

ACCOUNT OPENING FORM FOR INSTITUTIONAL ACCOUNTS

[To be filled by Account Holder]

Barcode

Sole Proprietor/ Partnership/ Private Limited Companies/Public Limited Companies/ HUF / Trust /Association of Person / BOI / Societies / Current account in Individual name / One Person Company / Other institutional accounts / LLP / Others(specify)

- Please fill the form in **ENGLISH** and in **BLOCK** letters. All fields marked (*)are mandatory and have to be filled in by the customer
- Whitener strictly not allowed on Form. Any cancellation/Overwriting on the form to be countersigned by the customer only.
- All documents to be Self-Certified and verified by Branch. ☐ Tick whichever is applicable
- Name of the Entity to be as per document provided as Proof of Identity.
- 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, list of which is available in CKYC form.

For office use only Application Type* ☐ New ☐ Update

C-KYC Number (Mandatory for C-KYC update request)

Existing CBS ID:

Tracker ID No : Date of Form Sent to CAO

1. ACCOUNT DETAILS

Branch Branch code A/c. No. Date
Account Type : ☐ CURRENT ☐ SAVINGS ☐ TERM DEPOSIT ☐ Others
Account Scheme / Product Name: Canvassed by: (Staff Code)

2. ENTITY DETAILS

Account name*:
(if different from registered name – eg schools managed by trust, a/c opened for specific purpose, supported with resolution)

Registered Name of Entity :

Date of Incorporation* **Udyam Registration / CIN No.:**

Date of commencement of Business: **TIN / GST Registration Number:**

City of Incorporation*: **Country of Incorporation*:**

Country of residence as per TAX laws (ISO 3166) Code No : **Country Name:**

PAN*: **TIN or Equivalent issuing Country:**

Expected Annual Turnover(₹): ☐ 0 to < 10Lac ☐ 10Lac to < 25Lac ☐ 25Lac to < 50Lac ☐ 50Lac to < 1Cr. ☐ > 1Cr

Membership No. **No. of Shares**

Constitution Type*:

| | | |
|---|--|---|
| <input type="checkbox"/> A) Individual (2) <input type="checkbox"/> B) Company <input type="checkbox"/> Pvt Ltd Company (7) <input type="checkbox"/> Public Limited Company (8) - Listed <input type="checkbox"/> One Person Company (OPC) (18) - Unlisted <input type="checkbox"/> C) HUF (4) <input type="checkbox"/> D) Proprietorship (9) <input type="checkbox"/> E) Partnership (10) <input type="checkbox"/> F) Trust <input type="checkbox"/> Public Trust (14) <input type="checkbox"/> Private Trust (15) <input type="checkbox"/> G) Association/Club (11) <input type="checkbox"/> H) Executor/Administrator (12) | <input type="checkbox"/> I) Limited Liability Partnership (LLP) (17) <input type="checkbox"/> J) Liquidator (20) <input type="checkbox"/> K) Artificial Juridical Person (21) <input type="checkbox"/> L) Society <input type="checkbox"/> Registered Cooperative Society (3) <input type="checkbox"/> Housing Cooperative Society (25) <input type="checkbox"/> Credit Cooperative Society (26) <input type="checkbox"/> Industrial Cooperative Society (27) <input type="checkbox"/> M) NBFC (29) <input type="checkbox"/> N) Bank <input type="checkbox"/> Urban Cooperative Bank-Unscheduled (30) <input type="checkbox"/> Urban Cooperative Bank-Scheduled (32) <input type="checkbox"/> District Central Cooperative Bank (31) | <input type="checkbox"/> Non UCB -Scheduled (48) <input type="checkbox"/> Non UCB -UnScheduled (49) <input type="checkbox"/> Foreign Bank (50) <input type="checkbox"/> O) Non Profit Making Organisation <input type="checkbox"/> NPO Trust (33) <input type="checkbox"/> NPO Society (34) <input type="checkbox"/> NPO Company (35) <input type="checkbox"/> P) Self Help Group (38) <input type="checkbox"/> Q) Association of Person Unincorporated (19) <input type="checkbox"/> R) Not Categorised (22) <input type="checkbox"/> S) Business Entities by Statute (45) |
|---|--|---|

Nature of Business Activity :

| Sr. No. | Activity Sector | Sub sector (refer annexure C) | Detailed Description of Business |
|---------|---|-------------------------------|----------------------------------|
| 1 | <input type="checkbox"/> Manufacturing Industry | | |
| 2 | <input type="checkbox"/> Trading | | |
| 3 | <input type="checkbox"/> Commission Agents | | |
| 4 | <input type="checkbox"/> Builders | | |
| 5 | <input type="checkbox"/> Contractors | | |
| 6 | <input type="checkbox"/> Professionals | | |
| 7 | <input type="checkbox"/> Service Sector | | |
| 8 | <input type="checkbox"/> Financial Service Sector | | |
| 9 | <input type="checkbox"/> Entertainment Industry | | |

Category : ☐ Priority Sector ☐ Weaker Section ☐ Non Priority Sector

Industry Type : ☐ Pharmaceuticals ☐ Textiles ☐ Electronics ☐ Construction ☐ Computer(Software/Hardware)
☐ Printing ☐ Chemicals ☐ Media ☐ Trading ☐ Professional ☐ Others

3. PROOF OF IDENTIFY (PoI)*

☐ Officially valid document(s) in respect of person authorised to transact
☐ Certificate of Incorporation / Formation _____
☐ Memorandum and Articles of Association
☐ Resolution of Board / Managing Committee
☐ Activity Proof - 1 (For Sole Proprietorship Only)

☐ Partnership Deed
☐ Power of attorney granted to its manager, officers or employees to transact on its behalf
☐ Activity Proof - 2 (For Sole Proprietorship Only)

☐ Registration Certificate _____
☐ Trust Deed

4. REGISTERED ADDRESS

Business Address Type ☐ Residential ☐ Residential / Business ☐ Registered Office ☐ Others _____

Shop/Office/Gala/Flat No. _____ Building Name.: _____ Plot No.: _____

Area Name.: _____ Road Name: _____

Landmark: _____ City/Town/District*: _____ State*: _____

State/UT Code (IMV act)*: _____ Country*: _____ Country Code(ISO 3166)*: _____ Pin/post code*: _____

Tel. No.: _____ Mobile*: _____ Email ID*: _____

(Mobile no. necessary for SMS alerts. Email ID needed for A/c statement / NetBanking)

