



**THE AKOLA URBAN CO-OPERATIVE
BANK LTD., AKOLA**
(Multistate Scheduled Bank)

॥ सहकारेण जनकल्याणम् ॥

CURRENT ACCOUNT OPENING FORM
(For other than Individual)

Customer ID.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Branch _____

Branch Manager,

Date : _____

Br. _____

Please open a Current account as per details given below. An initial amount of Rs. _____

(In words Rs. _____ Only)

in your Bank. I / we agree to abide by the Bank's rules made in this regard.

Title of Account (Name) _____

- Constitution :** 1) Sole Proprietorship firm 2) Partnership firm 3) Joint Hindu Family HUF
4) Club / Association / Society 5) Private or Public limited Company 6) Trust
7) Co-Operative Sector 8) Any Other (pl. Specify) _____

Name of Proprietor / Partners / Directors / Trusty / Karta

Full Name (start with first name)

Cust. ID.

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

Photograph 1	Photograph 2	Photograph 3	Photograph 4	Photograph 5	Photograph 6

1	2	3
4	5	6

* To be signed by proprietor / all the partners / copartners / persons authorised to operate the Account (with rubber seal)

Special operational Instruction & Balance payable to :

1. Self 2. Either of us or survivors 3. All Jointly 4. Severally (singly) of us 5. Any _____ Jointly of us
6. _____'s Sign. must of us 7. Other (pl.Specity) _____

Services Required :

1. CHEQUE BOOK 2. ATM CARD 3. SMS ALERTS 4. MOBILE BANKING 5. E-mail Allowed
 6. Internet Banking : Viewing rights 7. STATEMENT : Monthly / Quarterly.

.CUSTOMER DETAILS (OTHER THAN INDIVIDUALS)

1. Name of Title : _____
 2. Address of Business / Factory / office _____
 Landmark _____ City _____ Tahsil _____
 Dist. _____ Pin code (Off) Tel. No. with STD Code _____
 Mobile No. _____ Fax No. with STD Code _____
 Email ID _____
3. Date of Establishment/ / 4. Nature of business _____
 5. Sales / Excise Tax Reg. No. _____ 6. VAT No. _____ CST. No. _____
 7. Business Place : Owned / Rental 8. Annual Turnover _____ 9. Annual Income _____
 10. Firm's PAN / GIR No. If No PAN then Form 60 OR 61
 11. Credit facilities (Loan) Account (in AUCB if any) _____
 12. Dealing with Other Banks: Yes No If Yes, Specify Details _____
 A. Name of Bank and Branch _____
 B. Type of Account / facilities availed _____
13. Are you shareholder of the Bank by Business title? Yes No
 Membership No. No. of Shares Total Share Value

DECLARATION

I /We agree to abide by the Bank's rules relating to the conduct of current account and confirm that the information furnished above is correct. And addition, I /we the undersigned, hereby declare that I am / We are the Sole Proprietor / Only Partners of the Firm of _____ & am solely are Jointly & severally responsible for the liabilities thereof. I/We shall advice 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 which may be standing in the firm's in your books on date of receipt of such notice and until all obligation shall been liquidated the current A/c. will be Operated in the name of _____

Date : _____

Yours faithfully

1 _____ 2 _____ 3 _____

4 _____ 5 _____ 6 _____

Introduction by an existing Account Holder

I / We _____ the Proprietor / Partner of
M/s. _____ A/c No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Branch _____ Certify that, the Proprietor /Partners /Authorized signatories of the above the
Firm M/s. _____ is / are known to me / us personally
since last _____ Months/ Years and confirm occupation & address stated in the application to open the account.
Date : / /.....

Officer's Name _____

Signature of Introducer

Designation : _____

Signature verified by bank Officer's (sign)

Nomination Form – DA - 1

(For Sole Proprietorship Accounts Only)

Nomination : Required Not Required Only one person can be nominated per account

I nominate following named person as my/our nominee after my 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 Rule2 (1)

Name & Address	Age	Date of Birth (in case of Minor)	Relation with Depositor

As the Nominee is minor on this date, I

appoint Shri / Smt / Miss _____

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 the depositor is illiterate, thumb impression should be attested by two witnesses.**

Signature with Name & Address of witnesses.

1. _____

2. _____

Signature /thumb impression of
Account Holder

A] CHECK LIST OF FORMALITIES OBSERVED IN RESPECT OF PROPRIETORSHIP /PARTNERSHIP FIRMS/ JOINT HINDU FAMILY.

1. Mode of operation in case of partnership to be indicated _____
2. Partnership letter dated _____ and No. _____ obtained. Signed by all partners. (To be compulsorily obtained in case of partnership firms)
3. Partnership Deed Dated _____ (wherever available)
4. Joint Hindu Family Letter dated _____ and No. _____ obtained. Signed by all the adult coparceners. (To be compulsorily obtained in case of Joint Hindu Family)
5. Personal Information Sheet (KYC) obtained in respect of all i. e. Proprietor, Partners, coparceners, Karta (Whichever applicable).

B] CHECK LIST OF FROMALITIES OBSERVED IN RESPECT OF LIMITED COMPANIES :

1. Certificate of Incorporation dated _____ for inspection and return). A copy of the same is retained.
2. Copy of the Memorandum of Association registered on _____ and Articles of Association dated _____ obtained.
3. Certificate of Registrar of Joint Stock Companies dated _____ that the company is entitled to commence business (for inspection, entry in the Power of Attorney Register and return.) A copy of the same is retained.

