## First 8 digits of the Aadhar number to be redacted

## Account Opening Form for Resident Depositors/Individuals (Please fill up all the details in BLOCK LETTERS)



Application Date: D D M M Y Y Y Y Branch:	Branch Code:
Lead Generation Code: Lead Converter Code:	BU ID:
(For Branch use)  Pre-Generate Welcome Kit  Personalised Welcome Kit	
Account Number  Customer ID  Programme type  *Mandatory for Salary Accounts  Small Savings  SB Sanchay  SB Standard  Salary Standard  Salary Advantage  Premium Savings  Prem  Staff Account (Emp ID  )  SB Shaurya  Elite Savings  Fixed Deposit  #Others  MAB Requirement (in ?):	Existing Customer
NIL 2,000 5,000 10,000 25,000 1,00,000 5,00,000 #Others  Mode of Operation:	
Self Either or Survivor Former or Survivor Anyone or Survivor Jointly by all Minor A/c operated by Gu *If minor selected please fill	
Minor A/c Self operated (above 10 yrs) #Others (Pls. Specify)  Customer Type:  General Staff Senior Citizen Minor	
PERSONAL DETAILS	
Title First Name Middle Name Surname st Applicant	
late of Birth D D M M Y Y Y Marital Status: Married Single Other *PAN	or Form 60/61**
ather/Spouse's Name	2.5 cm
lother's Maiden Name	Please paste latest
adhar Number *Gender: Male Female Third Gender	1st Applicant and sign across
egistered Mobile Number Telephone No. (with STD code)	ń
egistered Email ID	
*Communication address	
lat No./Bldg. Name	
oad No./Village/ own /State	gnature/Thumb impression of
District/City PS PS	the 1st Applicant)
andmark	
PIN Code State	
Registered Address Type: Owned Rented/Leased Ancestral Company Provided	
)*Permanent Address Please tick here in case the Permanent Address is the same as Communication Address	
lat No./Bldg. Name	
load No./Village/ fown/State	
pistrict/City PS	
andmark	
IN Code State	
registered Address Type: Owned Rented/Leased Ancestral Company Provided	



Downwest DNo. Place of issue	KYC details Primary Applicant			
JOINT APPLICANT DETAILS Please mention no. of Joint Applicants	ID Proof Docu	ment ID No.	Place of issue	Valid till D D M M Y Y Y Y
Applicant  2nd Joint  Applicant  2nd Joint  Applicant  2nd Joint  Applicant  3nd Joint  4nd Joint  3nd Joint  3nd Joint  3nd Joint  4nd Joint  3nd Joint  3nd Joint  3nd Joint  4nd Joint  3nd Joint  4nd Joint	Address Proof Docu	ment ID No.	Place of issue	Valid till D D M M Y Y Y Y
Applicants   Appli	JOINT APPLICANT DETAILS Please mention	n no. of Joint Applicants		
Applicants    Minor Declaration   Pather   Mother   Court Appointed   Pastamentary Guardian   Mother   Court Appointed   Pather   Mother   Court Appointed   Pastamentary Guardian   Pather   Mother   Court Appointed   Pather   Mother   Court Appointed   Pastamentary Guardian   Pather   Mother   Pather   Pathe				
Applicate    Minor Declaration   Father   Mother   Court Appointed   Testamentary Courcian	2nd Joint			
Type of Guardian  Father  Mother  Court Appointed  Freshment with the above month herby decides that the minor any  Count of the crote for dead that force year excellent and all and a father and a family for actual and legal guardian/guardian apparent  From the force for dead that force year excellent and a family of the state of anascition of an develoption in incident to the above accord and a family expendent the and almost on at the state as family of the state of anascition of the above accord and supplies the administration of the above accord and page surface of the state and a family of the state of anascition of an are excellent on the above accord and page and the state of the above accord and a page surface of the state of the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor's according to the above according to see almost existing minor according to the above according to see almost according to the above according to the above according to the above according to a page and the page and the above according to the above according tor	3rd Joint			
Card Jane Name	Minor Declaration			
Control does not control   Control does not control does not control   Control does not control does not control does not control   Control does not control do	Type of Guardian Father Mother		mentary Guardian	
as mentioned in the form.  For Salary Accounts    Name of Authorised Signatory	Guardian's Name			
For Salary Accounts    Now confirm the Identity, Photo, Address, Signature of our Employee	by Court vide order dated(copy enclose majority. I confirm that I shall indemnify Bandhan I	d); and I shall represent the said minor in a Bank at all the times, against any claim of t	ll future transactions of any description in re he above minor and/or any third party in rel	elation to the above account until the said minor attains ation to any withdrawal/transaction made by me in the
