



Thane Bharat Sahakari Bank Ltd.

Scheduled Bank

Regd. Office : Shatataraka, Baji Prabhu Deshpande Marg, Naupada, Thane - 400 602.

Web site : www.thanebharatbank.com

CURRENT ACCOUNT OPENING FORM

Date : ___/___/___

Branch: _____

Customer ID: [] [] [] [] [] [] [] [] [] []

A/c No. [] [] [] [] [] [] [] [] [] []

Are you shareholder of Bank Yes/No if yes Membership No. [] [] [] [] [] [] [] []

I/We request you to open my / our Current Account with you, in the following name for which I/we initially deposit Rs. _____ (Rupees _____)

I/we have read bank Rules and agree to be bound by them.

I/we declare that

I/we undertake to inform you in writing as soon as any credit facility is availed of by me/us from any other bank/any branch of your bank

I/we am/are not enjoying any credit facilities with other banks/branches of your bank.

I/we am/are enjoying credit facilities with other banks/branches of your bank as detailed below

Please issue me/us cheque book.

Title of Account

Name _____

Name of Proprietor/Partners/Directors

1 _____ 4 _____

2 _____ 5 _____

3 _____ 6 _____

Name, Signature & Photograph of Person(s) authorised to operate the account

	<i>Surname</i>	<i>First Name</i>	<i>Middle Name</i>	<i>Male / Female / Third Gender</i> M / F / T	
1	_____	_____	_____	M / F / T	(Photo)
2	_____	_____	_____	M / F / T	Sign across the Photograph
3	_____	_____	_____	M / F / T	
4	_____	_____	_____	M / F / T	(Photo)

Specimen Signature along with Rubber Stamp (Please sign in Black Ink)

1	_____	_____	_____	_____	Sign across the Photograph
2	_____	_____	_____	_____	(Photo)
3	_____	_____	_____	_____	Sign across the Photograph
4	_____	_____	_____	_____	(Photo)
					Sign across the Photograph

Operational Instruction

1. Either or survivor 2. Jointly or survivor 3. Former or survivor 4. Any one of us or any one of the survivors or the last survivor.

5. Other (Please Specify) _____

Customer Details

Profession/Business : _____ **Constitution** : _____
Estd. on : _____ **PAN/GIR No.** : _____
Annual Turnover/Sales : _____ **Annual Income** : _____
Office : **Owned / Rental**
Address : _____

Telephone No. : (R) _____ (O) : _____
Mobile : _____ **Email ID** : _____
Fax No. : _____
Previous Banker : **Bank** _____ **Branch** : _____
A/c No. : _____ **Tel. No.** _____

Proof of Identity

(Attach copies & provide originals for verification)
 provide atleast one each from List A & List B (Please tick)

List A (Proof of Identity)	List B (Proof of present address)
Voter's Card / Aadhar Card	Latest Electricity Bill/Telephone Bill / Aadhar Card
Pass Port / Pan Card	Xerox copy of Agreement of Residential Flat / Maintenance Receipt
Driving Licence	Income / Wealth Tax Assessment Order

Proof of Identity

Sole Proprietorship/Partnership	Private Ltd./Ltd. Company
1) Photographs of sole Proprietor/All authorised Signatories. 2) Certified copy of Partnership deed (In case of Partnership Firm) 3) Request letter to open an account & Mode of operation signed by all partners on Letterhead. 4) PAN and Proof of Identity for Sole Proprietor/All Partners as mentioned above. 5) Proof of Business	1) Certified copy of Memorandum and Articles of Association. 2) Certified copy of certificate of Incorporation. 3) Certified copy of certificate of commencement of Business (In case of Public Ltd. Co.) 4) Resolution to Open the account. Mode of operation & list of authorised signatories & proof of Identity. 5) List of all Directors and Addresses. 6) Pan Card
HUF	Private Ltd./Ltd. Company
1) Photographs of Karta & co-parceners. 2) HUF letter signed by Karta & major co-parceners. 3) Proof of identity & address 4) Pan Card	1) Photographs of all authorised Signatories & Proof of Identity. 2) Certified true copy of trust deed (For Trust). 3) Certified true copy of bye-laws (For Club/ Society/Association). 4) Certified true copy of Certificate of Registration. 5) Resolution of open the account, Mode of operation & list of authorised Signatories. 6) Pan Card

Introduction by an existing Account Holder

M/s. _____

CD/CC/OD Ac. No. : _____ Branch : _____ Tel No. _____

I know the customer for a period of _____ months / years and confirm his / her address.

