



# THE ADARSH CO-OPERATIVE URBAN BANK LTD.,

# 1-251/1, MPR Complex, Phase - 1, IDA, Jeedimetla, Hyderabad-055, R.R. Dist., A.P.

Phones : 23094422, 23191851, 23191852, Fax : 23098833

DATE

## TERM DEPOSIT ACCOUNT OPENING FORM

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

I/We request the bank to open an account on the basis of particulars furnished hereunder.

Type of Account : RD  FDN  FDC  ADP  ATP  AAR  SCC  SCN

Interest Payable : Monthly  Quarterly  Half Yearly  Yearly  On Maturity  Transfer to A/c. \_\_\_\_\_

1. Name of the Applicant : \_\_\_\_\_ S/o. \_\_\_\_\_ Age \_\_\_\_\_ PAN \_\_\_\_\_ M.Ship No \_\_\_\_\_

2. Second Applicant : \_\_\_\_\_ S/o. \_\_\_\_\_ Age \_\_\_\_\_ PAN \_\_\_\_\_ M.Ship No \_\_\_\_\_

3. Third Applicant : \_\_\_\_\_ S/o. \_\_\_\_\_ Age \_\_\_\_\_ PAN \_\_\_\_\_ M.Ship No \_\_\_\_\_

Form 60 to be filled by those who do not have PAN.

**2. CONSTITUTION**

Individual  Trust

Proprietary  Society/Club/Concern Association

Partnership Firm  Private/Public Limited Company

HUF  Statutory Corporation

**3. ADDRESS OF FIRST APPLICANT** In Case of Minor D.O.B. DD MM YYYY

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City \_\_\_\_\_ Pin \_\_\_\_\_ Phone \_\_\_\_\_

**4. OPERATION**

Self

Jointly

Either or Survivor / Severally

Any other (Specify) \_\_\_\_\_

**5. NOMINATION :**

\*Under Section 45 ZA of The Banking Regulation Act, 1949 and Rule 29(1) of the Banking Companies (Nomination) Rules 1985

I We nominate the following person to whom in the event of my/our/minor death the amount of balance in this account be returned to.

Mr./Mrs. \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ DOB \_\_\_\_\_ Relationship with depositor \_\_\_\_\_

As the nominee is a minor, on this date, I/We appoint the following person to receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Appointee : Mr./Mrs \_\_\_\_\_ S/o. \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Pin \_\_\_\_\_

Signature of the Depositor

**6. INTRODUCED BY :**

Mr /Mrs \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

A/c No. \_\_\_\_\_

I/We know the applicant(s) for the last \_\_\_\_\_ years and recommend to The Adarsh Co-op. Urban Bank Ltd.,

Signature of Introducer

**7. REMITTANCE PARTICULARS**

BY CASH  CHEQUE / DD

Instrument No. \_\_\_\_\_ Date : \_\_\_\_\_

Drawn on \_\_\_\_\_

**8. DEPOSIT AMOUNT : Rs.** \_\_\_\_\_ Type of Deposit \_\_\_\_\_

Period \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days Rate of Interest \_\_\_\_\_ %p.a.

Mode of Interest Payment \_\_\_\_\_

**9. DECLARATION FOR THE ACCOUNT OPENED IN RESPECT OF MINOR**

I hereby declare that the date of birth of the above minor who is my ward is true and I am his/her Natural Guardian / Guardian appointed by the court order dated (Copy enclosed). I shall represent the said minor in all future transactions of any description of the above minor for any withdrawal transactions made by me in his/her account.

Signature of the Guardian

I/We confirm that the rules and regulations of the Bank and Reserve Bank of India in force have been read by/to me/us and I/We agree to abide by and be bound by the same. I/We also agree to abide by the rules and regulations which may be modified from time to time. We confirm that the charges that may be levied as per the rules existing and may be framed from time to time by the Bank.

1.  2.

3.  4.

(Signature/ Specimen Signature(s)) USE BLACK INK ONLY (Signature/ Specimen Signature(s))

**DOCUMENTS FURNISHED (PLEASE TICK)**

Photo ID

Passport Size Photograph 1

Partnership Deed

Proprietorship Letter

Joint Hindu Family Letter

Bye-Laws for Societies/Clubs

Trust Deed

memorandum & Articles of Association

Copy of Board Resolution

Certificate of Incorporation

Certificate of Commencement of Business

Copy of PAN

Proof of Address

**FOR BANK'S USE**

Account opening approved by \_\_\_\_\_

Authorized Signatory

A/c Type

A/c No.

Customer Code : \_\_\_\_\_

Entered by : \_\_\_\_\_

Authorised by : \_\_\_\_\_

Scanning by : \_\_\_\_\_

Authorised by : \_\_\_\_\_