

ACCOUNT OPENING FORM FOR SAVINGS / CURRENT ACCOUNTS - INDIVIDUALS

DhanlaxmiBank
established 1922Branch Branch Code Account No. Customer ID Number of Applicants: Product Code SOC Code Date

Saving Account ☐ Resident ☐ Dhanam Preferred ☐ Dhanam Premium ☐ Dhanam Privilege ☐ Dhanam Vanitha Others

Current Account ☐ Resident ☐ Dhanam Power ☐ Dhanam Super Power ☐ Premium Current Account ☐ Collection Account Others

NRI Account ☐ SB NRO Classic ☐ SB NRE Classic ☐ SB NRE Elite ☐ SB NRO Elite ☐ SB NRO Classic-Pls ☐ Current A/C NRO Others

1. Applicant's Full Name

(To be filled in by the applicant only)

Ist Applicant Maiden Name (if any) IInd Applicant Maiden Name (if any) Mode of operation: ☐ Self ☐ Either or Survivor ☐ Former / Latter or Survivor ☐ Anyone or Survivor ☐ Jointly by all Others.....Existing Customer ID: Ist Applicant Customer ID: IInd Applicant Customer ID: Type of KYC: ☐ Aadhaar KYC ☐ Digital KYC ☐ Physical Mode ☐ PMJDY Flag2. Personal Details of Ist ApplicantCustomer Type: ☐ Resident Indian ☐ Non Resident Indian ☐ Senior Citizen ☐ Minor ☐ Foreigner ☐ Foreign Tourist ☐ PIO

Entity / SHG / JLG Customer ID

Entity / SHG / JLG Name

Only for Beneficial Owners / SHG / JLG Member: Existing CKYC No. (if any) Residential Status: ☐ Resident ☐ NRI ☐ Foreign National ☐ PIOFather's Name Mother's Name Spouse Name Gender ☐ Male ☐ Female ☐ Transgender Place of Birth..... Country of Birth.....Marital Status ☐ Married ☐ Unmarried ☐ Other Ethnic origin / Community EducationDate of Birth Annual Income (Rs.) Expected Banking Turnover (Threshold Limit)

Source of Funds ☐ Salary ☐ Professional Income ☐ Business ☐ Agriculture ☐ Self Employed ☐ Pension ☐ Small Wages ☐ Rent

☐ Unemployed lower economic strata of society ☐ Donations/Offerings ☐ Other Sources- Specify ☐ Not Applicable

Profession ☐ Doctor ☐ Engineer ☐ Lawyer ☐ Chartered Accountant ☐ Cost Accountant ☐ Company Secretary ☐ Fashion Designer

Purpose of account opening ☐ Saving ☐ Business ☐ Financial Inclusion ☐ Crediting Salary ☐ Unemployed Lower Economic Strata of Society

☐ Insurance & Investments ☐ Others (Specify)

Whether Politician or connected/related to Politician (Spouse/son/daughter/father/mother/sibling) ☐ Y ☐ NFace to face customer of Bank ☐ Y ☐ N Director in any company/s? ☐ Y ☐ N If Yes, DIN Nationality ☐ Indian ☐ Other Country GST Registration Number (if applicable) If salaried, Employed with ☐ Govt./PSU/Quasi Govt. ☐ Private Sector ☐ NGO/Trust/Society ☐ Others

Applicant location vis a vis Branch location a) Within 15 km b) Between 15 and 50 km and c) Above 50 km

☐ Pardanashin Woman ☐ Blind ☐ Illiterate ☐ Lunatic ☐ Mentally Challenged ☐ Incapacitated ☐ Politically Exposed PersonPAN Form 60 ☐ Form 49 A ☐ Ack. No.....Visa Issued On Valid Till

Proof of ID

Aadhaar ☐ Passport ☐ Driving License ☐

Voters ID ☐ NREGA ☐ Others

Document No.

Issued On Valid Till

Place of Issue of Passport

Proof of Address

Aadhaar ☐ Passport ☐ Driving License ☐

Voters ID ☐ NREGA ☐ Others

Document No.