I/We confirm the Identity, Photo, Address, Signature of our Employee is ₹ p.m. Name of Corporate  Name of Authorised Signatory  **Company Code  **Name of Authorised Signatory  **With company stamp  **Access your Account**  Cheque book Facility Required Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  **Name to be Printed on Debit Card AITH POS ECOM Contactless (PAN Number is mandatory for carrying international Debit Card transactions)  **Ii. Domestic: AITH POS ECOM Contactless (PAN Number is mandatory for carrying international Usage on Debit Card can be done through Nethorise/Republic Appl (PN)  **Digital Banking Facilities Mobile Banking Internet Banking Mosthy Eatherment standard option, if email provided (Physical statement will not be provided)  **SMS alert will be sent to Registered Mobile No. Non Mandatory SMS alerts are Chargeable. (Please refer Schedule of Charges in www.bandhanbank.com)  **Initial Deposit Details: Amount ₹ Mode of Payment Cash Cheque Debit Account Number  **Cheque No.	Date D D M M Y Y Y Y		Signature of Guardian	
The Employee Code is Name of Authorised Signatory	For Salary Accounts			
Name of Authorised Signatory  Signature of Authorised Signatory  Signature of Authorised Signatory  Signature of Authorised Signatory  Signature of Authorised Signatory  With company stamp  Access your Account  Cheque book Facility Required Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card an Debit Card registered Mobile Row ATM POS ECOM Contactless (PAN Number in mandatory for carrying international Debit Card transactions)  iii. Domestic: ATM POS ECOM Contactless (PAN Number in mandatory for carrying international Debit Card can be done through retablishing Registered Mobile Row No. Non Mandatory SMS alert (Physical statement will not be provided (Physical		-	and New Co	
Date		. The Salary or the Employee is ₹		ie
Access your Account  Cheque book Facility Required Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card Card Type (for PGN): Rupay Visa Classic Visa Platinum #Others (Please specify)  Cards to be activated: i. International: ATM POS ECOM Contactless (PAN Number is mandatory for carrying international Debit Card transactions) iii. Domestic: ATM POS ECOM Contactless Westbanking/Mobile App/I/RV)  Joigital Banking Facilities Mobile Banking Internet Banking Mobile Banking Mo	Date D M M Y Y Y			andatory for Salary Accounts
Cheque book Facility Required Debit Card Required Passbook (Passbook will not be issued in case customer is registered for E-statement)  Name to be Printed on Debit Card				
Name to be Printed on Debit Card  Card Type (for PGN):  Rupay   Visa Classic   Visa Platinum   #Others (Please specify)  Cards to be activated: i. International:   ATM   POS   ECOM   Contactless (Pan Number is mandatory for carrying international Debit Card transactions)  ii. Domestic:   ATM   POS   ECOM   Contactless (Pan Number is mandatory for carrying international Debit Card can be done through Netbanking/Mobile App/ IVR)  Digital Banking Facilities   Mobile Banking   Internet Banking   #SMS alert   Monthly E-statement standard option, if email provided (Physical statement will not be provided)  #SMS alert will be sent to Registered Mobile No. Non Mandatory SMS alerts are Chargeable. (Please refer Schedule of Charges in www.bandhanbank.com)  Initial Deposit Details:   Amount R   Mode of Payment   *Cash   Cheque   Debit Account Number    Cheque No.   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).  Fixed Deposit   Amount R   Period:   Years   Months   Days    Interest to be paid   Monthly   Quarterly   Cumulative    Maturity instructions   Auto Renew both Principal and interest   Auto Renew Principal and repay interest   Repay principal and interest    Issue   DD/PO    Credit to Bandhan Bank A/c No.                          Bank Name   Branch Name   IFSC      Name of Account holder   Others (Please specify)   Maturity proceeds to be renewed for   Years   Months   Days	Access your Account			