Date

DD	MM

YY	YY	YY	YY

Signature of introducer
 Rubber Stamp

Signature verified by

Name : _____

Employee Code : _____

Designation : _____

Signature : _____

Declaration

To,
Thane Bharat Sahakari Bank Ltd.
Scheduled Bank

_____ Branch

Dear Sir,

I/we the undersigned, hereby declare that I am / we are the sole Proprietor / only Partner of the Firm of _____ & am solely / are jointly & severally responsible for the liabilities thereof. I/we shall advise you in writing of any change that may take place in the Constitution / Partnership and I / all the present partners will be liable to you, on any obligation liquidated the current A/c. will be operated by _____

Your Faithfully,

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

Sr. No.	Full Name	Residential Address	Personal Signature(s) of Partner / Proprietor

Nomination (for Individual/Sole Proprietorship accounts only)

I/We nominate following named person as my/our nominee after my/our death and is entitled legally to receive the money as per Section 45 (ZA) of Banking Regulation Act. 1949 and U/S 56 of Co-operative Societies, 1985 Rule 2 (1) (Only one person can be nominated per account)

Name & Address	Age	Date of Birth (if minor)	Relation with Depositor

As the nominee is a minor on this date, I/We appoint Shri. / Smt. / Kum. _____

_____ Address _____

_____ to receive the amount of the deposit on behalf of the nominee in the event of my/our death during the minority of the nominee.

*Note : If depositor is an illiterate, thumb impression shall be attested by two witnesses.

Signature(s) of Depositor(s)

1. _____

2. _____

3. _____

4. _____

Signature(s) of Witness(es)

1. _____

2. _____

FOR BANK'S USE ONLY

A/C. Opened on : ____/____/____ Signature of Clerk :

Approved

Signature of Supervisor Officer : _____

Sr. Officer / Manager _____

Services / Facilities

I /We, request Bank for following Services /Facilities.(Please tick the appropriate box)

1. Cheque Book : Yes, I wish to avail Cheque Book Facility

2. RuPay Debit Card (Platinum): I/We have read the terms and conditions available on www.tbsbl.com. I/We accept & agree to be bound by the terms and conditions governing the operations/use of Thane Bharat RuPay Debit Card (Platinum) and the rules & bye laws of the Bank which are now in force or may hereafter come in force from time to time. I/We request you to issue a 'Thane Bharat RuPay Debit Card (Platinum)' in the name mentioned above for accessing above referred account and to avail all facilities including withdrawals from ATM's and usage through POS (Point of Sale) by debiting my/our captioned account. I/We accept recovering the applicable charges/fees from time to time by debiting my/our Primary Account and in case there is insufficient balance in Primary Account, by debiting charges/fees to my/our any other deposit account. I/We understand that, Bank may, at its absolute discretion, discontinue any of the service completely without any notice to me/us. I/We without prejudice to the above, accept Bank's lien on all my/our deposits, present and future held in the Primary Account as well as in my/our other account whether linked to Thane Bharat RuPay Debit Card (Platinum) facility or not. I understand that all the operations effected through use of Thane Bharat RuPay Debit Card (Platinum) are binding on me/us. Please send the Thane Bharat RuPay Debit Card (Platinum) on my/our address registered with you in Primary Account.

3. SMS Banking : Yes, I/We wish to avail SMS Banking Facility on mobile number

I / We have read and understood the Terms & Conditions available on www.tbsbl.com / at branch, applicable for SMS Banking. I/We accept and agree to be bound by the Terms & Conditions governing the facility and the rules of the Bank which are now in force or may hereafter come in force from time to time. As & when my/our mobile phone number(s) will change, I/We will intimate in writing to the Branch.

4. E-Communication / Statement : Yes, I / We wish to avail E-Communication / Statement facility on my email ID _____ I/We understand that the e-communication / statements are for my/our convenience. The Bank shall not be liable or responsible for any breach of secrecy because of sending the statements to the above e-mail ID. I/We shall verify the authenticity of the emails I/We receive. I/We shall not hold the Bank responsible for any statement received from fraudsters / imposters. I/We shall inform the Bank in writing if there is any change in the information given above. The Bank shall not be responsible if I/We do not receive statements due to incorrect email address and technical reasons. I/We confirm to have read and understood the Terms & Conditions pertaining to the said facility available on the bank's website.

