Bank Use Only (* Fields are Mandatory)	Application No.: IND
Customer ID: Account No.:	DCB BANK
001.0-1-1-	Date:
Branch: SUL Code:	Date: D D M M T T T T
	
Instruction for filling Account Opening Form	
Please fill the form preferably in 'BLACK' ink only	Hint boxes give tips and highlight important points across the form Please write your name as it appears in identity proof
Please tick the Specify the addresses	
appropriate boxes with City, State and PI	
	Opening Form for Individuals
I / We hereby apply for bank relationship with your Bank under which	I / we wish to open an account."
Savings	
	Privilege Corporate Payroll (Plus) DCB SmartCash* Fixed Deposit BSBDA
DCB Special Savings Account* DCB WOW Savings Account* For Terms and Conditions, please refer DCB Bank website.	Others
	re Mandatory)
Existing Customer ID: (If applicable)	E-KYC Number:
(Prefix) (First Name)	(Middle Name) (Last Name)
lame:	Maximum 32 characters.
Date of Birth: DDDMMMYYYYY *Gender: Male Status: Minor Sr. Citizen Staff. if yes. Employee No.	Female Third Gender U.S. Person: Yes No
	/isually Impaired Differently Abled
	Other (pl. specify) *Citizenship:
	Please fill FATCA Declaration Form if you
Residence for Tax Purposes:	are U.S.A. or other country citizen/ resident Category: General MBC OBC SC ST Others
Mother's Full Name:	*Mother's Maiden Name:
Father's / Spouse's Full Name:	
Residential Status: Resident Individual Non Resident Indian	Foreign National Person of Indian Origin
	ay Platinum [#] TravelSmart Card Please refer page no. 8 for eligible scheme code. Type of card & cheque book issuance would be based upon the product.
Available only with specific DCB Rupay Platinum Cards with issuance/ annual fee of IN or details please visit www.dcbbank.com	IR 500.
Embossed Name:	Maximum 19 characters. This name would appear on the Debit Card
Permanent Account Number (PAN): f PAN is not available please fill in Form 60	Form 60 *Aadhaar Number: Masked Aadhaar number X X X X X X X X X X
Passport Number:	Expiry Date: D D M M Y Y Y Y Required if Passport or Driving licence provided as Identity / Address proof
Oriving Licence:	Expiry Date: DDMMYYYYY
/oter Identity Card:	MGNREGA Job Card:
NPR (National Population Register)	Tiplak (2) alt
Gross Annual Income (₹): Less than 50K 50K - < 1.5 Lakh 50 Lakh and above	1.5 Lakh - < 3 Lakh - < 5 Lakh 5 Lakh - < 10 Lakh 10 Lakh - < 50 Lakh
	JID (Aadhaar) Voter Identity Card MGNREGA Job Card NPR (National Population Register)
	JID (Aadhaar) Voter Identity Card MGNREGA Job Card NPR (National Population Register)
Communication Address:	
	City: PIN:
Landmark: State: State:	Country:
vitri STD Code)	*Mobile No.: All alerts will be sent to the mobile number and E-mail ID. Mobile number will be used for SMS Banking registration for
Email Id: Same as Communication Address Same as Communication Address	eligible accounts & email statements on monthly basis shall be enabled.
City: PIN: PIN:	*Landmark:
State: Country:	

Joint Applicant 1 (* Fields are Mandatory)	
Existing Customer ID: (If applicable)	E-KYC Number:
(Prefix) (First Name) (Middle	
Name:	Maximum 32 characters.
*Date of Birth: D D M M Y Y Y Y Y *Gender: Male Female	Third Gender U.S. Person: Yes No
*Status: Minor Sr. Citizen Staff, if yes, Employee No.	Differential Differential Abdust
Person with Disability: Yes No If yes, Visually Imp	
Married *Nationality: Indian Other (pl. sp	Places fill EATCA Declaration Form if you
*Country of Birth: *Place of Birth: Category Cat	are 0.5.A. or other country chizen/ resident
*Mother's Full Name:	*Mother's Maiden Name:
*Father's / Spouse's Full Name:	Model 3 Maruel Name.
	n National Person of Indian Origin
*Card: Debit Card required Yes No Optional: Rupay Platinum	TravelSmart Card Please refer page no. 8 for eligible scheme code.
*Available only with specific DCB Rupay Platinum Cards with issuance/ annual fee of INR 500.	PAN Mandatory Type of card & cheque book issuance would be based upon the product.
For details please visit www.dcbbank.com *Embossed Name:	Maximum 19 characters. This name would appear on the Debit Card
*Permanent Account Number (PAN):	*Aadhaar Number: v v v v v v v v v
If PAN is not available please fill in Form 60	Masked Aadhaar number A A A A A A A A A
	Expiry Date: D D M M Y Y Y Y
	MGNREGA Job Card:
	akh - < 3 Lakh
50 Lakh and above	3 Lanii - C 3 Lanii - C 30 Lanii
*Proof of Communication Passport Driving Licence UID (Aadhaar) Voter Identity Card MGNREGA Job Card NPR (National Population Register)
Address: *Proof of Primary Passport Driving Licence UID (Aadhaar) Voter Identity Card MGNREGA Job Card NPR (National Population Register)
Address:	,
Communication Address:	
*Landmark:	City:
Landline No. (with STD Code) *Mobile No	
*Email Id:	Mobile number will be used for SMS Banking registration for eligible accounts & email statements on monthly basis shall be
Primary Address: Same as Communication Address	enabled.
City: PIN:	*Landmark:
State: Country:	
Mode of Operation	
Self Jointly Either or Survivor Former or Survivor Guardia	n Anyone or Survivor Others:
	(Please Specify)
Initial Payment Details	
Payment By: Cheque Cash (To be deposited by the customer at teller counter of	only) Cash Deposited on: D D M M Y Y Y Y Please note: All cheques should be CROSSED and in favour of 'DCB
Cheque No.	Y Drawn on (Bank): Bank Limited' A/c (Your Name)'
Amount ₹: Amount in words:	Debit to DCB Bank A/c No.:
Bank Name:	Branch Name:
Account Number: IFS Code	
Account Type: Savings Current Overdraft Others (please	specify)
Services	
SMS, WhatsApp Banking & Alert Facility:	
be added from time to time.	edits, Standing Instruction failure, balance below Account Quarterly Balance and balance update. New alerts may
Please Note: Authorised signatory/ies of the Firm / Company / Trust / Association / Society are eligibl time.	e for free mobile alert facility subject to compliance of terms and conditions as stipulated by the Bank from time to
I/ We don't wish to link my/our Aadhaar number to this account. [Please Note: Aad	haar number is linked with a DCB Bank account number, if eligible may receive Direct Benefit Transfer (DBT)].
Preferred Language Options: English Hindi Marathi Gujarati	Tamil Telugu Passbook: Yes No
2-Way Sweep Deposit Details: Yes No (please tick appropriate options) Facility required:	Please Note: Reverse Sweep to Fixed Deposit account shall happen only, if the balance in the account exceeds threshold limit and sweep shall happen if the balance in the account goes below the threshold limit. All deposits will be under re-investment scheme with auto renewal facility, this facility may differ from product to
Account Statement: Frequency of statement would be as per the product feature	