Card Type (for PGN):  Rupay  Visa Classic  Visa Platinum  #Others (Please specify)  Cards to be activated: i. International:  ATM  POS  ECOM  Contactless  (PAN Number is mandatory for carrying international Debit Card can be done through  Retbanking/Mobile App/ (VR)  Digital Banking Facilities  Mobile Banking  Internet Banking  Internet Banking  #SMS alert  Monthly E-statement standard option, if email provided  (Physical statement will not be provided)  (Physical statement will not be provided)  (Physical statement will not be provided)  Initial Deposit Details:  Amount  Mode of Payment  Cash  Cheque  Debit Account Number  Cheque No.  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)  Fixed Deposit  Amount  Period:  Years  Months  Days  Interest to be paid  Monthly  Quarterly  Cumulative  Maturity instructions  Auto Renew both Principal and interest  Auto Renew Principal and repay interest  Repay principal and interest  Issue  DD/PO  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branc	Cheque book Facility Required De	bit Card Required Passbook (	Passbook will not be issued in case cus	tomer is registered for E-statement)
Cards to be activated: i. International: ATM POS ECOM Contactless (PAN Number is mandatory for carrying international Debit Card transactions)  ii. Domestic: ATM POS ECOM Contactless (PAN Number is mandatory for carrying international Debit Card can be done through Netbanking/Nobile App/ (VR))  Digital Banking Facilities Mobile Banking Internet Banking MSMS alert (Physical statement standard option, if email provided (Physical statement will not be provided)  #SMS alert will be sent to Registered Mobile No. Non Mandatory SMS alerts are Chargeable. (Please refer Schedule of Charges in www.bandhanbank.com)  Initial Deposit Details: Amount Mode of Payment Cash Cheque Debit Account Number  Cheque No. 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).  Fixed Deposit Amount Periods Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Other Bank A/c No.  Bank Name  Branch Name IFSC  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days	Name to be Printed on Debit Card			
iii. Domestic: ATM POS ECOM Contactless (Deactivation of International Usage on Debit Card can be done through Netbanking/Mobile App/IVR)  Digital Banking Facilities Mobile Banking Internet Banking #SMS alert Monthly Experiment standard option, if email provided (Physical statement will not be provided)  #SMS alert will be sent to Registered Mobile No. Non Mandatory SMS alerts are Chargeable. (Please refer Schedule of Charges in www.bandhanbank.com)  Initial Deposit Details: Amount  Mode of Payment Cash Cheque Debit Account Number  Cheque No. 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).  Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Credit to other Bank A/c No. Bank Name  Branch Name IFSC  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days	Card Type (for PGN) : Rupa	y Visa Classic Visa Platin	#Others (Please specify)	
Digital Banking Facilities  Mobile Banking  Internet Banking  #SMS alert  Mothyle E-statement standard option, if email provided  (Mothyle E-statement standard option, if email provided  (Mothyle E-statement standard option, if email provided  (Mothyle E-statement will not be provided)  #SMS alert will be sent to Registered Mobile No. Non Mandatory SMS alerts are Chargeable. (Please refer Schedule of Charges in www.bandhanbank.com)  Initial Deposit Details:  Amount ₹	Cards to be activated: i. International:	ATM POS ECOM	Contactless (PAN Number is mandatory f	or carrying international Debit Card transactions)
Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  Months Days	ii. Domestic:	ATM POS ECOM	(Deactivation of International Netbanking/Mobile App/ IVR	
Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  Months Days	Digital Banking Facilities Mobile Bank	ng Internet Banking #S		tandard option, if email provided  ot be provided)
Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  Months Days	#SMS alert will be sent to Registered Mobile	No. Non Mandatory SMS alerts are Ch	nargeable. (Please refer Schedule of Cl	harges in www.bandhanbank.com)
Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  Months Days	Initial Deposit Details: Amount ₹	Mode of Payment	*Cash Cheque Debit Acc	ount Number
Fixed Deposit Amount  Period: Years Months Days  Interest to be paid Monthly Quarterly Cumulative  Maturity instructions Auto Renew both Principal and interest Auto Renew Principal and repay interest Repay principal and interest Issue DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  Months Days	Cheque No. , Da	ted: drawn on	Bank,	Branch
Interest to be paid  Monthly  Quarterly  Cumulative  Maturity instructions  Auto Renew both Principal and interest  Auto Renew Principal and repay interest  Repay principal and interest  Issue  DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  IFSC  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for  Years  Months  Days .	(All Cheques should be crossed A/c payee an	d drawn payable to "Bandhan Bank Li	cd." A/c	Customer's Name).
