

ACCOUNT OPENING FORM

FEDERAL BANK

YOUR PERFECT BANKING PARTNER

Token ID : 437648	For Office use only
DSA ID :	A/c No. :
Account Type : SB FREEDOM	Branch : OTTAPPALAM
Currency :	Scheme of Account :
Mode of operation : SINGLE	Date : 06/10/2018
Nomination Opted : YES	Customer ID 1 : Customer ID 2 :

APPLICANT 1

Full Name	SREERAG R NANDAN			Photo
Father's Name	RAGHUNANDAN I G			
Mother's Name	SUNEETHI C			
Marital Status	SINGLE			
Name Of Spouse				
Date Of Birth	05-05-1999			
Gender	MALE			
Senior Citizen	NO			
Communication Address		Permanent Address		
PADINJARE ITTAMVEETIL AMBALAPARE-II, CHUNANGAD PALAKKAD KERALA		PADINJARE ITTAMVEETIL AMBALAPARE-II, CHUNANGAD 679511		
Land Mark	NEAR CHATANKANDAR KAVU			
Mobile No	+917034274990		Contact No	
Email	sreeragraghunandan@gmail.com		Occupation	STUDENT
Religion	Category	Qualification	Asset Owned	Investments
HINDU	GENERAL	SCHOOL		
Employers Name			Office Phone No	
Employer Type	Job Position	Monthly Income	Profession	
Address Proof	DRIVING LICENSE	Document Number	C 1338411	
ID Proof	DRIVING LICENSE	Document Number	C 1338411	

JOINT ACCOUNT HOLDER

Full Name				Photo
Father's Name				
Mother's Name				
Marital Status				
Name Of Spouse				
Date Of Birth				
Gender				
Senior Citizen				
Communication Address		Permanent Address		
Mobile No			Contact No	
Email			Occupation	
Religion	Category	Qualification	Asset Owned	Investments
Employers Name			Office Phone No	
Employer Type	Job Position	Monthly Income	Profession	
Address Proof		Document Number		
ID Proof		Document Number		

ACCOUNT ACTIVITY

Purpose of Opening the Account	Source of Fund	Expected Monthly Remittance	Expected Monthly Withdrawals
SAVINGS	SALARY	RS 10,000- 50,000	RS 10,000- 50,000

CHANNEL FACILITY

ATM Card	YES	Name on the Card	SREERAG R NANDAN
Mobile Alert	YES	Mobile Number	7034274990
Cheque Book	YES		
Email Alert	NO	Email ID	
Fed Net	YES	Facility	VIEW AND TRANSACTION
Preferred Username	1999	1972	1994

Declaration :

For Accounts in the name of Minors: I hereby certify that was born on and attains majority on and I am the natural guardian/legal guardian appointed by the court order dated Name of the guardian Relationship with Minor

Nature of Account Account No

For Politically Exposed Persons:

I am a Politically Exposed Person who performs important functions for the State in the capacity as Senior Official of Govt. or Political Parties etc. closely related to Politically Exposed Persons by name

Positions held	Name of the Party/Organisation	Designation	Period of Office
Political party			
Government Organisation			

1. I/ We hereby undertake :

(A) To inform the bank immediately on my/our coming back to India for permanent settlement/residence.(B) To inform the bank immediately on any change occurring in my business/office/communication address/other contact details. (C) In respect of NRO/ NRE A/C s, all the debits and credits will be carried out strictly as per FEMA regulations.

(D) To pay any overdraft created in my/our account inadvertently together with applicable interest and without demur. (E) To inform the bank of the wrong credits in my/our account, pertaining to other customers and refund the same together with applicable interest and without demur.