Tax Deduction at Source		
TDS to be deducted if applicable: Yes No TDS Exemption submission date: DDMMYYYY	Form 15G / 15H, etc. to be submitted at the	Enclose TDS
If No, TDS Exemption Reference No.	beginning of every financial year and while making fresh deposits during the year.	Certificate for exemption.
Fixed/ Recurring Deposit Details (* Fields are Mandatory)	ONLY simple interest payable for deposits of less than	6 months duration.
Type of Deposit: Fixed Deposit (FD) Tax Saver FD Non-callable FD DCB Pragati Dep	posit (Can only be made in the Primary Applicant's nar	me.)
Declaration of Non-callable FD I/We agree that the non-callable deposit/s cannot be closed by me/us before expiry of the term of such deposit	osit/s.	
Signature of I	Primary Applicant Signature of	Joint Applicant
Frequency: (MIC) (only applicable for FD) Payout (QIC)	nual Interest Simple Interest syout (for deposits less than 6 months)	On Maturity
Amount of Deposit: Please issue Fixed Deposit in the name(s) of		NR 50,000)/ Debit to
Account No. Amount ₹ Amount ₹	(Rupees	only)
Deposit Period: Days Months Years (Minimum 7 days, maximum 10 years for DCB Fixed Deposit		DCB Pragati Deposit)
Funding: Txn. / ID No Date: DDMMYYYYY	Value Date: DDM	
Monthly instalments for DCB Pragati Deposit to be collected through Debit to Account No.	on D C	of every month
Interest Payment Instructions: Transfer to DCB Bank A/c. No.: Payable at	Through NEFT Issue Demar	id Draft
*Maturity Instructions (Tick any one): Auto Renew Principal and Interest Auto Renew Principal and P	Pay Interest Repay Principal and Intere	est
Mode of Operation: Self Either or Survivor Former or Survivor Jointly	Guardian By anyone or Surviv	
*Payment Instructions (upon closure): Transfer to DCB Bank A/c. No.:	If mode	of operation is jointly annot be done.
Issue Demand Draft Payable at	I I I I I I I I I I I I I I I I I I I	armor be done.
Instructions for payment of interest & maturity proceeds through RTGS/ N	NEFT/ Demand Draft	
Mandatory to attach a cancelled cheque or bank statement of the bank account mentioned below Beneficiary's name (As per Beneficiary's bank record - should be same as applicant's name):		available for fixed urity instruction as cipal & Pay Interest"
Bank Name: Branch Name:	IFS Code:	
Account Number: Savings Co	Current Overdraft Others (please specif	y)
Terms and conditions: I/We abide by the following terms and conditions: 1. It is being understood that the remittance is to be sent at my/o whatsoever is to be attached to the Bank for any loss or damages arising or resulting from delay in transmission, delivery or non-delivery of thereof or in deciphering the message for whatsoever cause or from its misinterpretation of when received or the action of the destination Bani being available or failure of internal communication system at the recipient bank/branch or incorrect information provided by me/us or a provided by me/us or any act or event beyond control or from failure to properly identify the person's name. 2. I/We understand that the guidelines governing the same. 3. I/We agree that the credit will be effected solely on the beneficiary account number information and benefit and account number information and benefit and number information and benefit and number information and number	of the message or for any mistake, exchange or error in tr kk or due to RBI (Reserve Bank of India) RTGS/NEFT/Der any incorrect credit accorded by the recipient bank/bran he RTGS/NEFT/Demand Draft request is subject to the	ansmission or delivery mand Draft system not ach due to information
Declaration where Applicant is Minor		
I hereby declare that I am the natural guardian / lawful guardian appointed by the Court order dated DDDMMM	Y Y Y Y (copy enclosed) of	
Master / Miss		Minor's Name
I shall represent the aforesaid minor in operating/opening the bank account till he/she attains majority. I agree to ind claims for any transactions made in the account(s). I hereby declare that the amount withdrawn from this account by m I undertake and confirm that I shall avail various services of the Bank (wherever applicable), such as, Phone Banking, I only for the benefit of the aforesaid minor and I shall abide by all terms and conditions governing the various services ar minor attaining majority	ne, will be used for the benefit of aforesaid minor. Mobile Banking, Internet Banking, Bill Pay, amo	ngst other services
*Customer ID:	Mother / Guardian Signature of Father / M	Mother / Guardian
Nomination Details (Form DA 1)		
	Single & Joint account holders.	
If No, please specify the reason	, and the second	
Signature of Primary		
I/We nominate the following person to whom in the event of my / our / minor's death the amount of the deposit / in Nominee's Name:	the account may be returned by DCB Bank Lin	nited
Relationship with Primary Applicant, if any Age: Years	Date of Dirth.	
Address: Address: Address:		
	PIN:	