Issued On Valid Till

Place of Issue of Passport

Other Documents

Document name	Issue Date	Expiry Date	Place of Issue

Communication Address (Residential/Business)

City Landmark State PIN Country

Mobile / Phone

Alternate Mobile Number :

Permanent Address (Residential/Business)

City Landmark State PIN Country

Email ID

3. Personal Details of IInd Applicant

Customer Type: ☐ Resident Indian ☐ Non Resident Indian ☐ Senior Citizen ☐ Minor ☐ Foreigner ☐ Foreign Tourist ☐ PIO

Entity / SHG / JLG Customer IDEntity / SHG / JLG Name

Only for Beneficial Owners / SHG / JLG Member:

Existing CKYC No. (if any)Residential Status: ☐ Resident ☐ NRI ☐ Foreign National ☐ PIO

Father's NameMother's NameSpouse Name

Gender ☐ Male ☐ Female ☐ Transgender Place of Birth..... Country of Birth.....

Marital Status ☐ Married ☐ Unmarried ☐ Other Ethnic origin / Community..... Education

Date of Birth Annual Income (Rs.)..... Expected Banking Turnover (Threshold Limit).....

Source of Funds ☐ Salary ☐ Professional Income ☐ Business ☐ Agriculture ☐ Self Employed ☐ Pension ☐ Small Wages ☐ Rent
☐ Unemployed lower economic strata of society ☐ Donations/Offerings ☐ Other Sources- Specify ☐ Not Applicable

Purpose of account opening ☐ Saving ☐ Business ☐ Financial Inclusion ☐ Crediting Salary ☐ Unemployed Lower Economic Strata of Society
☐ Insurance & Investments ☐ Others (Specify)

Whether Politician or connected/related to Politician (Spouse/son/daughter/father/mother/sibling) ☐ Y ☐ N

Face to face customer of Bank ☐ Y ☐ N Director in any company/s? ☐ Y ☐ N If Yes, DIN

Nationality ☐ Indian ☐ Other Country..... GST Registration Number (if applicable)

If salaried, Employed with ☐ Govt./PSU/Quasi Govt. ☐ Private Sector ☐ NGO/Trust/Society ☐ Others

Applicant location vis a vis Branch location a) Within 15 km b) Between 15 and 50 km and c) Above 50 km

☐ Pardanashin Woman ☐ Blind ☐ Illiterate ☐ Lunatic ☐ Mentally Challenged ☐ Incapacitated ☐ Politically Exposed Person

PAN Form 6O Form 49 A Ack. No.....

Visa Issued On Valid Till

Proof of ID

Aadhaar ☐ Passport ☐ Driving License ☐
Voters ID ☐ NREGA ☐ Others
Document No.
Issued On Valid Till
Place of Issue of Passport

Proof of Address

Aadhaar ☐ Passport ☐ Driving License ☐
Voters ID ☐ NREGA ☐ Others
Document No.
Issued On Valid Till
Place of Issue of Passport

Document name	Issue Date	Expiry Date	Place of Issue

Communication Address (Residential/Business)

CityLandmarkStatePINCountry

Mobile / Phone

Alternate Mobile Number :

Permanent Address (Residential/Business)

CityLandmarkStatePINCountry

Email ID

4. NOMINATION (Form DA1)

Nomination under Section 45 'ZA' of the Banking Regulation Act 1949 and Rule 2(1) of the Banking Companies (Nomination) Rules, 1985 in respect of bank deposits
I/We
(Name/s and address/es) nominate the following person to whom in the event of my / our / minor's death the amount of the deposit, particulars where of are given below, may be returned by Dhanlaxmi Bank Ltd., Branch

DEPOSIT

Nature of deposit	Distinguishing No.	Additional Details, if any

NOMINEE

Name	Address	Relationship with Depositor if any	Age	If Nominee is minor Date of Birth

As the nominee is a minor on this date, I/We appoint Shri/Smt/Kum
.....(name & address) aged..... years to receive the amount of the deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

☐ I/We do not wish to make a nomination for above account.

Place : Date : Name(s), signature(s) and Address/es of witness/es "Signature(s)/Thumb Impression(s) of the depositor(s)

Note: "Where deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor & Strike out if nominee is not a minor. Thumb impression(s) shall be attested by two witnesses.

5. INITIAL DEPOSIT

I/We request you to open a SB (Savings Bank) account - (Domestic/NRE) / Current Account

☐ Cash (To open an account with cash, the customer must deposit the cash in person only at the parent branch) Amount Rs.....

☐ Debit SB/CA Account No. in the name of

☐ Cheque Amount Rs..... Bank Name..... Cheque No..... Dated
(The cheque should be crossed A/c. Payee and drawn payable to Dhanlaxmi Bank Ltd., A/c..... [Customer Name])

6. Guardian's Details (in case of Minor's only)

Incase the applicant is a minor, please provide "guardian's" details.