4.1 CORRESPONDENCE ADDRESS ☐ SAME AS ABOVE

Business Address Type ☐ Residential ☐ Residential / Business ☐ Registered Office ☐ Others _____

Shop/Office/Gala/Flat No. _____ Building Name.: _____ Plot No.: _____

Area Name.: _____ Road Name: _____

Landmark: _____ City/Town/District*: _____ State*: _____

State/UT Code (IMV act)*: _____ Country*: _____ Country Code(ISO 3166)*: _____ Pin/post code*: _____

4.2 ADDRESS IN THE JURISDICTION WHERE ENTITY IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSE

Business Address Type ☐ Residential ☐ Residential / Business ☐ Registered Office ☐ Others _____

Shop/Office/Gala/Flat No. _____ Building Name.: _____ Plot No.: _____

Area Name.: _____ Road Name: _____

Landmark: _____ City/Town/District*: _____ State*: _____

State/UT Code (IMV act)*: _____ Country*: _____ Country Code(ISO 3166)*: _____ Pin/post code*: _____

Tax Identification No.(TIN): _____ TIN identification type (In case TIN is not available kindly provide functional equivalent) _____

In case the entity's country of incorporation/tax residence is U.S. but entity is not a specified U.S. person mention entity's exemption code: _____

5. NAME OF SIGNATORIES

Details of Account operators are as below (PLEASE WRITE IN BLOCK LETTERS ONLY)

| *(Please submit KYC for all signatories individually. Please fill in Name as is in the document provided as Proof of Identity) | | | | | Relation Type |
|--|-------|---------|------------|-------------|---------------|
| Sr. No | Title | Surname | First name | Middle name | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |

Relation type : proprietor / partner / director / karta / promoter / trustee / authorized signatory, designation / court appointed / self / others(specify) _____

6. IF ACCOUNT IS A TERM DEPOSIT - TD DETAILS

| | |
|--|---|
| TD Scheme | <input type="checkbox"/> FD (Fixed Deposit) <input type="checkbox"/> RD (Recurring Deposit)* <input type="checkbox"/> Tax Exemption* <input type="checkbox"/> Others (Specify) _____ |
| Renewal Instruction | <input checked="" type="checkbox"/> ATR (Auto Renew) with interest <input type="checkbox"/> ATR (Auto Renew) only principal <input type="checkbox"/> Auto Closure Fixed Deposit will be Auto Renewed with interest if no other instructions are given. |
| Deposit Amount | ₹ _____ Period _____ Days _____ Months _____ Years ROI _____ % p. a. |
| Interest Payment Type | <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly <input type="checkbox"/> On Maturity (applicable as per scheme) |
| Interest / Maturity Payment Instruction | <input type="checkbox"/> Credit to My/our Account No. _____ with SVC Co-Op. Bank Ltd. _____ Branch _____ <input type="checkbox"/> NACH Credit <input type="checkbox"/> NEFT Credit to A/c No _____ Bank _____ Branch _____ IFSC Code _____ |

*Autorenewal is not available with this product.

- Short Term and ATR period range would be 15 days to 364 days, with interest payment on maturity.
- TDS as applicable will be deducted.
- Penal Interest is applicable to all premature withdrawals/reinvestments as per rates decided by the bank and subject to change from time to time.

7. INITIAL DEPOSIT - FD/RD FUNDING DETAILS*

Amount ₹ (in Words ₹ _____)

☐ Cash : ☐ Transfer from Existing SVC A/c : No. : _____ Chq No. _____ Branch _____

☐ Cheque : Cheque dated _____ Drawn on Bank _____ Branch _____ Cheque No. _____

(cheque to be self drawn from applicants existing account and to be crossed account payee payable to SVC Co-op. Bank Ltd. a/c. "name of 1st holder")

*In case of Fixed / Recurring Deposits, select appropriate option from below:

☐ I/We authorize SVC Co-op. Bank Ltd. to debit Rs. _____ per month from my/our A/c No. _____ with _____ Branch OR

☐ I/We opt for mandate management system to debit my/our account with _____ Bank _____ Branch (separate mandate to be filled)

8. NOMINATION (FORM DA 1) (MANDATORY IN CASE OF INDIVIDUAL / PROPRIETOR) ☐ REQUIRED ☐ NOT REQUIRED

Nomination under Section 45 ZA read with Section 56 of the Banking Regulation act 1949 and Rule 2(1) of the Co-operative Banks (Nomination) Rules 1985, in respect of the Bank deposits.

The nomination facility is available for sole proprietor accounts. The account holders are advised to avail of the facility for smooth settlement of claim by legal heir in unforeseen circumstances. Nomination should be made in favour of only one individual.

In case customer prefers not to nominate, the same has to be recorded on this form.

Joint account / deposit holder having availed the survivorship benefit, Savings/Current Account can be operated by the survivor/s and/or deposit are payable to survivor/s in case of death of one or more but not all of the Joint account / deposit holder.

In case of Joint account, where the holders have availed survivorship benefits, the survivor can operate the current /savings account and/or deposits are payable to the survivor in the eventuality of the demise of one or more holders but not all.

☐ Nomination required :

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 by SVC Co-op. Bank Ltd.

| Full Name of Nominee | Address of Nominee | Relationship with the main a/c holder | Date of birth* | Age |
|----------------------|--------------------|---------------------------------------|----------------|--------------|
| | | | | |

*As the nominee is a minor on this date, I/We appoint Mr./Mrs. _____

Address: _____

Date of Birth Contact No. _____ Relation with Minor: _____

To receive the amount of deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee. where the deposit is made in the name of minor, the nomination should be signed by the person lawfully entitled to act on behalf of the minor.

☐ Nomination not required :

I/We hereby decline to presently nominate any individual & understand the risks & consequences of my failure to give nomination.

Signature

Applicant Name : _____

(Two witness Mandatory in case of thumb impression/In case another person has been nominated on behalf of the minor nominee)

| Witness 1 | | Witness 2 | |
|-----------|----------|-----------|----------|
| Name | | Name | |
| Address | | Address | |
| Signature | | Signature | |

9. CHANNEL FACILITY (THE BANK OFFERS THE FOLLOWING FACILITIES TO ALL CUSTOMERS PLEASE INDICATE IF YOU WANT TO OPT OUT OF ANY OF THESE)

(Mobile No. and email ID of the primary holder will be registered for all requests.) Cheque book and Debit card will be issued as per applicable rules and delivered to the correspondence address only.