* As the no nominee.	minee	is a mi	nor c	on th	is da	ate,	l/ w	e ap	poi	nt to	rec	eive	the a	amo	ount	of t	he c	lepo	osit,	/ in t	the a	acco	unt	on b	eha	alf of	the	non	nine	ee in	the	eve	ent c	of m	y /oı	ur d	eath	n du	ring	theı	minc	rity	of the
Appointe	e's Na	me:																															Date	e of	Birt	h:			М	М	γ ,	y I y	/ Y
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Nomination in respect o In case yo nominee's passbook	f bank of u have name issuec	e speci on the to you	fied pas	a no	mine ok, s	ee a	abo eme	ve, ent 8	plea k DC	se i A is	ndic suec	ate I in r	if yo	u w	ish t	to n	nake acc	e m	enti t an	on d	of th	ie ie		Yes			5 lo																
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I, Mr./Ms																		_ (tl	he D	ecla	aran	ıt - e	the	Bar	nk C	Offici	al o	rcus	stor	ner	of E	Bank) ha	ve re	ead	out	and	lex	olair	ed tl	ne co	onte	nts of
this Accou	ınt Ope	ening F	orm	of D	СВЕ	3an	k Li	imite	ed (t	he E	Bank) to t	he A	pp	icar	ıt(s)	Mr.	/ M	ls																_ in								
language a	and he	/she/	they	hav	e co	nfir	me	d th	at h	e/s	he/	they	, has	s/h	ave	un	ders	too	d th	e sa	ame	and	hav	e ag	ree	d to	ab	de b	у а	ll the	e te	rms	anc	d co	nditi	ions	of	the	said	Acc	oun	t Ор	ening
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Sincerely,																																											
(Signature	of the	Custor	ner)																																								

Customer Information & Due Diligence (CIDD) Form

(To be obtained for Individuals, Entity, Beneficial Owners, Power of Attorney (POA) Holder) A duly filled up CIDD form received from the registered email ID of the customer is acceptable.

- Signature of the customer is not mandatory in this case.
 Form should be duly signed by Bank official.

Information Type		Primary Applicant D	etails	Joint Applicant Details
Customer ID				
Account Number				
Name of Account Holder				
Constitution (whether individual, sole proprietorsh concern, partnership firm, company, etc.)	р			
Nature of Business/ Line of Activity (in detail) (as per the list of occupation code mentioned below				
Country where the individual or entity is base	d			
Country/ies where business associates are located (name the country/ies)				
Expected Annual Turnover (INR)				
Expected number of transactions in a month - Foreign Inward Remittances expected in a - Foreign Outward Remittances expected in a Financial Status (Net Worth in INR)	year Yes Upto ₹ More ti	20		Upto 20
		than ₹2 Crore		More than ₹2 Crore
Details of Source of Funds				
2. Joint Holders/ Partners/ Directors/	Γrustees/ Bene	eficial Qwners/ Authorise	ed Signatories/ POA	A Holder's Information Customer Details
Account Holder's Name	Date of Birt			ationship (in case of Joint Account Holder)*
*If no Close relationship with Joint Account ho	der mention reas	son for opening account with	loint Account Holder	
3. Details of Other Group Account		· -	al Accounts)	
		· -	·	Beneficial Ownership
3. Details of Other Group Account		icable to Non-Individu	·	Beneficial Ownership
3. Details of Other Group Account		icable to Non-Individu	·	Beneficial Ownership
3. Details of Other Group Account Account Holder's Name Signature of the Customer/ Authorised (CIDD for entity must have rubber stamp of the	I Signatory/ Be	cable to Non-Individu Constitution of the state of the s	he Account	Beneficial Ownership
3. Details of Other Group Account Account Holder's Name Signature of the Customer/ Authorised (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin	I Signatory/ Be	cable to Non-Individu Constitution of the con	he Account	
3. Details of Other Group Account Account Holder's Name Signature of the Customer/ Authorise (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners	I Signatory/ Be firm) of the entity a p	cable to Non-Individu Constitution of the con	he Account	
Signature of the Customer/ Authorisee (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position:	I Signatory/ Be firm) g the account	eneficial Owner/ POA ho	he Account	public figure: Yes No
Account Holder's Name Signature of the Customer/ Authorise (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/	I Signatory/ Be firm) g the account	eneficial Owner/ POA ho	he Account	public figure: Yes No
Signature of the Customer/ Authorisee (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position:	I Signatory/ Be firm) of the entity a porthe declared	eneficial Owner/ POA ho	he Account	public figure: Yes No
Signature of the Customer/ Authorisee (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher /	I Signatory/ Be firm) g the account of the entity a part the declared amL risks:	eneficial Owner/ POA holat political/ public figure or re	he Account Ider Elated to a political/ p e with the status/ oc	public figure: Yes No
Signature of the Customer/ Authorises (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher of the signatories is please give position: If yes, please give position:	I Signatory/ Be firm) of the entity a por the declared	eneficial Owner/ POA hont political/ public figure or relational transaction profile is in line	he Account Ider Elated to a political/ p e with the status/ oc	public figure: Yes No
Signature of the Customer/ Authorisee (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher /	I Signatory/ Be firm) of the entity a porthe declared	eneficial Owner/ POA ho	he Account Ider Plated to a political/ p e with the status/ oc	public figure: Yes No ccupation declared: Yes No Yes No
Signature of the Customer/ Authorisee (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher of the yes, please give position: Risk Classification of Account (L / M / H) I confirm that I have carried out proper definitions.	I Signatory/ Be firm) of the entity a porthe declared	eneficial Owner/ POA ho	he Account Ider Plated to a political/ p e with the status/ oc	public figure: Yes No ccupation declared: Yes No Yes No
Account Holder's Name Signature of the Customer/ Authorise (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher of the yes, please give position: Risk Classification of Account (L / M / H) I confirm that I have carried out proper of Details of staff sourcing the account:	I Signatory/ Be firm) of the entity a porthe declared	eneficial Owner/ POA ho	e with the status/ oc	public figure: Yes No ccupation declared: Yes No Yes No
Signature of the Customer/ Authorises (CIDD for entity must have rubber stamp of the To be filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher / If yes, please give position: Risk Classification of Account (L / M / H) I confirm that I have carried out proper details of staff sourcing the account: Name:	I Signatory/ Be firm) g the account of the entity a por the declared ML risks:	eneficial Owner/ POA holat political/ public figure or red transaction profile is in line	he Account Ider elated to a political/ period with the status/ occurrence of the prospect Sign	public figure: Yes No ccupation declared: Yes No Yes No tive customer.
Signature of the Customer/ Authorises (CIDD for entity must have rubber stamp of the Tobe filled-in by the staff sourcin Any of the signatories/ beneficial owners If yes, please give position: Does it seem that the initial deposit and/ If yes, please give position: Are there any other concerns for higher of the there are give position: Risk Classification of Account (L / M / H) I confirm that I have carried out proper of Details of staff sourcing the account: Name: Employee HRMS Number	I Signatory/ Be firm) g the account of the entity a por the declared ML risks:	eneficial Owner/ POA holat political/ public figure or red transaction profile is in line	he Account Ider elated to a political/ period with the status/ occurrence of the prospect Sign	public figure: Yes No ccupation declared: Yes No Yes No tive customer.

