

## ONLINE ACCOUNT OPENING / APPLICANT INFORMATION FORM FOR RESIDENT INDIVIDUALS

Reference No. 230	32109591260429462	Customer ID.	Account No.			
Account Scheme	SBGEN Purpose of A	Online Account	Account Type	Lead Id		
I. Applicant De	etails:					
Title	Full Name					
Mr.	RAJAN					
Father's Name	MANOJ SHARMA					
Mother's Name	SUREKHA DEVI					
Date of Birth	Gender Married	Gender Married Spouse Name Maiden Name Ex-service Ma		an PAN No.		
09/12/2003	Male Single		Y	GEVPR4626N		
Residential Status	Place of Birth	Country of Birth	Physically/visually handicapped	Aadhaar No.		
RESIDENT INDIAN	DELHI	INDIA	Y	631632807901		
Occupation UN	IDERGRADUATE			Code SU001		
Education	Nationality	Religion	Caste	Village Code		
	INDIAN	HINDU	GENERAL			
Name of Employer / I	Profession / Nature of Business	s / Industry				
2. Communica	tion / Residence Ac	ddress:				
B-331						
Balbir Vihar						
City/District NEW D	DELHI	State	DELHI	Country INDIA		
Pin 110086	Phone No.		Mobile No. 807634628	37		
E-mail ID rajan.doo	c.8076346287@gmail.com					
3. Permanent A	Address:					
B-331						
Balbir Vihar						
City/District NEW D	DELHI	State	DELHI	Country INDIA		
Pin 110086	Phone No.	· ·	Mobile No			

4. Knc	w Your (	Customer	(KYC) Details:						
KYC No	umber (If any)								
Attach the copies of the documents opted for and produce the original copies of these documents for verification.									
		Code	Document Identification No.	D	ate of Expiry	Issuir	ng Authori	ty	Place of Issue
Identity	Proof:	ID108	631632807901						
		Code	Document Identification No.	D	ate of Expiry	Issuir	ng Authori	ty	Place of Issue
Reside	nce Proof:				_				
Annual	Family Income	e Less than Rs	5. 50,000		Source	of Income	Others		
Net Wo	rth Less than	n Rs. 10 Lacs							
5. Info	rmation	on Credit	Facilities Availed:						
I RAJA	AN further un	dertake that:							
□ I do	not eniov cre	dit(Fund based/	Non fund based) facility with Union	n Bank/ot	ner Bank/s OR				
=	I do not enjoy credit(Fund based/Non fund based) facility with Union Bank/other Bank/s OR								
I enjoy credit facility/have current accounts with Union Bank/other Bank/s and the details are as under									
屵	hicle loan	Housing lo		L	ıcational loan		ness loan		Credit Card
	Name of the B	ank & Branch	Account No.			Facility			Amount
6. Fac	ilities Re	quired:							
			es if you wish to avail the following	facilities					
Account Type Regular Gold Platinum Privilege									
Che	eque Book	Collect fr	om Branch Dispatch to r	my comm	unication addr	ess			
Sta	itement by E-N	Mail Y Mo	obile Banking Y Debit Card	Υ	Nomination R	equired	Y SM	S Alerts Requ	uired
Sweep-in-facility: Please clear my Cheque/allow withdrawal by transferring funds from my Saving/Current A/C No.									
Foreign Remittances expected Country Code No.									
			quired under Tax Law			16			
			e than one country then below infor		,				
S.No.	Date of docu	ument collected	Country of Residency for Tax po	urposes	ı ax identifi	cation Numbe equival		runctional	TIN issuing country