Debit Card*: ☐ RuPay ☐ Visa

☐ I/We request to collect my/our Cheque Book & Debit Card from Home Branch, and don't want it to be delivered to my/our correspondence address.

Name to be embossed on the Debit Card

(If no details are provided, the Debit Card will be issued in the first account holder's name)

Name to be printed

• Monthly eStatements

• NetBanking** / Mobile Banking

• Banc@Cell

• Cheque Book

Name to be printed

I wish to opt out of the following service/s from the ones listed above

☐ I/We wish to avail Trade Finance / Services (Please enclose self-attested copy of IEC)

IEC No.

*Debit Card applicable in case of proprietorship and individual account.

**Kindly submit dully filled NetBanking application form separately at Branch

10. MODE OF OPERATION

☐ Self / Proprietor ☐ Jointly ☐ Anyone ☐ Karta ☐ Specific Instruction _____

11. SIGNATURE/S AND PHOTOGRAPH

Sign across the Photograph
without writing on the face

Latest passport
size, colour
photograph

Latest passport
size, colour
photograph

Latest passport
size, colour
photograph

Signature
with Stamp

Name: _____

*Designation _____

Sign across the Photograph
without writing on the face

Latest passport
size, colour
photograph

Latest passport
size, colour
photograph

Latest passport
size, colour
photograph

Signature
with Stamp

Name: _____

*Designation _____

12. FATCA & CRS DECLARATION

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification) - refer page no 10, point number 6.

| | | |
|--|---|---|
| <input type="checkbox"/> Financial Institution GIIN available GIIN No : _____ <input type="checkbox"/> Sponsored entity Sponsored entity GIIN No. _____ Name of sponsor entity: _____ <input type="checkbox"/> GIIN Not available <input type="checkbox"/> Applied for <input type="checkbox"/> Not required to apply <input type="checkbox"/> Form W8-BEN-E required <input type="checkbox"/> Not obtained – Non-participating FI | <input type="checkbox"/> Direct reporting NFE (non financial entity) <input type="checkbox"/> GIIN available GIIN No : _____ <input type="checkbox"/> Sponsored entity Sponsored entity GIIN _____ Name of sponsor entity: _____ | <input type="checkbox"/> Other NFE (Non financial entity) <input type="checkbox"/> Publicly traded company Name of the stock exchange _____ <input type="checkbox"/> Related entity of a publicly traded company •Name of the related listed company _____ •Name of the stock exchange _____ •Nature of relation: <input type="checkbox"/> Subsidiary of the listed company <input type="checkbox"/> Controlled by a listed company <input type="checkbox"/> Active NFE Nature of business _____ Sub Category code of NFE : _____ <input type="checkbox"/> Passive NFE Nature of business _____ Number of controlling person _____ Controlling person provided : _____ |
|--|---|---|

Number of controlling person (*) outside India for tax purpose : _____

13. DECLARATION OF BENEFICIAL OWNERSHIP

Name of the Customer: _____

Date of Birth: Age: _____ Nationality: _____

Registered Address: _____

Registered Mobile Number: Occupation: _____ Income: _____

The customer as stated above hereby confirms and declares that as on date:

I/We confirm and declare that

- ☐ **Partnership / Limited Liability partnership**
 We are the partners, who, whether acting alone or together, or through one or more juridical person, has ownership of/entitlement to more than 15% of capital or profits of the partnership.
- ☐ **Company (Private / Public Unlisted / OPC)**
 I/We the directors or persons having controlling ownership interest i.e. having ownership/entitlement of more than 25% of capital / profits/ property or controlling through voting rights, agreement, arrangement etc.
- ☐ **Trust /AOP/Society/Bank/Club/Body of Individual/HUF/Others**
☐ I/We, the settler, trustee, the protector, the beneficiaries with 15% & above interest in the trust. exercise ultimate effective control over the trust through a chain of control or ownership
☐ I/We the natural person(s), who, whether acting alone or together, or through one or more juridical person, has/have ownership of or entitlement to more than fifteen percent of the property or capital or profits of association, society, bank, club or body of individuals.
- ☐ As there are no natural persons with ownership as stated above, I/We, declare that I/we have controlling ownership.

| Sr. No. | Full Name of Beneficial owner/ controlling natural person(s) | % of controlling ownership (in applicable cases) | Relation type (Annexure - A) | Controlling person (Annexure - B) | Residency status for tax | Signatory in the account Yes / No. | KYC form submitted |
|---------|--|--|------------------------------|-----------------------------------|--------------------------|------------------------------------|--------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

I/We hereby state and confirm that what is stated above is true and correct information. I/We undertake that any changes in the controlling person/s exercising control or having controlling ownership interest as declared in the table above will be notified to the bank immediately. I/We agree to indemnify and keep indemnified at all times from and against all costs, charges, damages, penalties (including reasonable attorney fees) suffered and/or incurred by the Bank any act done or omitted to be done on the above declaration.

| | | | | | |
|-------------|-------------|-------------|-------------|-------------|-------------|
| <div></div> | <div></div> | <div></div> | <div></div> | <div></div> | <div></div> |
|-------------|-------------|-------------|-------------|-------------|-------------|

Signature(s) of the Proprietor/Partner/Director/Trustee/Authorized Signatories along with name and stamp of entity.
 (*The declaration should be signed by Proprietor/Partners in case of Partnership Firm/LLP, and in all other cases as per resolution)

14. CREDIT FACILITY WITH OTHER BANKS

I/We hereby declare and undertake that M/s. _____

- ☐ a. Is not enjoying any credit facility from any bank or any other financial institution.
- ☐ b. Is enjoying credit limit and have submitted along with this application explicit declaration form in Bank's format.