List of Occupation Code:

REF. CODE	REF. DESC	REF. CODE	REF. DESC
0001	SALARIED	0022	NGO
0002	HOUSEWIFE	0023	STOCKBROKER / BROKING COMPANIES
0003	STUDENT	0024	INFRASTRUCTURES DEVELOPMENT
0004	RETIRED / PENSIONER	0025	OIL & GAS
0005	AGRICULTURIST	0026	HARDWARE & SOFTWARE COMPANIES
0008	POLITICIAN / PEPS	0027	MINING & QUARRYING
0009	AGRI-ALLIED ACTIVITIES	0028	DEALER IN COMMODITIES
0010	FINANCIAL SERVICES /INVESMENT SERV/ MUTUAL FUND	0029	DEALING OF PHARMACEUTICAL / DRUGS OR CHEMICALS
0011	BUILDERS AND REAL ESTATE	0030	EDUCATIONAL INSTITUTIONS
0012	IMPORTERS / EXPORTERS	0031	HOTELS & RESTAURANTS
0013	SERVICE SECTOR - (CONTRACTORS, TRANSPORT OPR ETC)	0032	DEALING IN FMCG ITEMS (FAST-MOVING CONSUMER GOODS)
0014	SELF EMPLOYED - PROFESSIONAL	0033	MFG/ DEALER OF TEXTILE, LEATHER PROD & EQUIPMENTS
0015	SELF EMPLOYED - NON-PROFESSIONAL / TRADERS	0034	METALS RELATED
0016	JEWELLER / BULLION TRADER	0035	FISHERIES / POULTRY
0017	MANUFACTURING / DEALER OF FOOD PRODUCTS/ BEVERAGES	0036	MEDCINE AND HEALTHCARE
0018	PUBLIC UTILITIES AND SERVICES	0037	REAL ESTATE
0019	ARMS/WEAPONS/ANTIQUES-DEALER/MANUFACTURER	0038	OTHER MANUFACTURING/ENGINEERING
0020	GOVERNMENT/SEMI-GOVERNMENT/LOCAL BODIES	0039	SEAFARER
0021	OTHERS		

Signatures and Photographs

photograph

Sign across the photo

Primary Applicant Thumb Impression or Signature | Please affix a recent

Joint Applicant Thumb Impression or Signature Please affix a recent photograph Sign across the photo

Please sign in "Black/ Blue Ink" within the box. "Signature shall be considered for all Cheque clearances and any future communication with the Bank"

> Approved by BM / BSOM (Name, signature with HRMS Number) with seal *Incase of Thumb Impression, "Sign in BM/BSOM presence"

Declaration

I/ We have read, understood and hereby agree to the "Terms and Conditions as applicable to my/ our account" set forth on DCB Bank Limited ("DCB Bank") website at www.dcbbank.com. I/ We understand, agree and confirm that, I/we will access DCB Bank's website at www.dcbbank.com for any changes/updates in terms and conditions available inside the kit which was applicable at the time of creation of the kit may vary from time to time without notice as per DCB Bank's sole discretion and for the updated terms and conditions applicable to me/ us as per account/ scheme/ product types, I/we shall access and refer to DCB Bank's website at www.dcbbank.com and such revised terms and conditions shall override the earlier terms and conditions applicable to this relationship shall be available on the Bank's website only. I/We and cree whereby declare that information furnished in this Form is true and correct to the best of my/our knowledge and belief. I/We hereby authorize issuance of ATM. Debit Card and provision of Statement, Email Statement, Phone Banking, Mobile Banking Services, Internet Banking as requested in the form. I/We am/ are aware of charges applicable for various services offered and I/We affirm, confirm and undertake that I/We heave read and understood the "Terms and Conditions" for usage of the Phone Banking, Mobile Banking Services, Internet Banking of DCB Bank as set forth in the Bank's website www.dcbbank.com and I/We will adhere to all the terms and conditions as applicable for various services of the Bank's website only. We will adhere to all the terms and conditions as applicable for waitories and services and facilities. I/We and are admining making, Mobile Banking Services, Internet Banking of DCB Bank as set forth in the Bank's website www.dcbbank.com and I/We will adhere to all the terms and conditions as applicable from time to time. I/We auderstand and agree that the consent given and services are the terms and conditions available/set forth on the Website for these banking services and facilities. I/ We have read, understood and hereby agree to the "Terms and Conditions as applicable to my/ our account" set forth on DCB Bank Limited ("DCB Bank") website at www.dcbbank.com. I/ We understand, agree and confirm