Prefix

First Name

Middle Name

Last Name

Date of Birth

PAN

Relationship with Applicant

Proof of Identity (POI) Type..... No..... Issued by..... Expiry date (if any).....

Proof of Address.....

Declaration :
I submit this form for opening SB Account on behalf of my ward in your bank.
Place : Date : Signature of Guardian

7. FATCA - CRS Declaration

I am citizen / national / tax resident of country outside India (if Yes, Please fill in the annexure separately)
First Applicant ☐ Yes ☐ No Second Applicant ☐ Yes ☐ No
I/We hereby declare that the information provided by me / us is true. In case any changes, I/We will inform the bank withing 30 days.

8. Channel Services

ATM cum Debit Card required ☐ Yes ☐ No

Type of Card ☐ VISA Card ☐ RuPay Card

Name to be displayed on ATM / Debit Card

RuPay Card Type ☐ Platinum Domestic ☐ Platinum International ☐ RuPay NCMC

Ist Applicant

IInd Applicant

Mobile Alert ☐ Yes ☐ No

Email Alert ☐ Yes ☐ No

☐ Internet Banking ☐ Mobile Banking

The mobile banking service will be activated on the Primary Applicant mobile number provided above. *Retail Internet Banking and Mobile Banking facility will be provided to me since I am mentioning valid mobile number and email id registered with the Bank.

9. Credit Facilities

☐ I / We hereby declare that I/We have not availed any credit facilities from the banking system.
I/We shall inform the bank if and when the credit facilities availed by me/ us from the banking system become 5 crore or more.
☐ I / We hereby declare that our aggregate exposure from the Banking System is less than Rs.5.00 crore.
I/We shall inform the bank if and when the credit facilities availed by me/ us from the banking system become 5 crore or more.
☐ I / We hereby declare that our aggregate exposure from the Banking system is 5.00 crore or more as listed below

	Bank	CC/OD	Other than CC/OD	Total
1.				
2.				
3.				
4.				
	Total			

For Current Accounts, fill in the Annexure (Current Account Declaration)

10. Declaration (Applicable for NRE / NRO accounts)

For the use of Voyagers/Crew Members
I hereby declare that I am a crew member working with an International Airline/Shipping company and confirm that I am a Non Resident Indian and I am presently on employment contact with (Company registered in)
Address of the principal I also confirm that I will inform the Bank, incase I do not renew my contact or choose to go on a new contact or I am unable to proceed on a new contract or in any case in the event that my status of non resident Indian is altered. Accordingly, I will have the non-resident accounts opened in my name re-designated to Resident/RFC account (as applicable)
Signature of the Applicant/s

For Use of Saudi Residents
I/We hereby confirm that I/We have just returned form Saudi Arabia. I/We have a valid residential visa (Iqama) with (company). I/We am/are on a leave for days/months and will be going back to Saudi Arabia on/by I/We request you to kindly open an NRE account in my/our name on the basis of the valid passport and exit re-entry visa submitted, I/We also confirm that I/We will inform the Bank in case I/We is/are unable to proceed to Saudi Arabia for work or choose not to go, and will have the non resident accounts opened in my/our name/s re-designated to resident/RFC accounts (as eligible).
Signature with Company seal

I hereby declare that I am a person of Indian Origin (and am not a citizen of Pakistan or Bangladesh) and I satisfy one of the following conditions
☐ I was a holder of an Indian passport in the past
☐ My father / mother / grandfather (name) is/was a citizen of India by virtue of the constitution of India or the Citizenship Act, 1955.
☐ I am the spouse of an Indian Citizen / Person of Indian Origin.
Signature of the Applicant/s

11. FOR SALARY ACCOUNTS*

Applicant's Employee No. Company Code Company Customer ID

Name of Employer

If the communication address provided is that of the office, the bank will not be held responsible for any deliverable being misused/misplaced after having delivered to the address provided.