## 8. Declaration/Undertaking:

- 1. I RAJAN certify that I have declared my status as per the applicable FATCA/CRS rules in India as notified by Government of India (GOI) /Central Board of Direct taxes (CBDT) /Reserve Bank of India (RBI)/in this regard.
- 2. I certify that the information stated in the account opening form and the supporting documentary evidence provided by me is, to the best of my knowledge and belief true, correct and complete and that I have not withheld any material information/document, that may affect the assessment/categorization of the account at a US Reportable account/Other Reportable account or otherwise.
- 3. I undertake the responsibility to declare, disclose and recertify within 30 days any changes that may take place in the information provided in the account opening form, and signed by me as well as in the documentary evidence provided by me or if any certification becomes incorrect.
- 4. I also agree that our failure to disclose any material fact known to me, now or in future, may invalidate my application and Union Bank of India would be within its right to put restrictions in the operations of my account or take appropriate action permissible under the Indian regulations for the purpose or take any other action as may deemed appropriate if the deficiency is not updated/rectified by me within the stipulated period.
- 5. I agree to furnish any particulars/information that is called upon me by Union Bank of India on account of any change in law either in India or abroad in the subject matter herein.
- 6. In the event there is any tax demand (including interest (if any)) raised due to non-disclosure/inaccurate disclosure of information/document on my/our part, I undertake to pay the demand forthwith and provide the Bank with all information/documents that may be necessary for any proceedings before GOI/RBI/Income-tax Authorities.
  7. 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
- 7. 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.

I confirm having received , read and understood the accounts rules and hereby agree to be bound by the terms and conditions outlined in these rules which govern the account(s) which I am opening with Union Bank of India and amendments there to made from time to time will be binding on me/us when displayed by the bank on its notice board or on its website and those relating to various services offered by the bank including but not limited to International debit card/ Internet banking/ SMS banking /Mobile banking / Tele - banking and other facilities listed in this form . I am aware that the usage of these facilities is governed by the terms and conditions which are displayed on https://www.unionbankonline.co.in , the site maintained by Union Bank of India and I have reviewed the contents of the same. I understand that the bank may at its absolute discretion discontinue any of the services completely or partially without any notice to me. I agree that the bank may debit my account for service charges as applicable from time to time. I declare that the transactions in the account will be made from legitimate sources only the account will not be used for any purpose contrary to law . I declare that the information furnished above is true and correct to the best of my knowledge.

Account Number			
Name of Applicant RAJAN			
Branch ROHINI SECTOR 22 - DELHI			ur passport
Mode of Operation of Account Single		photograph	ross the and also in
			provided low
Date			
Place			
For Bank Use Only			
9. CUSTOMER DUE DILIGENC	E:		
Income tax paid during the last two years	< Rs. 10,000 Rs. 10,000	- 50,000 Rs. 50,000 - 1 Lac >	Rs. 1 Lac
Comments:			
PAN Verification from www.incometaxindia	.gov.in	omination Form Received	
Applicant's name checked with Suspicious	entities list	YC Documents verified with originals	
The applicant is KYC compliant Y N	Politic	cally Exposed Y N	
No. of enclosures: I hereby declare that this account opening form and relevant documents have been obtained, v signature is obtained in physical presence of the	rerified with originals and P.A. No.:	(Name of Branch Head/Opermitte	perations Head), d to open the account.
Name:	е аррисант.		

## **NOMINATION (NOMINATION FORM DA-1):**

Nomination under sec. 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 nominate the following person to whom in the event of my death the amount in the above account, may be returned by Union Bank of India ROHINI SECTOR 22 - DELHI Branch. Nature of Deposit Saving Bank Account No. Name of nominee Title **Full Name** MANOJ SHARMA Relationship with depositor FATHER Age Whether name of the nominee to be printed on Pass Book /Statement of Account/Deposit Receipt Address B-331 Balbir Vihar City/District NEW DELHI DELHI State Country INDIA 110086 Phone No. Mobile No. E-mail ID Date of Birth in case of minor @ @ As the nominee is minor on this date I/We appoint Title **Full Name** to recieve the amount of deposit on behalf of nominee in the event of my/our minor's death during the minority of the nominee. Insurance (Death due to accident) Nomination for Primary Debit Card Name Relation Date of Birth Nomination for Add-on Debit Card Name Relation Date of Birth \*Signature / thumb Impression of **Depositor** Name of Primary Depositor Name of Witness/es Name & Address of Witness 1 Name & Address of Witness 2 Date **Place Signature of Witness1 Signature of Witness2** \*Thumb impression(s) shall be attested by two Witnesses Acknowledgement for Nomination nomination form DA-1 for making nomination from RAJAN in respect of saving bank account. Recieved on \_ Deposit Account No. For Union Bank of India Nomination Registration No.

**Authorised Signatory**