2. I/We understand that :

(A) The above account will be opened on the basis of the statements/declarations made by me/us and I /we also agree that if any of the statements/declarations made herein is found to be not correct in material particulars you are not bound to pay any interest on the same made by me/us. (B) In the event of my NRI status is changed in future, my /our existing NRI account will be re-designated to Resident/RFC account(s) (as applicable). (C) Rate of interest applicable, premature withdrawal of the deposit, premature termination of the deposit in the event of death of the depositors and filing/ renewal / cancellation of the nomination will be as per /RBI/IBA/ Bank's rules in force from time to time.(D) I/We will not make available to any person resident in India any foreign exchange against reimbursement in India in Rupees or otherwise. I/We hereby undertake to inform the Bank immediately on my/our coming back to India for permanent settlement /residence. 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 anyone 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. Unless and until modified or cancelled 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. If by error overdraft is created in my account, I undertake to pay the same with applicable rates of interests. If by mistake, the bank credits cash/cheques pertaining to other customers to my account(s),I undertake to inform the bank of the same and refund the same with interest and without any demur. (E) Term Deposits will be automatically renewed on maturity for a similar Term at the rate of interest prevailing on the maturity date on same terms and conditions unless instructed by me/us to the contrary or credit to my/our SB A/c No..... on maturity on receipt of FD receipt duly discharged by me/us /facility for partial withdrawal in units/automatic loan facility. (F) I have read and understood the rules governing internet banking services and agree to abide by the same. (G) I hereby declare that the above details are correct. (H) I wish to avail the add on facility /facilities as selected above in my account . (I) I declare that I am aware of the Bank's rules and terms and conditions governed on the above mentioned channel services. (J) I/We hereby unconditionally authorize the Bank to activate the cheques issued to me/us in the account forthwith without insisting for my/our written/oral acknowledgment of having received the cheque book. I/We shall not hold the Bank liable/responsible in any manner for any consequence(s) of whatsoever nature arising from activating the cheque book facility as per this authorisation.

		Date :	
1st Applicant's Signature		2nd Applicant's Signature	
Place :			
Address Proof ____	KYC Norms complied with	Customer Risk Rating	Clerk Asst. Manager Principal Officer
ID Proof ____	Yes ___ No ___	Low ____	
Photos ____	Signature of introducer verified	Medium ____	
PAN Card ____	Yes ___ No ___	High ____	

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 SREERAG R NANDAN , PADINJARE ITTAMVEETIL,AMBALAPARE-II ,, CHUNANGAD,,679511

nominate the following person to whom in the event of my/our/minor's death the amount of the deposit, particulars whereof are given below, may be returned by
The Federal Bank Ltd., Branch Ottappalam

Deposit			Nominee				
Nature of Deposit	Distinguishing No.	Additional Details , If Any	Name	Address	Relationship with depositor , if any	Age	If nominee is a minor , Date Of Birth
			SUNEETHI C	PADINJARE ITTAMVEETIL, AMBALAPARE-II ,, CHUNANGAD, PALAKKAD, KERALA, 679511	MOTHER	45	

As the nominee is a minor on this date I/we appoint Shri/Smt/Kum

(name, address, age)

to recieve the amount of deposit on behalf of the nominee in the event of my.our.minor/s death during minority of the nominee

Place : CHUNANGAD

Date : 06/10/2018

Name(s), signature(s), address(es) of witness(es)@

* Signature(s)/Thumb impression(s) of depositor(s)

Note: * Where deposit is made in the name of the minor, the nomination should be signed by a personlawfully entitled to act on the behalf of the minor & strike out when the nominee is not a minor .

@ Thumb impression(s) should be attested by two witness(es)

THE FEDERAL BANK LTD

Regd.Office: Aluva, Kerala.

Branch: Ottappalam

Date : __ __ 20__

Shri./Smt./M/s._____

Dear Sir/Madam,

Reg: Nomination in respect of your Deposit Account No. _____ with us.

Ref: Your application form in C.700 DA1/Letter No. _____ Dated __ __ __

We acknowledge receipt of your letter of nomination dated __ __ 20__ authorizing Shri./Smt._____ to receive the amount of the aforesaid deposit kept in A/C.No _____with us/to receive the articles in safe Custody as per our safe Custody Receipt No. _____/to receive the articles kept in Safe Custody Locker No. _____with us.

Yours faithfully

MANAGER