Maturity instructions  Auto Renew both Principal and interest  Issue  DD/PO  Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Bank Name  Branch Name  Branch Name  Others (Please specify)  Maturity proceeds to be renewed for  Years  Months  Days	Fixed Deposit Amount ₹	Period: Years	Months Days	
Payment of interest and maturity proceeds  Credit to Bandhan Bank A/c No.  Credit to other Bank A/c No.  Bank Name  Branch Name  Branch Name  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days	Interest to be paid Monthly Qu	uarterly Cumulative		
Payment of interest and maturity proceeds  Credit to Other Bank A/c No.  Bank Name  Branch Name  Branch Name  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days	Maturity instructions Auto Renew both		w Principal and repay interest Re	pay principal and interest
maturity proceeds  Credit to other Bank A/c No.  Bank Name  Branch Name  IFSC  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days	Payment of interest and			
Bank Name Branch N		·		
Branch Name  IFSC  Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days  The specific of the				
Name of Account holder  Others (Please specify)  Maturity proceeds to be renewed for Years Months Days .			IFSC	
Maturity proceeds to be renewed for Years Months Days .				
For debailed information on ED, places refer MITC. Term Deposit fulfill our website www.baedbabbabk.com			for Years Months	Days
remartire Mithdrawal not allowed for Tax Saver FD Tot decaded information of the positivist out website www.pandialibank.com.	Premature withdrawal not allowed for Tax Saver FD			ww.bandhanbank.com.



FATCA/CRS Dec	laration			
I am a tax re	esident of India and not of a	ny other country OR I am a I	ax resident of the country/ies me	entioned in the table below
Please indicate the	he country/ies in which the	entity is a resident for tax purpose	s and the associated Tax ID Numb	er below:
City of Birth*		Country of Birth*		
Address Type for	Tax Purpose* Residen	tial Business Registere	ed Office	
Country#	Tax Identification	Identification Type	,	Address For Tax Purpose*
Country#	Number%	(TIN or Other, please Specify)%	Communication Address [	Permanent Address Please note the address below
				Landmark
			State Co	ountry PIN
% In case Tax Ide Form (read along	ntification Number is not ava			a: I have understood the information requirements of this ition provided by me/us on this Form is true, correct, and
*Politically Expos	sed Person (PEP) Yes	No	CKYC Application New	Existing-No change Existing-Update change
			CKYC Number	
any of the above infor	mation is found to be false, untrue, mis  I/we would like to share my personal/k		hat I/we will be held liable for the same and Ba	ertake and inform Bandhan Bank of any changes therein, immediately. In case, andhan Bank will reserve the right to initiate relevant action against me/us. ulatory/statutory guidelines.
Nomination faci	ility to be availed: Ye	No Print nominee n	ame on passbook/ FD Advice	
I have been	explained about the benefit	ts of the nomination facility. Howe	ver, I would like to inform you tha	at I do not wish to provide a nomination for the account.
			Signa	uture/Thumb impression of the Applicant(s)
Nomination	n Details (Form DA	-1)	Signa	icute/ munio impression of the Applicancia)
			) of the Banking Companies (Nom	ination) Rule 1985 in respect of Bank Deposits.
I/We (Names)		residing at (Addre		
amount of donor	it in the account particulars	who so of a so siven below may be set		son to whom in the event of my/our/minor's death, the  Branch.
amount or depos	icin the account, particulars	whereof are given below may be ret	urned by Bandhan Bank	Didii(ii.