15. APPLICANT DECLARATION

- I/We hereby declare that the details furnished are true and correct to the best of my knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We are aware that I/We may be held liable for it.
- I/We hereby confirm that my/our latest photograph has been affixed and I/we have submitted a self-attested photocopy KYC document in support of POI & POA. The information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We am/are aware of the FATCA / CRS Terms and Conditions and hereby accept the same.
- I/We certify that the information provided by me/us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best my/our knowledge and belief, true, correct and complete and that I/we have not withheld any material information that may affect the assessment / categorization of the account as a Reportable Account or otherwise.
- I/We permit/authorise the Bank to collect, store, communicate and process information relating to the Account and all transactions therein, by the Bank and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I/We also agree that my/our failure to disclose any material fact known to me/us, now or in future, may invalidate my/our application and the Bank would be within its rights to put restrictions in the operations of my/our account or close it or report to any regulator 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/us within the stipulated period.
- I/We 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.
- Should there be any change in information or any information provided by me/us eventually turns out to be false/misleading/incorrect, I/we declare and undertake the responsibility to intimate the bank within 30 days the date of change with supporting documentary evidence.
- It shall be my/our responsibilities to educate myself/ourselves and to comply at all times with all relevant laws relating to reporting under section 285BA of the IT Act read with the rules thereunder.
- I/We also agree to furnish such information and/or documents as the Bank may require from time to time on account of any change in law either in India or abroad in this subject matter herein.
- I/We shall indemnify the Bank for any loss that may arise to the Bank on account of providing incorrect or incomplete information.
- The details provided by me / us in the form is as per the notified rules 114G to 114H of the income tax act 1962.
- I/We have read, understood and hereby accept & agree to the Terms & Conditions given for all the products & services I/We have requested.
- I/We hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.
- I/We have been explained about the nature of information that may be shared upon authentication. I/We have been given to understand that my/our information submitted to the bank, herewith, shall not be used for any other purpose than mentioned above, or as per requirements of law.
- I/We hereby declare that all the above information voluntarily furnished by me/us is true, correct and complete.
- The terms and conditions of opening and maintaining the current account have been explained to me/us by the Branch officials and I/we accept the terms and conditions and agree to be bound by the same.
- I/We hereby give consent to the Bank for downloading my/our CKYC record from Central KYC Records Registry.

16. SHARING OF INFORMATION

- I/We hereby give express consent by opening and maintaining any account with the Bank give the Bank the right to share/disclose my/our account/personal information as available with the Bank with any entity which has the right to access such information which may include but may not be limited to:
 - Reserve Bank of India (RBI),
 - Government of India through its authorized representative/body,
 - Courts/investigating agencies,
 - Securities Exchange Board of India (SEBI),
 - Authorized representatives of the Stock exchanges,
 - Auditors, professional advisors,
 - Third party service providers with whom the bank has executed legal contract on 'services/products' and who will need to access the information,
- Any other legal entity/authorized individual who is entitled to such information and
- Credit Information Companies.
- I/We hereby give my/our consent to the Bank's right to source for any other information about me/us or my/our accounts/financial conditions as may be deemed fit by the Bank through whatever sources available with the Bank.
- I/We hereby give my/our express consent to the Bank for using my/our contact information for service and promotional activities for which the Bank may share my/our information with other arm of the Bank or any third party/ies that are bound with Bank.

Date : Place : _____

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

Signature(s) of the Proprietor/Partner/Director/Trustee/Authorized Signatories along with name and stamp of entity.
 (*The declaration should be signed by Proprietor/Partners in case of Partnership Firm/LLP, and in all other cases as per resolution)

FOR BRANCH USE ONLY (KYC VERIFICATION CARRIED OUT BY)

DATE

Branch CPV Report (as required) : ☐ Branch

Document Received ☐ Certified Copies ☐ Equivalent e-document

Approvals If Any : ☒ Yes Mail Dated : _____ from _____ attached

Emp. Name _____ Emp. Code _____

Emp. Designation _____ Emp. Branch _____

☐ Check this Box only if Customer requests for collection of Cheque Book & Debit Card from home branch, and does not want it to be delivered to the correspondence address.

Zero Day Calling Done ☐

Risk Classification Done ☐

AML Done ☐

Applicant/s Signed in my presence and AOF & KYC completed

Branch Head Approval:

| |
|--|
| |
|--|

(Signature & Employee ID of official in whose presence the AOF & KYC was completed)

| |
|--|
| |
|--|

(Signature & Employee ID of Branch Head)

DECLARATION

Cheques, Bills, Hundis and other Instruments with or without Share Certificates or other Documents attached, lodged with you for collection and/or Discount and/or purchase from time to time.

With reference to all cheques, bills, hundis and other instruments with or without share certificates or other documents attached, now lodge or, which may at any time hereafter be lodged by me/us with you for collection and/or discount and/or purchase the following arrangements are hereby agreed upon:-

1. You may at your option but at my/our risk and responsibility in all respects, appoint an agent, who shall be my/our agent to collect.
2. You or the agent, at your or his option, may send for collection or payment on my/our accounts at my/our entire risk and responsibility by post or by other manner to another agent or to the drawee thereof any cheques, bills, hundis or other documents attached. I/We agree that such other, agent or the drawee shall be my/our agent for collection at my/our entire risk and responsibility in all respects.
3. You or agent may, at your or his option but at my/our risk and responsibility receive, in exchange for cheques, bill, hundis and other instruments, cheques, bank drafts or other mandates for payments in lieu of cash.
4. Receipt by you or an agent of cheques, bank drafts or other mandates for payments, which are thereafter lost, mutilated or dishonoured and/or of securities of any description, is not to ways did your right to any cheques, bills, hundis or other instruments in case of dishonour, nor shall any proceedings taken thereon or your granting time or entering into any arrangements, with any parties to such cheques, bills, hundis or other instruments (and I/We hereby consent to your so granting time or entering into arrangements) prejudice or effect your absolute recourse to me/us.
5. Should you or an agent receive, in exchange for such cheques, bills, hundis or other instruments payment by an instrument which you or the agent cannot conveniently collect through normal channels it is clearly understood that such instrument may be collected in any manner and by any agency (including despatch to the drawee) at my/our entire risk and responsibility and the agent or agents (including the drawee) employed in such collection shall be considered fully as my/our agent or agents.
6. I/We hereby agree that all cheques, bills, hundis or other instruments and/or share certificates or documents which I/We may from time to time hand you for discount or purchase or against which you make advances or pass consideration to me/us and the shares or goods hereby represented and the proceeds hereof are to be held by you as a continuing security for the payment on demand of the said cheques, bills, hundies or other instruments, so discounted or purchased and of all advances, banking accommodation and/or expenses which you make afford or incur to or for me/us in connection therewith and all other liabilities to you present and future, and you are to be at liberty to exercise all my/our rights (if any) as unpaid seller or sellers of the said shares or goods and without further reference to me/us to sell, insure, warehouse or otherwise deal with the said shares or goods as though you are the absolute owners thereof and you are expressly authorised by me/us (without being obliged to do so) to refuse to deliver share certificates or goods covered by the bills, hundis or other instruments (whatever be their tenor) except against payment. I/We agree that your accounts of sale and accounts of your expenses shall be accepted by me/us as conclusive evidence of the correctness of the matter therein written and I/We declare that this agreement and your rights hereunder shall in no way be effected by my or the death of any one of us or by any change in my/our name, style or constitution.
7. The transmission of any cheques, bills, hundis or other instruments or share certificates or other documents or goods or the instruments received in exchange or payments therefor, and the advices and correspondence relating thereto, whether by post or otherwise and whether by land, sea or air or by telegram or cable shall be entirely at my/our risk & responsibility and any loss, damage or delay howsoever occasioned shall be on my/our account and be wholly borne by me/us. I/We agree that you and the agents shall be absolved from and indemnified against all loss or damage in connection with such cheques, bills, hundis or other instruments or share certificates or documents or goods or any instruments received in exchange or in payment therefor in general and by reason of the following in particular:-
 - a. loss or damage in transmission by any manner.
 - b. telegraphies or cable error, irregularity, delay, mistake, omission, misreading, misinterpretation or mutilation.
 - c. loss, damage or determination to any share certificates or documents or goods during transit or wheresoever incurred.
 - d. loss or damage to or mutilation or alteration of any such cheques, bills, hundis or other instruments or share certificates or documents or any instruments issued or received in exchange or payments therefor.
 - e. loss or damage howsoever occasioned due to any failure of or delay in transmission by post, sea, air, telegram cable or relative advices or correspondence, or the non-despatch or non-receipt of such relative advices or correspondence.
8. "I/We do hereby dispense with the due presentment for acceptance and/or payment and also with giving me/us of any notice of dishonours either for non-acceptance and/or non-payment of any such bills/cheques/hundis or any other instrument and I/We shall pay the amount of such bills/cheques/hundis or any other instrument whenever demanded by you".