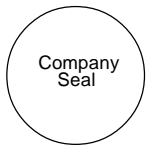
Notice : This Certificate is not required when,

- a. The Company is a private company.
 - b. The company was registered before 1913 and does not invite the public to subscribe for shares.
 - c. The company is Limited by guarantee and does not have a share capital.
4. Personal Information sheet (KYC) of the Chairman/ Managing Director / Chief Promoter obtained.
 5. To, The Branch Manager,
The Akola urban co-operative Bank Ltd., Akola.

Branch _____

We hereby certify that the following resolution of the Board of Directors of the _____ Company, Limited was passed at a meeting of the Board held on the _____ and has been duly recorded in the Minute Book of the said Company:-

“Resolved - that a bank account for the Company be opened with the ‘The Akola Urban Co-operative Bank Ltd., Akola.’ Branch _____ ,and that the said Bank be and is hereby authorized to honor Cheques, bills of exchange and promissory notes and other negotiable instruments drawn, accepted or made on behalf of the Company by _____ and to action any instructions so given relating to the account, whether the same be overdrawn or not, or relating to the transactions of the Company.”



Secretary



President

C] CHECK LIST OF FORMALITIES OBSERVED IN RESPECT OF ACCOUNTS IN THE NAMES OF CLUBS, ASSOCIATIONS SOCIETIES, TRUSTS AND OF ACCOUNTS OF OTHER FIDUCIARY NATURE.

1. Copy of the Memorandum of Association registered on _____ and Articles of Association dated _____ obtained.
2. Government / Military Order dated _____ obtained.(Whichever applicable)
3. Copy of relevant extracts of trust deed dated _____ obtained and perused, with special emphasis on the powers of the trustees to sign cheques, delegation of authority, borrows money etc. The relevant portions are entered in the Power of Attorney register.
4. Personal information sheet (KYC) of Secretary/ President/ Managing Trustee etc., obtained.
5. Copy of the Bye Laws dated _____ and resolution dated _____ of the account, regulating the conduct of the account, obtained.

प्रति,
दि अकोला अर्बन को - ऑपरेटिव्ह बँक लि., अकोला

शाखा _____

संस्थेचे पोटनियमातील तरतुदीनुसार _____ च्या संचालक मंडळ / व्यवस्थापन समितीच्या दिनांक _____ रोजी झालेल्या सभेत मंजूर झालेल्या ठरावानुसार व्यवस्थापन समितीला मिळालेल्या खालील अधिकारानुसार संस्थेचे चालू ठेव खाते दि अकोला अर्बन को ऑपरेटिव्ह बँक लि., अकोला शाखा _____ येथे उघडण्यात यावे असे सर्वानुमते ठरविण्यात आले. संस्थेच्या वतीने सदर चालू ठेव खात्यावर व्यवहार करण्याचे अधिकार तसेच चेक, ड्राफ्ट व त्यांचे पृष्ठांकन, बिल्स आणि इतर नेगोशिअबल इन्स्ट्रुमेंट व यासारखे सर्व प्रकारचे व्यवहार करण्याचे तसेच बँकेला वेळोवेळी द्याव्या लागणाऱ्या सुचना-पत्र इत्यदि वर स्वाक्षरी करण्याचे अधिकार खालील पदाधिकारी यांना संयुक्तपणे किंवा _____ प्रमाणे देण्यात येत आहेत. पदाधिकारी यांच्या नमुना स्वाक्षरी संस्थेच्या अध्यक्षच्या सहीने सांक्षातिक करून बँकेला देण्यात येत आहे.

अ.क्र.	पदाधिकार्याचे नांव	पद	नमुना स्वाक्षरी
१.	_____	_____	_____
२.	_____	_____	_____
३.	_____	_____	_____
४.	_____	_____	_____
५.	_____	_____	_____



सचिव _____

अध्यक्ष _____

FOR BANK'S USE ONLY

Applicant(s) interviewed and to be sure for description: YES No

Particulars of identification and address (Photo and Residential documents) for all individual people are obtained.

All other documents which are required for opening this type of account are obtained & verified from originals

All formalities except the following matter/case have been obtained.-

Opened the account under Risk Category : Low Risk Medium Risk High Risk

A/c opens on :

A/c opened by Clerk

Verifying by Officer

Branch Manager

Documents Required and Provide Original for Verification

SOLE PROPRIETOR / PARTNERSHIP : 1) Photographs of Sole Proprietor / All authorized signatories 2) Certified copy of Partnership deed (for Partnership firm) 3) Request letter to Open the account & Mode of operation signed by all partners on Letterhead. 4) PAN and Proof of Identity for Sole Proprietor / All Partners are mentioned. 5) License issued by the concernng profession registering authorities. 6) Any two documents :- A. Shop act License or Grampanchyat of concern village B. Sale Tax & IT Return C. CST/VAT / LBT Certificated Registration Certificate copy.

Private or Public Limited Company : 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 (For Public Ltd. Co.) 4) Resolution to Open the account, containing Mode of operation & list of authorized signatories. 5) List of all Directors and their Address. 6) Photograph of all authorized signatories 7) PAN card copy of Company / All Directors are mentioned.

CLUB / TRUST / SOCIETY / ASSOCIATION : 1) Photograph of all authorized signatories 2) Certified copy of Trust Deed (for Trust) 3) Certified copy of Byelaws (for club, society, association) 4) Resolution to open the account and authorized Signatories. 5) Certified copy of Registration Certificate. 6) PAN card copy of club/trust/society & association / All Trusty or all signatories are mentioned.

HUF : 1) Photograph of the Karta 2) HUF letter signed by Karta & all major coparceners. 3) HUF PAN Card.