Signature with Company seal

12. DECLARATION

I hereby certify that the information provided above is true and correct to the best of my knowledge. Debit operations in the account is subject to receipt of acknowledgment of Thanks Giving Letter. I/We agree to abide by the rules and regulations which have been read / explained to me/us. Unless and until modified or canceled by filing a fresh nomination form/request for cancellation, a nomination once filed will continue to be applicable to the deposit when renewed, whether in part or in full or with additional amount or split up into different accounts, but without any change in the name and constitution of the account. I/We understand that the bank may at any time and without notice to me/us combine and consolidate all or any of my/our accounts and set off or transfer any sum or sums standing to the credit of any one or more of such accounts in or towards the satisfaction of any of my/our liabilities to the bank on any account or in any other respect whether such liabilities be actual or contingent, primary or collateral and several or joint. If by error overdraft is created in my account, I undertake to pay the same with applicable rates of interest. If by mistake, the bank credits Cash/Cheques pertaining to other customers to my accounts), I undertake to inform the bank of the same and refund the same with interest and without any demur. I/We here by undertake to intimate the new address to the Bank in the event of any change in my address within two weeks of such change supported by necessary documents. My/our personal/KYC details may be shared with Central KYC Registry. I/We hereby consent to receiving information from Central KYC registry through SMS/Email on the above registered number / email address. I/We accept the Bank's right to take steps to close the account if frequent return of cheques for want of funds or any other undesirable feature is observed. I authorize the bank to close my account, with prior intimation to me, in case of a) balance in the account remains zero for 3 months or more b) high occurrences of dishonored payments from my account c) no customer induced transactions for 6 months or more.

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/We agree that the Bank may debit my account for services charges as applicable from time to time. I/We am/are Residents/Non Residents / PIO of India. Apart from this, the current Schedule of Charges has been received by me and I agree with the same. I/We understood and agree the Terms and Conditions relating to sweep in/out product. I/We accept and agree to be bound by the said Terms & Conditions including those excluding/limiting the bank's liability. The Bank reserves the right to alter, delete or add any of this rules and service charges for which the customer will be duly notified through bank's website www.dhanbank.com / or branch notice board.

I/We give my/our consent to download my/our KYC Records from the Central KYC Records Registry, only for the purpose of verification of my identity and address from the database of CKYCR Registry. I/we hereby provide my/our consent to use combination of my CKYC Identifier Number along with mobile number or Date of Birth or PIN Code. I understand that my KYC Record includes my KYC Records /Personal information such as my name, address, date of birth, PAN number, etc.

Signature of the Applicant 1	<div></div>	<div>Colour Photo 1st Applicant</div>	<div>Colour Photo 2nd Applicant</div>
Signature of the Applicant 2	<div></div>		
Place	<div></div>	Date	<div></div>

13. Thumb Impression

Thumb impression of 1st/2nd (Strike o whichever is not applicable) holder affixed in my / our presence

Signature of Witness 1	Signature of Witness 1
Name	Name
Address	Address
..... Mob/Tel Mob/Tel

14. SITE VERIFICATION REPORT (SVR) FOR INDIVIDUALS (RECORD OF PERSONAL VISIT BY BM / ABM / OFFICER)

This is to confirm that undersigned has made a personal visit to the premises of the above party and the details are:

Name of the prospective customer :	
Occupation :	
Address for Communication :	
Land Mark :	
Presently Staying with : Mr./Ms. :	
Date since staying at the above address :	Relationship with the prospective customer :
Person met at the premises (Name and Address) :	Date of Visit : Time of Visit : House No./Door No.:

I _____ Branch Head/Assistant Branch Manager/Authorized Official (Scale 1 or above) hereby confirm that the address and other details given above matches with the data given in the Application Form and I have personally met the above party at the above address. I have also verified the door number and the photograph submitted is genuine and the party has signed the account opening form and connected papers in my presence.

I have obtained ☐ Copies of official Valid Documents for proof of address and identity of the relative with whom the prospective customer is living
☐ Declaration from the relative that the said person (prospective customer) proposing to open an account is a relative and is staying with her/him

Signature with POA No.	Branch Name :
Name of Branch Official :	Date :

Branch Declaration

I hereby confirm that this application is for opening SB / Current account of _____ individuals and the relevant KYC details of all the applicants are submitted herewith

<input type="checkbox"/> I confirm having met the customer and verified the original with the document proof.	<input type="checkbox"/> I hereby confirm having done the due diligence. I hereby certify that this account opening form is complete in all respects and relevant documents have been obtained.
SE/Branch Staff EMP No.	Risk Category 1 st Applicant <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
SE/Branch Staff EMP Name _____	Risk Category 2 nd Applicant <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
SE/Branch Staff Signature _____	BM/ABM/Designated Officer Emp. No. <div></div> POA <div></div>
LG Code _____	BM/ABM/Designated Officer Emp. Name _____
LC Code _____	BM/ABM/Designated Officer Signature _____

For PGK Accounts - Please affix the PGK acknowledgment slip on the application form

Please affix PGK here