Anywhere banking:

1. The Bank shall facilitate payment and collection of cheques through all its branches while I/we shall have one account at the branch (for short "Home Branch") Bank shall also accept cash from me/us/or my/our representatives and pay in cash against presentation of cheques drawn by me/us in favour of myself/ourselves or third party to the credit/ debit to my/our designated account with the Home Branch as per the applicable limits for the account. The cash transaction will be on the same lines as is the case when deposits/withdrawals take place at the home branch.
2. While the instruments for and on my/our behalf will be collected in local clearing, the credit in respect of the proceeds thereunder will be afforded at the home branch on and subject to realization at the respective centre(s) / branch(es).
3. The Bank will be entitled to debit by its home and any other branches my/our account against the cheques presented at various branches of the Bank.
4. My/our written intimation of "stop payment" to the various branches of the Bank will be at my/our risk and I/we agree to grant a lead time of at least 24 hours for intimation of such "stop payment" instruments to all its branches. In case of any mutilated and/or erroneous information which may emerge by of due to any communication error and if the "stop payment" is not carried out in good faith based in the said information, the Bank shall not be held responsible for the said act.
5. I/We agree at any given time to maintain the average balance in my/our account as applicable for the account and informed to us by the Bank. In the event of my/our failing to maintain the minimum float and for conduct of the account not being satisfactory the bank will at its option be entitled to forthwith terminate the facility hereby granted to me/us or to levy service charges as mutually agreed upon.
6. I/We agree to inform my/our existing bankers for the availment of any of the facilities hereby granted to me/us. I/We also agree from time to time to furnish such information details and the documents to the existing bankers and also the Bank as is mandatory under the law and force from time to time or as the bank regards necessary and/or expedient under the banking practice/procedure or to maintain the comity and fair-play between the Bank and the other banker.
7. The agreement herein contained shall not affect, prejudice or derogate from the bank's rights and privileges under the law including the right to claim set off, general and the bankers disposing or retaining lien or similar rights pertaining to my/our credit balance in the account with the Bank.
8. In the event of any malfunctioning and/or break down in the working of the said network for the reasons beyond the control of the Bank, the benefits and the facilities hereby granted to me/us will stand suspended during such break-down in which case the Bank will not in any manner be liable and/or responsible to me/us for any damages/compensation and/or for any other consequences arising out of such suspension.
9. I/We agree to hold the Bank indemnified in case the bank suffers any loss in account of operation of the scheme for my/our benefit.

Debit Card:

I/We give my consent to forward the debit card and PIN no. to the correspondence address recorded with the bank. I /We state that SVC Bank shall not be held liable in case of any losses, damages, etc. suffered in the event the debit card and PIN no. are forwarded to the correspondence address registered with the bank. I have read and understood the terms and conditions governing the usage of the debit card. I accept to be bound by the said terms and conditions and to any changes made therein from time to time by the bank, at its sole discretion without any notice to me. I confirm that I am the sole account holder or have the required mandate to operate all the accounts linked to the Debit Card(s) singly and that I have completed 18 years of age. I understand that upon the issue of a Debit Card to me, the existing ATM Card linked to my account will be deactivated. I understand and undertake that the usage of Debit Card shall be strictly in accordance with the Exchange Control Regulation and in event of any failure to do so, I will be liable for action under the Foreign Exchange Management Act 1999 and the amendments thereof stipulated by the Reserve Bank of India. I accept full responsibility for my Debit Card and agree not to make any claims against SVC Bank, in respect thereto.

General:

I/We have read the terms and conditions of the Bank and pertaining to the current accounts and anywhere banking, telebanking, internet banking, and ATM cum Debit Card facility. I/We have understood the same and agree to abide by such/any other terms and conditions that may be in force from time to time. I/We have also read the Bank's 'Schedule of Charges' for the respective and agree to abide by the same. I/We have also understand that terms & conditions and the service charges are subject to change without any prior notice. The information furnished /declaration given by me/us in this form is true and I/We shall be held responsible for the same at all times. For the purpose of providing certain services, the bank is/may be required to engage the services of specialized and the other service providers /agents. I/We agree that the bank may/would be required to furnish any information regarding my/our account to these service providers /agents. I/We also understand that the continuation of the accounts is at the Bank's sole discretion, and in case of dissatisfaction with the conduct of the account , the bank has right to close the account after giving suitable notice or withdraw some /all services/concessions granted to me/us.