1/We declare, confirm, understand, accept, acknowledge and agree:

(a) That all the particulars and information given in this application form (and all documents referred or provided therewith) are true, correct, complete and up-to-date in all respects and I/We have not withheld any information. I/We understand certain particulars given by me/us are required by the operational guidelines governing banking companies. I/We agree and undertake to provide any further information as and when the Bank may require. (b) That (a) That all the particulars and information given in this application form (and all documents referred or provided therewith) are true, correct, complete and up-to-date in all respects and I/We have not withheld any information. I/We have had no insolvency proceedings initiated against me / us nor I / we have ever been adjudicated insolvent. (c) That I / we have read the application form and brochures and am aware of all the terms and conditions availing finance or service or products from the Bank. (d) That the Bank reserves the right to retain the application form, and the documents provided therewith, including photographs, and shall not return the same to me / us. (e) To inform the Bank kind when the Bank may require from time to time. (f) That if the Account is under corporate salary scheme: I/We have also read and understand that the Bank reserves the right to retain the application forms, and the documents provided therewith, including photographs, and shall not return the same to me / us. (e) To inform the Bank regarding change in my residence /employment and to provide any further information as and when the Bank may require from time to time. (f) That if the Account is under corporate salary scheme: I/We have also see and understood "Terms and Conditions" under which Salary Scheme is offered to my / our organization and employees. I/We agree that my/ our employer has full right to reserve any instruction given by them to credit my account in on my our employment with my/ our care understood "Terms and Conditions" understood "Terms and Conditions" understood "Terms and Conditions" understood "Terms and Conditions" on the my our account in the provide star account and the time my/ our account in the provide star account under corporate salary scheme. I/We understand that the Bank reserves the right to convert my/ our account into a require savings bank account. (g) That I/we understand that the Bank reserves the right to convert my/ our account into a require savings bank account. (g) That I/we underst

We understand that Savings Bank account cannot be used for business transactions and if it is observed that the account is being used for business purpose or does not match with my / our profile, such as, declared turnover, occupation, etc., the Bank shall close the account after sending due intimation to me / us. I/We confirm that any change in my / our profile, such as, turnover, occupation, or demographic information, etc., I/we shall inform the Bank immediately in writing. I/We understand that the onus for such an action is on me/ us and not on the Bank.

I/We understand that the Bank is relying on this information for the purpose of determining the status of the applicant named above in compliance with FATCA (Foreign Account Tax Compliance Act) / CRS (Common Reporting Standards)

The Bank is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions.

The Bank is not able to offer any tax advice on CRS or FATCA or its impact on the applicant. I/we shall seek advice from professional tax advisor for any tax questions I/We agree to submit a new form within 30 days if any information or certification on this form becomes incorrect.

We agree that as may be required by domestic regulators/tax authorities the Bank may also be required to report, reportable details to CBDT (Central Board of Direct Taxes) or close or suspend my/our account.

I/We confirm that, I/We will intimate / notify in writing to the Bank and update operating instructions and / or any other change(s) on Bank's record immediately in the event of any change in the operating instructions and/or any other change(s) with respect to the account/s held with the Bank.

I/We hereby agree and authorize Bank to mark freeze to my account if I/We fail to submit the updated / refresh KYC documents as per Bank's KYC policy and/or operating instructions for my / our account periodically

I/We certify that I/we provide the information on this form and to the best of my/our knowledge and belief the certification is true, correct, and complete including the taxpayer identification number of the applicant.

I agree that my personal Know Your Customer (KYC) information may be shared with Central KYC (CKYC) registry or any other competent authority. I hereby give consent to receive information from the Bank / CKYC registry / the Government / Reserve Bank of India or any authority through SMS / email on my registered mobile number / email address. I also agree that non receipt of any such SMS / email shall not make the Bank liable for any nature of loss or damage.

If the have read and understood that all signatories to the deposit must sign the premature closure instructions and the same shall be governed by RBI guidelines. For premature closure of a deposit, the interest rate (applicable rate) prevailing on the date of the deposit, for the period the deposit has remained with the Bank,

shall be payable, subject to TDS, as applicable.

Premature closure of DCB Tax Saver Deposit will be subject to application of the prescribed conditions.

Premature closure of non-callable deposits is not allowed.

Premature closure of a deposit may be additionally subject to penal interest, deductible from the applicable rate, as prescribed by the Bank on the date of deposit

Penal Interest for Premature	Closure of INR Fixed Deposit
Deposit Amount	Penal Interest
Less than INR 3 Crore	0.50%
INR 3 Crore and above	2.00%

No interest is payable on Deposits of less than INR 3 Crore if closed before completion of 14 days. No interest is payable on Deposits of INR 3 Crore and above if closed before completion of 30 days

- DCB SmartCash Savings Account Terms and Conditions:

 1. The eligible DCB Bank Debit Card holders can avail of attractive cash back facility on the usage of Debit Card at POS/e-commerce (online) sites only.
- All payments must be settled using the DCB Debit Card which is issued to the customer after opening DCB SmartCash Savings Account.
- 3. In case of any dispute, the decision of the Bank shall be final. The jurisdiction for resolution of any dispute shall be Mumbai, India.
- Unless otherwise specified, standard terms and conditions of the Bank will be applicable.

