Aliquent for Lump Jenn Limmap pf Lamazon Worken Flacks for Govern H Electroman	ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUAL (PART -I) CUSTOMER INFORMATION SHEET (CIF Creation/Amendment) (In case of joint accounts, Part -I(CIF Sheet) to be taken for each customer)
Branch Name : Fields marked asterix (*) are mandator (For office use only)	ry.Please fill up in BLOCK letters only and use black ink for signature Bank/Branch to affix rubber stamp of
Customer ID:	Application type: New Update nume and code no.
Account No.:	CKYC No.:
Account type: Normal Sma	ll (For low risk customers) (Mandatory for CKYC update request)
Existing Customer ID: (If applicable)	
Name*:	
(Same as ID Proof) Prefix Maiden Name:	
Date of Birth*: DDMNYYY Prefix	Y Y Gender* Male Female Transgender Marital Status* Married Unmarried Others
Name of Father/Mother	
/Spouse* (Please Tick One) (Fat No. of Dependents	her's name is mandatory if PAN is not provided)
Illiterate YES	NO if yes: Identification Marks:
Name of Guardian [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	N
Nationality*: In-Indian Occupation Type* S-Service	Others Country Name: Government Sector Public Sector Government Sector
Occupation Type* O-Others	private Sector
B-Business X-Not categorised-Please specify	
Religion: Hindu Category: General	Muslim Christian Sikh Others OBC SC ST
Person with disability Yes No If yes, i. Visually impaired ii. Differently abled	
Educational Qualification: Organization's Name:	Below SSC SSC HSC Graduate Post Graduate Professional Others Designation/Profession: Nature of Business:
Please Tick the Applicable box*:	Politically exposed Person Related to politically Exposed Person None
ISO 3166 Country Code of Jurisdiction Place/City of Birth*	of Residence* (Code for India is IN) ISO 3166 Country of Code of Birth* Citizenship
	not in any other country or territory outside India* Yes No (If No, please fill the FATCA details form · Annexure II)
PAN*/Tax Identification Number or equi	valent (If issued by jurisdication) (If PAN is not submitted, submit Form 60 - Annexure I)
2 Contact Details (All communications will be sent on provided Mobile No/Email-ID)	
Mobile No.	Email ID
Alternate Mob. No.	S T D Tel.(Off):
3 Proof of Identity/Address (Please	tick the appropriate Box (any one ID type) and give details)
	OTER'S IDENTITY CARD C-DRIVING LICENCE D-UID(AADHAR) ANY OTHER THER ISSUED BY NATIONAL POPULATION REGISTER CONTAINING DETAILS OF NAME & ADDRESS
S-Simplified Measures Account Document (Type code)	
On Document code Description Identity card with applicants photograph issued by Central/State Government Departments, Statutory/Regular authorities/Public sector undertakings, scheduled commercial banks and public financial institutions	
O2 Letter issued by a gazetted officer, with a duly attested photograph of the person	
Document No/Identification Number* Issue Date: D D M M V V V Expiry Date (If applicable):	

4 Address details Current Permanent Overseas	
Address type* Residential/Business Residential Business Registered Office Unspecified	
Address*	
City/Village*: District*:	
oly, mag -	
State:* Pin:*	
5 Address details Correpondence Local Same as Current/Permanent Address	
Address type* Residential/Rusiness Residential Rusiness Registered Office Unspecified	
Address type Residential District State St	
Address*	
City/Village: District*:	
State:* Pin:*	
6 If the Proof of Address (OVD) provided does not contain current address-please provide any of the documents below.	
Utility Bill PPO/FPPO Property or Municipal tax receipt	
Letter of allotment of accomodation issued by employer/ issued by State or Central Government departments, statutory or regulatory bodies, Public sector	
undertaking, scheduled commercial banks, financial institutions and listed companies. Similarly, leave and license agreements with such employers allotting official	
accomodation.	
Document No Date:	
7 DECLARATION CUM UNDERTAKING CUM SELF-CERTIFICATION	
I have read the copy of Terms and Conditions of the Account Opening given to me. The Terms and Conditions have been explained to me/us and	
having understood, I accept the same.	
1 I hereby declare that I have submitted the Aadhaar Card issued by UIDAI voluntarily for identification and /or address proof towards the compliance of KYC norms under the PMLA, 2002	
2 I hereby consent that the Bank may verify the same with the UIDAI and authorise the UIDAI expressly to release the identity and address	
through biometric authentication to the Bank YES NO	
through phothetic activities to the bank	
PHOTO*	
section of the section of the sections	
Picase Paste	
Recent passport Size	
Recent passion on a	
(Ponot Staple)	
Place: D D M M M Y Y Y Y	
8 FOR OFFICE USE/ATTESTATION Documents received Self-certified True copies Not Ity	
Whether self-certification & documents received as part of account opening process have been verified and found correct YES/NO	
(Branch to proceed with opening only when certification is (YES))	
Certified that the implications and conditions for the operation of the account have been explained to the depositor (only in case of illiterate applicant)	
Depositor is Illiterate Blind Staff	
Details of one or two identification marks, if any, such as a mole or scar (mandatory for illiterate applicant)	
In person verification carried out and Signature/LTI of the applicant verified by:	
Official Name: PF No: S T A F 1 P F Designation	
Date: d d rs rs y y y SS No Signature	