign across	3rd Applicant and sign across	Jointly by All Minor's A/c operated
3.5 cm	3.5 cm	3.5 Cm	by a Guardian  Minor A/c (Above 10 yrs.) operated by the Minor
			Others (Pls. specify)
			*Customer type:
			General
(Signature/Thumb Impression	(Signature/Thumb Impression	(Signature/Thumb Impression	Senior Citizen Minor
of the 1st Applicant)	of the 2nd Applicant)	of the 3rd Applicant)	First Name Middle Name Surname
A. Personal Details: Applican	nt's Name (Leave a space betwe		A R U N K U M A R R O Y
Title Fi	rst Name	Middle Name	Surname
1st Applicant			
2nd Applicant			
3rd Applicant			
Guardian's Name (In case the Ap	plicant is a minor) :		
Relationship with the minor	Father Mothe	By Court Order (If	yes, please affix a copy) Others (Pls. specify)
*Date of Birth	*(M)	/F) Marital Status Father's /	Husband's Name Mother's Maiden Name
	M Y Y Y		
2nd Applicant DD M	M Y Y Y		
3rd Applicant DD MM	M Y Y Y		
PAN Card*		AADHAAR Card No.	*Category
1st Applicant			General SC ST
2nd Applicant			OBC Minority
3rd Applicant			Others (Pls. Specify)
# (If not available, attach form 60	0/61)	Form 60/61 is attached	

Mobile No.	Land line No. (With STD code):	Email ID: (Mandatory for Internet Banking and E-statement)
*1st Applicant 9 1		
2nd Applicant 9 1		
3rd Applicant 9 1		
B. i. Contact Details Address of the 1st Applicant only		
Correspondence Building /Road Name		
Village/City/Town	PO PO	
District	State	
PS	*PIN Code	
Permanent (Same as above)		
Building /Road Name		
Village/City/Town	PO PO	
District	State	
PS S	PIN Code	
B. ii. Contact Details Address of the 2nd Applicant only		
Correspondence Building /Road Name		
Village/City/Town	PO	
District	State	
PS	PIN Code	
Permanent (Same as above)		
Building /Road Name		
Village/City/Town	PO PO	
District	State	
PS	PIN Code	
B. iii. Contact Details Address of the 3rd Applicant only		
Correspondence Building /Road Name		
Village/City/Town	PO PO	
District	State	
PS	PIN Code	
Permanent (Same as above)		
Building /Road Name		
Village/City/Town	PO PO	
District	State	
PS S	PIN Code	
C. Minor Declaration		
I, hereby declare that the minor is my		and legal guardian/guardian appointed by the Court vide
order dated account untill the said minor attains majority. I indemnify the Bank		r in all future transactions of any description in the above drawal/transactions made by me in his / her Account.
Date D D M M Y Y Y		

Signature of the Guardian

D. KYC*:		Natu	re of KYC Documents									
	ID Proof	ID No.	Address Proof		ID No.							
1st Applicant												
2nd Applicant												
3rd Applicant												
(ID & Address Proof*: Voters' ID card, PAN Card, AADHAAR Card issued by UIDAI and Job Card issued by and NREGA signed by a State Government official, Driving license, Passport, Submission of the appropriate document is mandatory except for small Savings Accounts (Please speak to a Bank officer for more options for documents that can be submitted to the Bank).												
E. Introduction (Opt	cional):											
I know Mr./Mrs./Ms.			of (Address)									
							p€	ersonally				
for the past		(Years/Months). I also certify that N	Λr./Mrs./Ms.					resides				
in the above Address	s for	(Years/Months).										
Date:	Signature of	the Introducer		A/c No.					_			
				Sign	nature & S.S. N	o of the V	acifyina /	\utbority				
F. For Salary Accou	nts:			3191	lacure & 5.5. 14	o. or the ve	in ying A	deriority				
I/we confirm the Ide	ntity, Photo, Address and Signa	ature of our Employee			as	mentioned	d in the f	orm. The				
Employee Code No. i	is		p.m. Name of the corporate:									
, Name of the Authorised signatory:												
Date:												
				Signature of the A	uthorised Sign	natory with	Compar	ny Stamp				
							Compa	., 500p				
G. Please open:		7										
Savings A/c	Cheque Facility Required	Debit Card Required Name to Debit C	o be printed on the ard									
	Pass Book Required			¬								
Fixed Deposit:	Amount₹	Period:	Years	Months	<u> </u>							
Cumulative Fixed			Quarterly	Half Yearly	Yearly							
	Payment of the land principal on	maturity	lit to Bandhan Bank A/c No.:						_			
	Dana ah Nasa a	Credit to the Other Bank A/c No.		IECC.					닉			
	Branch Name			IFSC:					Ц			
	Others (Please s				h.,							
		ds to be renewed for		Days/ Month								
Pocuring done -it		ompounded on quarterly basis and p	paid on maturity for Cumulati	ive Fixed Deposit.  Period:		Voors		Months				
Recurring deposit	: Amount ₹ Payment of the	Interest C	it to Bandhan Pank A/s No.	Pellod:		Years		Months,				
	and principal on	maturity  Credit to the Other Bank A/c No.	it to Bandhan Bank A/c No.:						닉			
	Peansh Name	Gredic to the Other Bank AyC NO.		IFSC:					닉			
	Branch Name Others (Please s	pecify)		IF3C:								
	Others (Please S	pecify)										