 The cash back benefit will be available only on new accounts opened in the specific new scheme after 22nd May 2023.
- Cash back is available to existing account holders also who request for transfer of their account(s) from any other Savings Account scheme to the new scheme.
- Minimum average balance to be maintained in a quarter for cash back is INR 50,000
- Minimum transaction amount will be INR 500.

 Cash back for a particular month will be credited to customer's account in the first month of the following 8. 9. quarter.
- Any cancelled transaction on POS/e-commerce will not be eligible for cash back. 10 The maximum cash back amount allowed per month is INR 800 and per year is INR 9,600.
- 12. Please refer table below for cash back pay out calculation:

Average balance in a quarter	Minimum	Maximum number of transactions	Cash back per transaction	Maximum cash back	Maximum cash back
to avail cash back (INR)	per transaction amount (INR)	eligible for cash back per month	(INR)	allowed per month (INR)	allowed per financial year (INR)
50,000	500	2	100	200	2,400
1,00,000	500	4	100	400	4,800
1,50,000	500	6	100	600	7,200
2 00 000	500	8	100	800	9 600

- DCB Happy Savings Account Terms and Conditions:

 1. Eligible DCB Happy Savings Account customers can avail the cashback on all UPI debit and credit transactions.
- In case of any dispute, the decision of the Bank shall be final. The jurisdiction for resolution of any dispute shall be Mumbai, India.
 Unless otherwise specified, standard terms and conditions of the Bank will be applicable
- The cash back benefit will be available only on new accounts opened under the specific scheme, DCB Happy Savings Account, starting 18th October, 2023. The Bank reserves the right to withdraw the cashback benefit at its sole discretion by giving one month's notice on its website. Cash back is available to
- cashback benefit at its sole discretion by giving one month's notice on its website. Cash back is available to existing account holders also who request for transfer of their account(s) from any other Savings Account scheme to the new scheme.
- Cashback benefit starts at INR 25,000 average balance in a quarter.
- 6.
- Minimum transaction amount for cashback is INR 500.

 The maximum cashback amount allowed per month is INR 625 and per year is INR 7,500.
- 8. Cashback for a particular quarter will be credited to customer's account in the first month of the Flease refer table below for cash back pay out calculation.

Average account balance	Min transaction amount	Maximum eligible UPI	Cashback	Max Cashback allowed
in a quarter (INR)	for cashback eligibility (INR)	transactions per month	per transaction (INR)	per month (INR)
25,000		5	10	50
50, 000	500	10	15	150
1,00,000		15	20	300
2,00,000		25	25	625

- 10. Any purchase made through UPI which is subsequently cancelled will not be eligible for cashback.
- The Bank reserves the right to withdraw the cashback benefit at its sole discretion by giving one month's notice on its website

DCB Special Programme and DCB Special Savings Account - Terms and Conditions

- By opening a DCB Special Savings Account, the primary account holder consents for being enrolled for the DCB Special Programme.

 To be eligible for the DCB Special Programme, the primary account holder is required to maintain a Total Relationship Value (TRV) of INR 5 Lakh with DCB Bank. TRV is the total amount of average balance held by account holder (as primary holder) across Savings Accounts, Current Accounts and Term Deposits.
- In case an average TRV of INR 5 Lakh is not maintained by the primary account holder, account maintenance charges will apply on the primary account holder's Savings Accounts and Current Accounts as per the respective schemes. The charges for non-maintenance of Average Quarterly Balance/Monthly Average Balance for respective Savings/ Current account schemes are available in our website https://www.dcbbank.com.
- DCB Special Savings Account customers can avail cash back on UPI debit and credit transactions as per the explanation in the table in point 10.
- The cash back benefit will be available only on new accounts opened under the specific scheme, DCB Special Savings Account, starting 1st October, 2024.
- Cash back will be available to existing account holders also, if they request for transfer of their account(s) from any other Savings Account scheme to the new scheme.

 Cash back benefit starts at INR 25,000 average account balance in a quarter.
- 8. Minimum transaction amount for cash back is INR 250. Any purchase made through UPI, if subsequently
- cancelled, will not be eligible for cash back.
 The maximum cash back amount allowed per month is INR 1,375 and per year is INR 16,500
- 10. Cash back for a particular quarter will be credited to customer's account in the first month of the following guarter

Please refer table below for cash back pay out calculation:

Average account balance in a quarter (INR)	Minimum transaction amount for cash back eligibility (INR)	Maximum eligible UPI transactions per month	Cash back per transaction (INR)	Maximum cash back allowed per month (INR)	Maximum cash back allowed per year (INR)	The cash back as a percentage of account balance (%)	Savings Bank account interest rate (%)	Total rate (%)
25,000		5	10	50	600	2.40%	1.75%	4.15%
50,000		10	15	150	1,800	3.60%	1.75%	5.35%
1,00,000	250	15	20	300	3,600	3.60%	1.75%	5.35%
2,00,000		25	25	625	7,500	3.75%	2.38%	6.13%
3,00,000		25	35	875	10,500	3.50%	2.58%	6.08%
5,00,000		25	55	1,375	16,500	3.30%	2.75%	6.05%

- In case of any dispute, the decision of DCB Bank shall be final. The jurisdiction for resolution of any dispute shall be Mumbai, India.
- 12. DCB Bank reserves the right to withdraw the benefits at its sole discretion by giving one month's notice on its website.
- DCB Bank reserves the right to discontinue account holders from the DCB Special Programme in the event average TRV of INR 5 Lakh is not maintained.
 Unless otherwise specified, all other standard terms and conditions of DCB Bank will be applicable.