Mobile Banking:

I/We am/are responsible for the registration of Mobile Banking at the Hand phone Number/s mentioned above. In the event of availing any additional/specialized facility through Mobile Banking, I/We shall be fully responsible for the account being debited on instruction from the above mobile number/s. I/We have no objection on to the fees, duties or any other charges which is associated with the service. In case of any mistake on my part or that of the mobile service provider in respect of these services, I/We agree that the Bank will not be responsible and agree not to make any claim against the Bank.

Terms & Conditions of NEFT / SEFT Executed in the RBI NEFT SYSTEM {as per form FT-2B):

I/ We am /are desirous of availing the national electronic funds (NEFT)/ special Electronic Funds Transfer (SEFT) through the RBI NEFT System. In consideration of the bank agreeing to extend to me/us the said NEFT facility, I/ we hereby agree to and undertake the following terms and conditions.

1. Definitions

- a. "Customer" means the person named here in above who has execute the Agreement.
- b. "Bank" means SVC Co-operative Bank Ltd.
- c. "SEFT Facility" means the Special Electronic Transfer Facility through the RBI NEFT System.
- d. Security Procedure established by agreement between the bank and the customer for the purpose of verifying that the payment order or communication amending or cancelling a payment order transmitted electronically is that of the customer or for detecting error in the content of the payment order or communication . A security procedure may require the use of algorithms or other codes identifying words or numbers, encryption call back procedures or similar security devices.
- e. Words or expressions used in this Agreement, but not specifically defined herein shall have the respective meaning assigned to them in the RBI NEFT Regulation, 1996

2. Scope of the Agreement

- a. This Agreement shall govern payment order issued by the customer during the period of validity of the Agreement.
- b. This Agreement shall be in addition to and not in derogation of the RBI NEFT Regulation 1996, The customer has gone through and understood the RBI (NEFT System) Regulation, 1996 and agrees that the rights and obligations provided there in so it relates to the originator shall be binding on him/ it in regard to every payment order issued by him/ it for execution in the SEFT

System.

- c. The customer understand and agree that nothing in this Agreement shall be construed as creating any contractual or other rights against the Reserve Bank or any participant in the SEFT System, other than the bank.

3. Commencement and termination

- a. This Agreement shall come into force as soon as a security procedure is established by mutual agreement between the bank and the customer.
- b. The Agreement shall remain valid until it is replaced by another agreement or terminated by either party of the account closed whichever is earlier.
- c. Either party of this Agreement may terminate this Agreement by giving one month's notice in writing to the other party. Notwithstanding the termination of the Agreement the parties to the Agreement shall be bound by all transaction between them in regard to SEFT facility availed of by the customer before the termination of the Agreement.

4. Security Procedure

- a. For the purpose of agreement for security procedure, the bank may after one or more or a new combination of one or more security device.
- b. A security procedure once established by Agreement shall remain valid until it is changed by mutual agreement.

5. Rights and obligation of customers

- a. The customer shall be entitled, subject to other terms and conditions in the Regulations and this Agreement to issue payment orders for execution by the bank.
- b. Payment order shall be issued by the customer in the form annexed hereto, complete in all particulars. The customer shall be responsible for the accuracy of the particulars given in the payment order issued by him and shall be liable to compensate the bank for any loss arising on account of any error in his payment order.
- c. The customer shall be bound by any payment order executed by the bank if the bank had executed the payment order in good faith and in compliance with the security procedure. Provided that the customer shall not be bound by any payment order executed by the bank if he proves that the payment order was not issued by him and that it was caused either by negligence or a fraudulent act of any employee of the bank.
- d. The customer shall ensure availability of funds in his account properly applicable to the payment order before the execution of the payment order by the bank. Where however, the bank executes the payment order without properly applicable funds being available in the customers' account the customer shall be bound to pay the amount debited to his account for which on SEFT was executed by the bank pursuant to his payment order together with the charges including interest payable to the bank.
- e. The customer hereby authorizes the bank to debit to his account any liability incurred by him to the bank for execution by the bank of any payment order issued by him.
- f. Customers agree that the payment order shall become irrecoverable when it is executed by bank.
- g. Customer agrees that the bank is not bound by any notice of revocation unless it is in compliance with the security procedure.
- h. Customer agrees that he shall not be entitled to make any claim against any party in the RBI SEFT System except the bank.
- i. Customer agrees that the event of any delay in the completion of the Funds Transfer or any loss on account or error in the execution of the funds Transfer pursuant to a payment order, the bank's liability shall be limited to the extent of payment of interest at the Bank Rate for any period of delay in the case of delayed payment and refund of the amount together with interest at the bank rate up to the date of refund, in the event of loss on account of error, negligence or fraud on the part of any employee of the Bank.
- j. Customer agrees that no special circumstances shall attach to any payment order executed under the SEFT facility under this Agreement and under no circumstances shall attach to any payment order executed under the SEFT facility under this agreement and under no circumstances customer shall be entitled to claim any compensation in excess of that which is provided in clause (9) above, for any breach of contract or otherwise.

Rights reserved by the Bank

1. The bank shall execute a payment order issued by the customer duly authenticated by him as defined by the security procedure, unless:
- a. The funds available in the account of the customer are not adequate or properly applicable to comply with the payment order and the customer has not made any other arrangement to meet the payment obligation.
- b. The payment order is incomplete or it is not issued in the agreed form.
- c. The payment order is attached with notice of any special circumstances.
- d. The bank has reason to believe that the payment order is to carry out an unlawful transaction.
- e. The payment order cannot be executed under the RBI NEFT System.
2. No payment order issued by the customer shall be binding on the bank until the bank has accepted it.
3. The bank shall, upon execution of every payment order executed by it, be entitled to debit the designated account of the customer, the amount of the funds transferred together with charges payable thereon whether or not the account has sufficient balance.
4. Bank reserves the right to close the account in case of unsatisfactory conduct of the account.

Miscellaneous

1. 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.
2. If there is no transaction in the account for 2 years the account automatically gets classified as a 'Dormant account'.
3. I/We am/are responsible for the maintenance of secrecy and confidentiality of the authentication credentials and any other information/ details/OTP/PIN, etc.
4. Taxes will be applicable as per existing provision of Income Tax Act 1961 and GST Law.
5. 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.
6. The deposits in the Bank are insured with DICGC for an amount of ₹5.00 lacs (Principle + Interest) per depositor.

FATCA/CRS

I/We certify that:

- a. The information provided by me in the Form, its supporting Annexures as well as in the documentary evidence provided by me are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- b. I permit/authorize the Bank to collect, store, communicate and process information relating to the Account and all transactions therein, by the Bank and any of its affiliates wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- c. I also agree that my failure to disclose any material fact known to me, now or in future, may invalidate my 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 regulator 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 us within the stipulated period.
- d. 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.
- e. It shall be my responsibilities to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules there under.
- f. I also agree to furnish such information and/or documents as the Bank may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- g. I shall indemnify the Bank for any loss that may arise to the Bank on account of providing incorrect or incomplete information.
- h. The details provided by me/us in the form is as per the notified rules 114F to 114H of the income tax act 1962.
- i. Should there be any change in information/ incorrect provided by me, I declare and undertake the responsibility to intimate the bank within 30 days from the date of change with supporting documentary evidence.
- j. I /We certify that I/we have the capacity to sign for the Entity as per CBDT rules/SEBI guidelines.

I/We have read and understood the Terms and Conditions [a copy of which I am in possession of] governing the opening of an account with SVC Bank and those relating to various services including but not limited to ATMs/Debit Card/Mobile Banking/Phone Banking/Net Banking/Bill Pay Facility. I/We accept and agree to be bound by the said Terms and Conditions including those excluding/limiting the Bank's liability. I/We understand that the bank may, at its absolute discretion, discontinue any of the services completely or partially without any notice to me/us. I agree that the Bank may debit my account for service charges as applicable from time to time. I/We am/are residents of India. Apart from this, the current Schedule Of Charges has been received by me and I agree with the same. The address given for communication of the company is with our complete knowledge and consent.

I/We agree to maintain a quarterly average balance as per SVC current account product requirement failing which the Bank may deduct charges as per rules prescribed in Schedule Of Charges.

I /We hereby declare that we will not raise any objection if personal and transactional information that is collected shall be used, stored, accessed, shared, retrieved and/ or retained by the bank in its records for providing services, for operating MIS and other business requirements/purposes as well as for compliance and such other purposes as are legally permissible and shall be protected against unauthorized areas in accordance with the banks policy and procedures in force from time to time such information may be used for the purpose of analysis search, survey to improve services and functioning of the bank as appropriate. Such information shall be disclosed to third account parties as per requirement of law, statutory/ regulatory authorities as per court orders for legal compliance in accordance with obligatory requests without reference to the customer.

The said information shall be maintained for specified period as per bank policy to comply with legal requirements even after the customer/s is/are discontinued.

Signature (s) or thumb impression
of the Authorised Signatory

Signature (s) or thumb impression
of the Authorised Signatory

Signature (s) or thumb impression
of the Authorised Signatory

Signature (s) or thumb impression
of the Authorised Signatory

Signature (s) or thumb impression
of the Authorised Signatory

Signature (s) or thumb impression
of the Authorised Signatory

Signature(s) of the authorised signatory with stamp of entity

A. Related Person Details(Relation Type)

As per Central KYC requirement Related persons . Related person type are

| | | | |
|---------------------|-------------|----------------------|--------------------------|
| RelationType | Self | Proprietor | Partner |
| | Karta | Trustee | Director |
| | Promoter | Authorised Signatory | Court appointed Official |
| | Beneficiary | | |

B. Controlling Person Type:

| Code | Sub-category | Code | Sub-category |
|--------------|--------------------------|-------------------------|----------------------|
| Legal Person | | Other Legal arrangement | |
| C01 | ownership | C09 | settlor equivalent |
| C02 | other means | C10 | trustee equivalent |
| C03 | senior managing official | C11 | protector equivalent |
| Trust | | | C12 |
| C04 | settlor | C13 | other equivalent |
| C05 | trustee | C14 | Unknown |
| C06 | trust-protector | | |
| C07 | beneficiary | | |
| C08 | other | | |

C. Business Activity Sector and subsector

| No. | Sector | Sub-sector | | |
|-----|--------------------------|---|---|--|
| 1 | Manufacturing Industry | Agro-based industries | Automobile and Auto parts | Cement |
| | | Diamond cutting | Drugs and Pharmaceuticals | Electronics including Computer Hardware |
| | | Engineering goods | Fertilizers, Chemicals, Paints | Flour & Rice Mills |
| | | Food Processing units | Marble & Granite | Paper |
| | | Petroleum and Petrochemicals | Power and energy | Printing & Publishing |
| | | Rubber | Steel | Sugar |
| | | Tea, Coffee | Textiles, handloom, Power looms | Tobacco |
| | | Tyre | Vanaspati & Edible Oils | |
| 2 | Trading | Chain Stores | Retailers | |
| | | Wholesalers | Others | |
| 3 | Commission Agents | General Commission Agents | | |
| 4 | Builders | Builders | Estate Agents | |
| | | Property Developers | Others | |
| 5 | Contractors | Civil Contractors | Excise Contractors | Forest Contractors |
| | | Mining Contractors | Others | |
| 6 | Professionals | Chartered Accountants, Companies Secretaries, etc | Fashion designers | Legal professionals |
| | | Medical professionals | Nursing Homes | |
| | | Specialty hospitals | Others | |
| 7 | Service Sector | Advertisement agencies | Beauty Parlours | Consultancy services |
| | | Courier Agencies | Computer training/educational and coaching institutes | Forex Dealers |
| | | Hospitality services | Hotels | I.T. enabled services, BPO service providers |
| | | Security agencies | Software development agencies | Transporters |
| | | Travel agents, tour operators | Others | |
| 8 | Financial Service Sector | Banking Companies | Chit Funds | Financial Institutions |
| | | Financial service providers | Leasing Companies | Money Lenders |
| | | Non-Banking Finance Companies | Share Brokers, Sub-brokers, etc. | Others |
| 9 | Entertainment Industry | Cable T.V. productions | Film distribution | Film laboratories |
| | | Motion Picture Producers | Television Channels | Others |