H. Initial Deposit Details:												
Amount ₹ Mode of Payme	ent: Cash Cheque	Debit A/c A/c No.										
Cheque No. , Dated:	o, , Dated: drawn on Bank, Branch											
[All Cheques should be crossed A/c Payee and drawn payable to "Bandhan Bank Ltd." A/c (Customer's Name)].												
I. Services Required:												
Internet Banking Mobile Banking SMS Alerts# Email Statement #SMS Alert will be sent to the Re												
Email Statement frequency: Daily	Weekly	Monthly	Annually									
J. *Nomination facility to be availed:	Yes No [If Yes, plea	se attach Nomination Form (DA 1) du	lly filled and signed.]									
K. Declaration												
I/we have read and understood the Terms and Co	nditions governing the opening of th	ne account with Bandhan Bank and th	nose relating to various services including but not									
limited to ATMs / Debit card/Internet Banking. I/W	e accept and agree to be bound by th	e said Terms and Conditions including	g those excluding/limiting the Bank's liability. I/we									
understand that the Bank may, at it's discreation, discontinue any of the services completely or partially, without any notice to me/us. I/we agree that Bank may debit my												
account for Service Charges as applicable from time to time.												
I/we agree to maintain prescribed Average Balance	e as applicable from time to time in m	ny account.										
"I/we confirm that I am/we are residents of India. I,	/we hereby declare that the informat	ion furnished above is true and corre	ct to the best of my/our knowledge."									
Date: D D M M Y Y Y Y												
Signature/Thumb Impression of the 1st Applicant	Signature/Thumb Impre	ession of the 2nd Applicant	Signature/Thumb Impression of the 3rd Applicant									
-5	<b>3</b>		-3									
For Illiterates:												
The contents of this form have been understood by me and the same has been explained to me in local language.												
Signature of the Witness			Thumb Impression of the Applicant									
Name:												
Address:												



## Nomination Details (Form DA - 1) (Only One Individual Nominee is Permitted)

															N	omir	atio	n N	o.:								
Nomination under S	Section 452	ZA of the	e Bankin	g Regulat	ion Act,	1949 and	d Rule	2 (1) of I	he Banking	Coi	mpar	nies (	Nomi	natio	n) Rı	ule 1	985	in re	spec	t of	Bank	De	posit	s.			
I/we (Names)					residing	at (Ad	ldress)	)															n	omi	nate	the	غ خ
following person to	o whom in t	:he even	it of my/o	our/mino	r's death	, the amo	ount o	f deposi	t in the acco	ount	t, par	ticula	ars wh	егео	f are	give	en be	elow	mav	be	retur	ned	by B	and'	han	Bank	<
3,			,	·	Branch.						, ,					,											
Details of the Dep	osit				s of the	Nomine	e																				
														lation													
Nature of the Deposit	Addition	al Detail	s if any	Name				Addre	SS				wit if a	:h the ny	Dep	osito	)Γ,		Age	0	ate c	of Bi	rth (l	n cas	se of	mino	or)
																					D D	М	М	Υ	Υ	Υ	Υ
	J [			_																							
As the Nominee is a	a minor on	this date	e, I/we ap	ppoint (Gu	ıardian's	Name)											(Rel	atio	nship	wit	h the	mir	пог)				
		, (Add	ress)																								
(Age)	to receiv	ve the ai	mount of	the Dep	osit in th	e accoun	it on b	ehalf of	the Nomine	ee ir	n the	ever	it of m	ny/ou	r/mi	inor'	s dea	ath o	during	g th	e min	orit	y of t	:he 1	Nom	inee	<u>.</u>
ignature of the 1st V	Alitposs*			Signature	of the 2	nd Witne	NCC*				<b>~!</b>		/ <b>-</b> L	h 1		-•	. C LI	6		••••							
1st Witness' Name:				ngriacure	or the 21	id vvicile	:55		Name:	[	signa	ture,	/Thum	ID IM	pres	sion	OF CI	ne D	epos	ICOL		7		7			
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Address:									Address	S: [ _	_	_		<u> </u>			<u> </u>	Ļ	<u> </u>	<u> </u>	<u> </u>	Ļ		뷰		<u> </u>	
2nd Witness' Name	e:																	Ļ									
Address:									Date:	L	D	D I	ММ	Y	Υ	Y	Y										
Date:	ММ	Y	Y																								
Place:																											
*In case of an illiterate	person									_	signa	ture	of the	. Join	t Ho	lder	s:										
For Office Use																											
I hereby certify that may please be set u				n is comp	lete in al	l respect	All K	YC check	ks have bee	en c	omp	letec	l and i	eleva	ant c	locu	men	ts h	ave b	een	obta	ine	d. The	3 ac	coui	nt	
												F	or Ba	ndha	n Ba	ink											
												9	Signat with E	ure c mp. l	of the	e Bra S.S. N	anch Io.	Hea	d/As	st. E	Branc	h He	ead				
													Date :		D	D	М	М	Υ	Υ	Υ	Υ					
														_							JLIL		J				
Acknowledgem																											
We acknowledge y		nation F	orm DA1	relating	to:																						
Nature of the Acco	ount																										
Account No.										$\prod$												I					
In the name of					held w	ith us.						F	or Ba	ndha	n Ba	nk											
													Autho	risec	Sign	nato	гу										



## Personal Data Form (Part B)

	[	Pennsh Code										
Date: D D M M Y Y Y Y	Branch:	Branch Code:										
Name in full (In BLOCK Letters):												
CIF (For Bank's Use):												
A/c No.:		_										
Nationality:	Religion: Gender: Male	Female Others										
Marital Status: Single	Married											
Caste: General	SC ST OBC Others	If others, Pls. Specify										
Whether a Senior Citizen: (if yes, enclose an Age Proof)	Yes No											
Whether a Pensioner:	Yes No											
Qualification:	School Graduate Post-Graduate	Others (Please specify)										
Total No. of Family Members:	No. of Adult(s)  No. of Minor(s)											
Occupation: Salaried	Business Self-employed Pensioner Student	Agri. & Allied Others										
If Salaried, employed with: Private Sector	Public Sector Partnership Govt. Multinational	Proprietorship Others										
Self-employed since:	Months											
Nature of the Business: Manufacturing	Service Provider Agriculture Real Estate Trader	Others										
Self-employeed Professional: Doctor	CA/CS Lawyer Architect IT Consultant	Others										
Monthly Household Income:												
Up to ₹ 5,000 ₹ 5,000 -10,000	₹ 10,001-20,000	₹ 50,001-1,00,000 Above ₹ 1,00,000										
Residence Type: Owned	Rented Family Owned Company Provided											
Assets owned:  Building/ Apartment	Land Car Two-Wheeler Others (Ple	ase specify)										
Loan with other Bank: Personal Loan	Auto Loan Two-Wheeler Loan Housing Loan Credit Card	Others										
Are you interested in any of our Loan Products:												
Personal Loan	Auto Loan Two-Wheeler Loan Housing Loan Credit Card	Others										
Hobby: (Please	specify)											
Marketing :												
In our endeavour to serve you better, Bandhan B	ank communicates from time to time with relevant products and services or pro	omotional offers. Please tick on below mode(s) to										
receive such communication through	Email SMS# Telephone None											
# SMS alert will be sent to the Registered Mobile No	).											
I have no objection if Bandhan Bank may use any of	the above information for its own business promotion with me.											
,, 355 51), 61												
Please												
Place:												
Date: D D M M Y Y Y Y		Cianabusa /Thumb Images-i Chb - Ali										
		Signature/Thumb Impression of the Applicant										