Details of the	Deposit	Details of the Nominee		
Nature of the			Rela	ationship with the
Deposit	Additional Details if any	Name Ad	dress Dep	ositor, if any Age Date of Birth (In case of minor)
As the Nominee	is a minor on this date, I/We	appoint (Guardian's Name)		(Relationship with the minor)
	, (Add	dress)		
the Nominee in t	he event of my/our/minor's	death during the minority of the N		e the amount of the Deposit in the account on behalf of
1st Witness' Nam		death during the minority of the is	Address:	
ist withess man	ie.		Address:	
2nd Witness' Nar	ne:		Address:	
Signature of th	e 1st Witness* Signatur	re of the 2nd Witness* Signatu	ıre for Joint Holder 1	Signature/Thumb impression of the Depositor
Date D D M	MYYYY		Place	
*In case of an illit	terate person Sign	nature for Joint Holder 2 Signa	ature for Joint Holder 3	
Acknowledgeme		Signa of Some House Z Signa	acare for some flower 3	
		nination form DA1 relating to:		
Nature of the Acc	count		Account Number	
In the name of			held with us.	For Bandhan Bank
che fidine di			neta with as.	. s. sandian sank
1				1



Personal Data Form – Primary Applica Customer Name:	nt		
*Nationality Religion			
	ndergraduate Graduate Post Graduate #Others (Please specify)		
Total Number of Family Members	No. of Adult(s) No. of Minor(s)		
*Occupation Salaried Busin	ess Self-Employed Pensioner Student Agri & allied #Others		
*If Salaried, employed with: Priva	te Sector Public Sector Partnership Govt. Multinational Proprietorship #Others		
*Employer's Name:			
*Employer's Address:			
Self Employed Since:	Months a. Date of Establishment/Incorporation of entity  b. Trade License/GST/Registration No. of entity (if any)		
*Nature of Business:	facturing Service Provider Agriculture Real Estate Trader #Others		
*Kind of Business:			
Self Employed Professional: Do	ctor CA/CS Lawyer Architect IT Consultant #Others		
*Annual Income (In ₹ Lakh) : <1	1 - 5   >5 - 10   >10 - 15   >15 - 25   >25 - 50   >50		
Status: No	mal Blind Differently Abled Pardanashin		
Category: Ger	neral SC ST OBC Minority #Others (please specify)  # (If others is selected, please specify mandatorily)		
Marketing: In our endeavour to serve ye	ou better, Bandhan Bank communicates from time to time with relevant products and services with promotional offers . Please tick		
below the mode to receive such commu	nication Email SMS Telephone None  Use any of the above information for its own business promotion with me		
Declaration    We have read, understood and accepted the Terms and Conditions including the Most Important Terms & Conditions a copy of which I/we am/are in possession of) governing the opening of the account with Bandhan Bank and those relating to various services including but not limited to ATMs/Debit Cards/Internet Banking/Mobile Banking/Phone Banking. Apart from this, the current Schedule of Charges has been received by me/us and I/we agree with the same. I/We accept and agree to be bound by the said Terms and Conditions including those excluding and limiting Bandhan Bank's liability. I/We understand that Bandhan Bank may, at its discretion, discontinue any of the services completely or partially, without any notice to me/us. I/We agree that Bandhan Bank may debit my/our account for service charges and/or any other charges/costs, as may be applicable. I/We agree to maintain prescribed Average Balance as applicable, from time to time in my/our account and acknowledge that I/we shall be responsible to pay the penalty for the same, if I/we fail to maintain the Average Balance as stipulated by Bandhan Bank, from time to time. I/We understand that any service offered by Bandhan Bank are in accordance with the prescribed regulations of Reserve Bank of India (RBI) and other appropriate authorities; and are subject to modifications, from time to time. I/We confirm that I am/we are residents of India and declare that the information and data furnished above by me/us are true, complete and correct to the best of my/our knowledge. I/We confirm that I/we shall provide any other information/documents as may be required by Bandhan Bank, from time to time.    Date   Date			
Signature/Thumb impression of Primary Applicant	Signature/Thumb impression of Signature/Thumb impression of Signature/Thumb impression of First Joint Applicant Second Joint Applicant Third Joint Applicant		
For illiterates / Blind / Physically cha The contents of this form have been ur			
	Signature of 1st Witness  Name  Name		
Thumb Impression of the Applicant			
	Address Address		
have clearly explained to the customer the advantages of make a nomination.	documents in original and verified the same. I hereby confirm that the customer has signed all documents including AOF in my presence". In case of no nomination opted (< ): I f nomination facility and in spite of the same he/she still does not want to nominate and he/she also refused to provide a specific letter to the effect that he/she does not want to		
Name Employee ID	Branch Name Signature of the Bank Official with Date		
I hereby certify that this Account Opening Form is compl up in Core Banking System.	ete in all respects. All KYC checks have been completed and relevant documents have been obtained as per the KYC guidelines of the Bank and RBI. The account may please be set  For BU use  For Bandhan B ank use		
	Cod Cinature of DUMadwith FADNA (F.N.)		