1. **PAN card** – Mandatory as per latest guidelines
 - a. Proprietary firm – PAN will be of proprietor
 - b. Partnership firm/LLP/OPC/Company/Trust/Society/HUF - PAN Mandatory
 - c. All Other – as per extant guidelines
2. **Document in support of legal name of business entity** – The documents to have constitution, Entity name, nature of business, address and supporting details documents to establish ownership of business.
Constitution wise document list as under.
 - a. **Individual:** Nature of business activity declaration and KYC of Individual
 - b. **HUF:** HUF declaration signed by all Karta and all Co-parceners with details – name, address, relation with Karta
 - c. **Proprietary firm:** Proprietor, nature of business and complete address to establish ownership of business.
 - d. **Partnership firm:** Partnership deed with registration certificate if registered, notarized copy if unregistered. Registration mandatory in select category of business activity.
 - e. **OPC (One person Company):** Certificate of incorporation, Memorandum and Article of Association, Resolution, List of designated director/s.
 - f. **LLP (Limited Liability Partnership):** Certificate of incorporation, LLP agreement, Resolution, List of designated partners with No.
 - g. **Company – Private and Public limited:** Certificate of incorporation, Memorandum and Article of Association, Resolution, List of designated director/s with DIN No.
 - h. **Society:** Registration certificate, Accepted Bye laws, List of office bearer, Resolution
 - i. **Trust:** Registration certificate, Trust deed, List of trustees, Resolution
 - j. **Association/Club/Others:** Registration certificate, Accepted AOA/Rules and regulation/Byelaws, List of office bearer, Resolution
 - k. **AOP/801/Others:** Registration certificate (if registered), AOA/Rules and regulation/Byelaws, List of office bearer, Resolution
 - l. **Other category:** Document as applicable depending on constitution.
 - m. **Specific accounts under above constitution:** Supporting documents as applicable
3. **Proof Of Business/Institution Address**
 - a. Entity document to have the current business/account address.
 - b. If address is different, then one document from list of document as under in support of business/entity address.
 - c. Certified copy of document or equivalent e-document to be submitted.**Additional Address Proof Documents**
 - a. Utility bill in the name of the Entity/proprietor/partner/Director not older than two months.
 - b. Latest Tax paid bill in the name of the firm/ company/ institution with address.
 - c. Any registration certificate issued by State/Central Govt. Authority/ Statutory bodies with address
 - d. Valid Registered rent agreement with utility bill in the name of the owner (Lessor).
 - e. Valid Unregistered rent agreement with utility bill along with ID proof of the owner(Lessor) and positive address verification
 - f. Bank account statement from Existing Account held with another Bank (< than 3 months old) along with Initial Payment Cheque from the same account.
 - g. Latest available Income Tax Assessment order / Wealth Tax Assessment Order along with printout from IT website.
4. **KYC form with documents of all signatories/Beneficial owner/controlling persons to be submitted along with two latest colour passport size photograph.**
5. **All resolutions to be in bank's approved format**
6. **FATCA/CRS** – illustrative list (not exhaustive) for information

| Financial Institution OR a Direct Reporting Non Financial Entity | Active NFE (assuming less than 50% of the income is passive income and less than 50% of the assets produce/held to produce passive income) | Passive NFE. |
|---|--|--|
| 1. Banks 2. Deposit taking NBFCs 3. Mutual funds 4. Private equity funds 5. Hedge funds 6. Custodians 7. Corporate Trustees 8. Clearing Organisations 9. Broking services 10. Life insurance companies 11. Other financial institutions | 1. Manufacturing 2. Trading 3. Agri business 4. Construction 5. Retail 6. Health & Educational Services 7. Social Services 8. Management consulting offices 9. Other professional firms Other categories 10. Govt. Entity 11. International Organisation such as UN, WHO, IMF, etc. 12. RBI (Central Bank) 13. Entity wholly owned by 11,12 & 13 above 14. NGOs/ Non- profit organisation for religious, charitable or educational purpose 15. Treasury centres 16. Start-up companies 17. Entities in liquidation or bankrupt | Key consideration – primarily earning passive income (e.g. interest, Dividend, Rent, Royalty etc) or having passive assets (sources giving passive income). Could include holding companies, or other entity types (HUF, Pvt. Companies majorly earning passive income.) |

ACKNOWLEDGEMENT COPY

You have signed up for product _____ and agree to maintain applicable quarterly/monthly balance of ₹ _____.

This account shall be subject to verification of document, clearance of initial payment cheque & bank is authorized to reject/cancel your account in case any discrepancies or suspicious transactions are observed in this account.

A/c. No./Ref No. Date

Initial Payment: ₹ _____ Nomination: _____

Nomination Details

| NAME | RELATIONSHIP | AGE |
|------|--------------|-----|
| | | |

Branch Official's Sign & Stamp

SVC Co-operative Bank Ltd.

Annexure 2 Customer Point Verification (CPV) Report for Non Individuals

| | | | | |
|---------|---|-----------------|---|--------------|
| Branch: | | Account Number: | Reason: | Date & Time: |
| 1 | Name of the Entity | | | |
| 2 | Complete Address with Pin Code | | | |
| 3 | Land Mark | | | |
| 4 | Was this address located easily : If No, reasons | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 5 | Type of Locality: Industrial Area / Commercial / Residential Area / Others | | | |
| 6 | Did you see any Name Board at entrance to premises? | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 7 | Did the Name at the entrance match our records? | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 8 | Did you meet the Signatory/s in person? If No, reasons! | | <input type="checkbox"/> YES <input type="checkbox"/> NO _____ _____ | |
| 9 | Name of the Person Met During Verification | | | |
| 10 | Specify relation of above person to Firm / Co. in case Signatory was not present: | | | |
| 11 | Did you see any Bank Name Board placed during your visit? | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| 12 | Off / Factory Premises : Owned by Firm / Co. OR Owned by Any Signatory OR on Lease or Rent (specify) | | | |
| 13 | Existence of the entity at this Address since (MM/YYYY) | | | |
| 14 | Confirm the following contact details of the firm / company from the Person met | | Landline:_____ Mobile:_____ Email:_____ | |
| 15 | Document verified from office premises during visit <i>Business proof – (eg.KYC document, sales invoice, purchase invoice , challan copy of statutory dues paid etc)</i> <i>Address proof (eg.latest utility bills/ receipts in the name of the firm/proprietor/partner/director/owner)</i> | | Business proof : _____ Address proof: _____ | |
| 16 | No. of Customer's staff / employees present during visit | | | |
| 17 | Nature of business activity – brief description | | | |

| | | |
|----|---|---|
| 18 | <p>Inspecting official's observation and remarks in detail.</p> <p><i>(Specify the reason for non-availability of second proof in case of proprietorship)</i></p> | |
| 19 | Remarks - | <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE |
| 20 | <p>Visiting Official's Name and Signature with PA/RP stamp</p> | <p>Branch head remarks for approval:_____</p> <p>Branch head approval Name with Signature & PA/RP stamp</p> |