DCB WOW Savings Account - Terms and Conditions

- B WOW Savings Account Terms and Conditions

 Primary account holder should be 18+ year of age resident Indian individual female mandatorily.

 Minor account with zero Average Quarterly Balance (AQB) and zero Account Opening Amount (AOA) can be opened only after receiving the specific request from primary holder of DCB WOW Savings Account. Primary holder of DCB WOW must be the secondary holder (as guardian) in the minor acount mandatorily. Minor can be between age between 1 day to less than 14 years at the time of applying. Once minor attains 14 years of age, this account will get marked as total freeze and should be converted to normal (choice of Savings Account; Savings Account) are mandatorily. Debit Card can be applied by the guardian only to operate the account. All rules of minor account will be applied.
- The charges for non-maintenance of Average Quarterly Balance/ Monthly Average Balance for respective savings account schemes is available on our website https://www.dcbbank.com
- DCB WOW Savings Account customers can avail cash back on UPI debit and credit transactions as per the Please refer table below for cash back pay out calculation:
- explanation given in the table below (refer point 10).
- The cash back benefit will be available only on new accounts opened under the specific scheme code, DCB WOW Savings Account, starting 11th January, 2025.

 Cash back will be available to existing account holders also, if they request for transfer of their account(s) from any other Savings Account scheme to the new scheme code i.e. DCB WOW. 5.
- Cash back benefit starts at INR 25,000 average account balance in the guarter
- Minimum transaction amount for cash back is INR 250. Any purchase made through UPI, if subsequently cancelled, will not be eligible for cash back calculations.

 The maximum cash back amount allowed per month is INR 1,375 i.e., INR 16,500 per year.
- 10.
- Cash back for a particular quarter will be credited to customer's account in the first month of the following

Average account balance	Minimum transaction amount	Maximum eligible UPI transactions	Cashback per transaction	Max Cashback allowed	Max Cashback allowed
in a quarter (INR)	for cashback eligibility (INR)	per month	(INR)	per month (INR)	per year (INR)
25,000		5	10	50	600
50, 000		10	15	150	1,800
1,00,000	250	15	20	300	3,600
2,00,000		25	25	625	7,500
3,00,000		25	35	875	10,500
5,00,000		25	55	1,375	16,500

- 11. In case of any dispute, the decision of DCB Bank shall be final. The jurisdiction for resolution of any dispute shall be Mumbai, India.
- DCB Bank reserves the right to withdraw the benefits at its sole discretion by giving one month's notice on its website.
- 13. Unless otherwise specified, all other standard terms and conditions of DCB Bank will be applicable

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DCB Bank Limited

Savings Bank Terms and Conditions:

- An Individual can open Savings Bank account upon fulfilling account opening requirements, furnishing proof of identity, address and any other requirements as defined by DCB Bank (Bank/the Bank).
- Opening of Savings Bank account is subject to extant Know Your Customer (KYC) guidelines as prescribed by Reserve Bank of India
- Sayings Bank account cannot be opened for business or trade purposes even in the name of individuals. The Bank reserves the right to freeze operations and/or close the account in the event the Savings Bank account is used for business purposes as evidenced by transactions
- Interest on deposit in Savings Bank account will be calculated daily, based on end of day clear balance in the account and will be credited to the account at quarterly interval.
- Average Quarterly Balance (AQB) is the summation of end of day balances for the period (quarter)/ number of days of the said period (quarter). Refer to Schedule of Benefits and Fees (SBF) on the Bank's website www.dcbbank.com for details on non-maintenance charges.
- Nomination facility is available for all types of individual deposit accounts and customers are advised to avail this facility. Nomination can be made in favour of only one nominee. In case the person does not wish to make a nomination, the fact should be
- recorded on the account opening form.

 Savings Bank account in name of minor (below 18 years of age), can be opened and operated by the natural and / or court appointed guardian. On attainment of majority (18 years of age), intimation shall be sent to the erstwhile minor for submission of the KYC documents to be updated on record and for all operational purposes
- Bank customers can avail the facility of cash withdrawal through cash withdrawal slip, as per the limit prescribed by Bank from time to time, by visiting the Bank branch in person.

- Bank provides SMS/email alert facility to customers for all transactions done on usage of debit cards and online/ digital
- The Bank provides passbook facility for Savings Bank account. The account holder should carefully examine the entries and draw
- the Bank's attention to any discrepancy, if any, within 30 days of the most recent entry.

 As per prevailing RBI guidelines, accounts which have not been operated for a period of two years are classified as Dormant. To activate the account, customers are requested to submit request in writing by visiting the nearest branch along with valid KYC documents. There are no charges on activation of such accounts.
- Customers have the option to transfer account from one to branch to another. The request can be submitted to the branch and there are no charges applicable for it.
- Request for closure of account should be signed by all account holders and should state the reason for closure. There are no charges for closure intimation given within a period up to 14 (fourteen) days from the date of first credit into the account, post which charges as applicable are specified in SBF
- The Bank reserves the right to close any account which is not operated satisfactorily/dormant with prior notice.