## Joint Holder – Customer Onboarding Form



A/C No. CIF ID Existing Customer		
Personal Details: Applicant's Name (Leave a space between two words, e.g.)  Title First Name Middle Name Surname  M R		
Personal Details: Applicant's Name (Leave a space between two words, e.g.)  M R A R U N K U M A R R O Y  Title First Name  Middle Name  Joint Applicant Name  Date of Birth D D M M Y Y Y Y Marital Status: Married Single *PAN  Or Form 60/61**		
Date of Birth D D M M Y Y Y Y Marital Status: Married Single *PAN or Form 60/61**		
Father/Spouse's Name 2.5 cm		
Mother's Maiden Name Please paste latest photograph of		
Aadhaar Number  Gender: Male Female Third Gender  Joint Applicant and sign across		
*Mobile Number		
Email ID Email ID		
I)*Communication Address		
Flat No./Bldg. Name		
Road No./Village/ Town/State PO (Signature/Thumb impression of		
District/City PS the Joint Applicant)		
Landmark		
PIN Code State		
Registered Address Type: Owned Rented/Leased Ancestral Company provided		
II)*Permanent Address  Please tick here in case the Permanent Address is the same as Communication Address		
Flat No./Bldg. Name		
Road No./Village/ Town/State		
District/City PS PS		
Registered Address Type: Owned Rented/Leased Ancestral Company provided		
Relationship with Applicant:		
Landmark		
PIN Code State State		
KYC details Joint Applicant		
ID Proof Document ID Number Place of issue Valid till D D M M Y Y Y Y		
Address Proof Document ID Number Place of issue Valid till DD MM YYYYY		
Access your Account		
Debit Card Required		
Name to be Printed on Debit Card		
Card Type (for PGN):  Rupay  Visa Classic  Visa Platinum  Others (Please specify)		
Cards to be activated: i. International: ATM POS ECOM Contactless (PAN Number is mandatory for carrying international Debit Card transactions)		
ii. Domestic:  ATM POS ECOM Contactless (Deactivation of international usage on Debit Card can be done through Net Banking/Mobile app/Bandhan Bank IVR)		

\*To be filled as Mandatory

## Joint Holder – Customer Onboarding Form



Personal Data Form – Joint Applicant		
Customer Name:		
*Nationality Religion		
Qualification Non-Matric Undergraduate Graduate Pos	#Others (Please specify)	
Total Number of Family Members No. of Adult(s) No. of Min	or(s)	
*Occupation Salaried Business Self-Employed Pensioner	Student Agri & allied #Others	
*If Salaried, employed with: Private Sector Public Sector Partr	nership Govt. Multinational Proprietorship #Others	
*Employer's Name:		
*Employer's Address:		
	ablishment/Incorporation of entity D D M M Y Y Y Y se/GST/Registration No. of entity (if any)	
	griculture Real Estate Trader #Others	
*Kind of Business:		
Self Employed Professional: Doctor CA/CS Lawyer	Architect IT Consultant #Others	
*Annual Income (In ₹ Lakh): <1 1 - 5 >5 - 10 >	10 - 15 >15 - 25 >25 - 50 >50	
Status: Normal Blind Differently Abled	# (If others is selected, please specify mandatorily)	
Category: General SC ST OBC M	inority #Others (please specify)	
FATCA/CRS Declaration		
I am a tax resident of India and not of any other country OR	ax resident of the country/ies mentioned in the table below	
Please indicate the country/ies in which the entity is a resident for tax purposes	and the associated Tax ID Number below:	
*City of Birth *Country of Birth	ax resident of the country/ies mentioned in the table below  and the associated Tax ID Number below:	
*Address Type for Tax Purpose Residential Business Registere	d Office	
Country# Tax Identification Identification Type	Address For Tax Purpose*	
Country# Number% (TIN or Other, please Specify)%	Communication Address Permanent Address Please note the address below	
	Landmark	
	PIN State Country	
#To also include USA, where the individual is a citizen/green card holder of USA.	PIN State Country	
% In case Tax Identification Number is not available, kindly provide functional equivalent FATCA-CRS Certification: I have understood the information requirements of this Form (read along with the FATCA/CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete and hereby accept the same.		
I do hereby solemnly declare that the information provided above is up to date and correct and I hereby submit my recent photograph and self-attested photocopy of the KYC documents.		
*Politically Exposed Person (PEP) Yes No	CKYC Application New Existing-No change Existing-Update change	
	CKYC Number	
CKYC Declaration: I/We hereby declare that CKYC Declaration furnished hereby are true, complete and correct to best of my/our knowledge and I/we undertake and inform Bandhan Bank of any changes therein, immediately. In case, any of the above information is found to be false, untrue, misleading or misrepresenting, I am/we are aware that I/we will be held liable for the same and Bandhan Bank will reserve the right to initiate relevant action against me/us. I/We also declare that I/we would like to share my personal/KYC details with Central KYC Registry and/or any other appropriate authority as per extant regulatory/statutory guidelines.		
Date D D M M Y Y Y		
	Signature/Thumb impression of Applicant	