5. INTERNET BANKING : (Retail) Yes, I wish to apply for Net Banking Facility Required : View/Transaction

E-mail ID: _____ Mobile No.

DECLARATION :

I/We have read & understood the Terms & Conditions as displayed on bank's website as amended from time to time and I/We unconditionally accept & agree to be bound by the said Terms & Conditions. I/We agree that the Bank may debit my/our any account for service charges as applicable from time to time. I/We understand and agree that the Bank has a right to discontinue any of services completely or partially without any notice. I am aware that Bank is entitled to modify the Terms & Conditions without any notice and posting them on the Bank's website would constitute appropriate Notice. I agree that the transactions executed while using Internet Banking / Mobile Banking / Rupay Debit Card will be binding on me / all the joint account holders. Please link the Thane Bharat Mobile Banking (IMPS) facility for my/our primary account as well as linked account. I/We confirm that all details provided me/us in the form are correct.

Facilities not required by me / us from serial no. 2 to 5 above :

1st A/c Holder

2nd A/c Holder

3rd A/c Holder

4th A/c Holder

For Office use only

Signature of the above account holder/s is/are as per the records. Details mentioned in the form including signature/s of the applicant/s and mode of operations are verified and confirmed and the said account/s is / are KYC compliant.

Name and signature of the Branch officer

With employee code _____

Date : _____

Branch Seal/Stamp

Form A

To
The Manager
Thane Bharat Sahakari Bank Limited
(Scheduled Bank)

Date :

Dear Sir/Madam,

Declaration -

I/We, the Proprietor / Partner/s / Director/s of _____

Desirous of opening current account with your Bank, do here by declare that the captioned Firm / company do not have any borrower account / do not enjoy credit facilities with any other Commercial Bank or co-operative Bank/Society either in individual name or the institutional name.

In case above declaration found to be incorrect / untrue we shall be hold liable / responsible for the same.

Signature/s-

Form B

To
The Manager
Thane Bharat Sahakari Bank Limited
(Scheduled Bank)

Date :

Dear Sir/Madam.

Declaration -

I/We, the Proprietor (Individual)/Partner/s (Name of partner)/Director/s (Name of Directors) of _____

Desirous of opening current account with your Bank, do here by declare that the captioned Firm/company enjoys the borrowing / credit facilities with other Commercial Bank/co-operative Bank / Society as per the details given here under.

Name of the Bank and Branch :.....
Nature of facilities :.....
Sanctioned limits :.....
Outstanding under each Head :.....
Due date of limits / installments :.....
Over dues if any :.....
Number of shares aggregate amount Rs. (In case) :.....
of Co-operative Bank/Society

Signature/s-

Personal Information of Proprietor / Partner / Authorised Signatory

(Please fill the form in BLOCK LETTERS only)

Name : Mr/Mrs./Miss :	
Customer ID :	If Shareholder, Membership No.
Details of other Account/s with Thane Bharat Sahakari Bank Limited :	
Date of Birth : / /	Religion : Nationality : Indian /
Caste : SC/ST/OBC/BC/OTHER	Qualification :
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried	No. of Dependents / Children: _____
*Aadhaar Card No.	# PAN
*Passport No.	Passport Exp. Date : / /20
*Driving Licen. No.	Driving Licence Exp. Date : / /20
*Voter ID No.	Residence Type <input type="checkbox"/> Owned <input type="checkbox"/> Rental <input type="checkbox"/> Other
Annual Income : - <input type="checkbox"/> up to Rs. 5 Lacs <input type="checkbox"/> Rs. 5 to 10 Lacs <input type="checkbox"/> Above Rs. 10 Lacs	
Occupation: <input type="checkbox"/> Service <input type="checkbox"/> Self Emp. <input type="checkbox"/> Professional <input type="checkbox"/> House Wife <input type="checkbox"/> Student <input type="checkbox"/> Retired In case of Professional please specify the profession _____	
Residential Address	
Flat No. & Bldg. Name _____	
Road No. / Name _____	
Area / Locality _____	
City _____	Pin
Tel. No _____	Mobile No: _____ / _____
E-mail : _____	
Details of Employment / Business	
Name _____	
Address _____	
_____ Contact No _____	
No. of Years of Employment / Business _____	
Previous Banker :	Social Status :

* Provide at least one along with its copy # if PAN is not available, please fill up additional declaration Form No 60 or 61

I hereby declare that the information furnished above is true and correct.

Signature of the Customer

Date _____