 Bank deposits upto INR 500,000/- (Rupees Five Lakh) in respect of each depositor are fully protected by the Deposit Insurance and Credit Guarantee Corporation (DICGC) under the deposit insurance scheme. For details on the deposit insurance provided DICGC, please visit/ log on to www.dicgc.org.in.
- by opening Savings Bank account, one hereby agrees to the acceptance of Terms & Conditions (T&C) guiding related products and services, as well as the fact of being informed about various services charges applicable. For details related to applicable service charges, please refer to Schedule of Benefit and Fees on the Bank's website www.dcbbank.com.
- The Bank has a defined grievance redressal mechanism for addressing customer grievance. Please refer to Bank's website vw.dcbbank.com for details

Aadhaar Consent:

- I/We have voluntarily submitted my/our Aadhaar/UID Number mentioned above and consent to:

 Seed my/our Aadhaar/UID Number issued by UIDAI, Government of India in my/our name with my/our aforesaid account.
- Map it at NPCI (National Payments Corporation of India) to enable me/us to receive Direct Benefit Transfer (DBT) from Government of India in my/our above mentioned account. I/We understand that if more than one Benefit Transfer is due to me/us, I/we will receive all Benefit Transfers in this account. Use my/our Aadhaar details to authenticate me/us from UIDAI.

- Use my/our Aadhaar details to authenticate me/us from UIDAI.
 Use my/our mobile number mentioned in my/our account for sending SMS alerts to me/us
 Consent for Authentication: I/We, the holder of the above stated Aadhaar number, hereby give my/our consent to the Bank to obtain my/our Aadhaar number, Name and Fingerprint/Iris for authentication with UIDAI. The Bank has informed me/us that my/our identity information would only be used for demographic authentication/ validation/ e- KYC purpose and also informed that my/our biometrics will not be stored/ shared and will be submitted to CIDR (Central Identities Data Repository) only for the purpose of authentication.
 I/We have been given to understand that my/our information submitted to the Bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.

Customer ID Merger: I/We understand and agree that all my/our Accounts will now be consolidated under a single DCB Bank Customer ID after merging the multiple Customer IDs. Post such merging, only one Customer ID will remain active. I/We, am/are aware that DCB Bank Personal Internet Banking, or DCB Bank Business Internet Banking, if availed, will now be accessible only under the retained Customer ID and all the Accounts will be consolidated to this Customer ID. I/We am/are aware that Tax Deducted at Source (TDS) on interest earned on DCB Bank Fixed Deposit Account(s) under erstwhile Customer IDs will also stand consolidated and TDS shall now be applicable on the basis of the unique Customer ID in accordance with the provisions of the Income Tax Act, 1961 and the Bank will furnish one TDS Certificate for all my/our Accounts.

I/We confirm that all the details provided are correct and I/We agree to the terms and conditions of the Bank. I/We also understand that all my/our accounts can be accessed from the unique Customer ID post consolidation of multiple Customer ID's if any.

(I) I/we hereb	avings Bank Deposit Account (BSBDA): by confirm that I/we do not hold BSBD account in any other l						
BSBD acc	ertake to close the existing savings bank account in the B count. re aware that I/we will not be eligible to open any other savir	•		Signat	ture of Primary Applicant	Signature of Join	t Applicant
Confi	rmation (For Office Use Only) "I conf	irm having m	et the Applicant/s	in person."			
I confirm h	aving met Mr. / Ms.				,	in person at D	CB Bank Limited,
			· —		nd hereby confirm the identity and address	s as provided in this	account opening
	so confirm having verified the copy of the docum rm that the form has been signed by the applica		, 0		* ''	by calling the no	mentioned in this
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	the customer wish to bank with DCB Bank?						
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						Signature of B	ank Official
Indica	ative List of Documents that ca	ın be prov	ided to oper	ı a Bank	Account		
Description	on of Document Can be obtained for						
Identity:	Passport Voter's Identity Card	Driving L	_icense Job	Card issued	by MGNREGA duly signed by Officer of	the State Government	ent
	Proof of Possession of Aadhaar Number		Let	ter issued by	National Population Register containing	details of name and	d address
Address	Passport Voter's Identity Card	Driving L	_icense Job	Card issued	d by MGNREGA duly signed by Officer of	the State Governm	ent
	Proof of Possession of Aadhaar Number		Let	ter issued by	National Population Register containing	details of name and	d address
	Utility bills – Electricity, Telephone, Water I	Bill, Piped Ga	s, Postpaid Mobile (not more tha	ın 2 months old), Property or Municipal Ta	x receipts, Pension	or Family Pension
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Please Not	period of 3 months of submitting these doc te: Customer must sign the Account Opening F	,	the presence of Rai	nk officials			
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Scheme	Scheme Type	Rupay Platinum*	Travel Smart Card [#]	Scheme	Scheme Type	Rupay Platinum*	Travel Smart Card [#]
SB102	DCB Premium Savings Account	Yes	Yes	SB122	DCB Golden Savings Account	Yes	Yes
SB106	DCB Bank Staff Savings Account	Yes	Yes	SB124	DCB Elite Savings Account	Yes	Yes
SB110	DCB Junior Saver Account	Yes	Yes	SB125	DCB SmartCash Savings Account	Yes	Yes
SB111	DCB SB Classic	Yes	Yes	SB147	DCB Happy Savings Account	Yes	Yes
SB115	DCB Privilege HNI Savings Account	Yes	Yes	SB149	DCB Special Savings Account	Yes	No
SB118	DCB Corporate Payroll Account (Plus)	Yes	Yes	SB150	DCB WOW Savings Account	Yes	No
SB119	DCB Student Savings Account	Yes	Yes	SB151	DCB Minor Savings Account	Yes	Yes
	ce fees and annual fees, please refer www.dcb rms and Conditions and list of available Airport		www.dobbook.com		(linked to DCB WOW)		
	erms and conditions on www.dcbbank.com bef						
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Nomination	Form Received: Yes No	Ack	nowledgem	ent	Please provide this number for future referen	DCI	B BANK
1st Applica	nt's Name:						
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Joint Applic	cant 2:						
	e Nominee:						
Name of th							

Branch:

Signature of Bank Official

Date: DDMMYYYY

Employee code: