



# THE BHUJ MERCANTILE CO-OP. BANK LTD.

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## SAVINGS/FIXED DEPOSIT/RECURING DEPOSIT ACCOUNT OPENING FORM

Branch		Date	D	D	M	M	Y	Y	Y	Y
Customer ID		Account No.								

I/We request you to open my/our account with your branch / bank. Tick (✓) relevant Type Account

Type of Account : ☐ Savings ☐ Recurring ☐ Term Deposit ☐ Fixed Term Deposit

FULL NAME IN CAPITAL LETTERS

First Name	Middle Name	Last Name	DATE OF BIRTH	M/F/T
1. _____	_____	_____	D D M M Y Y Y Y	
2. _____	_____	_____	D D M M Y Y Y Y	
3. _____	_____	_____	D D M M Y Y Y Y	

☐ Minor ☐ Sr. Citizen ☐ Super Sr. Citizen ☐ Staff ☐ Ex. Staff ☐ Other / General

Name of The Guardian (In Case of Minor) \_\_\_\_\_

### Address

Permanent Address	Phone No.
_____	(R) _____
_____	(O) _____
_____	(M) _____
E-mail	Pin
_____	_____

Correspondence Address	Same as above : <input type="checkbox"/>	Phone No.
_____		(R) _____
_____		(O) _____
_____		(M) _____
_____	Pin	

Name of Account

Name 1	Name 2	Name 3	MODE OF OPERATION
Please affix your latest passport size Photograph here	Please affix your latest passport size Photograph here	Please affix your latest passport size Photograph here	<input type="checkbox"/> Self
			<input type="checkbox"/> Either or Survivor
			<input type="checkbox"/> Jointly
			<input type="checkbox"/> Former or Survivor
			<input type="checkbox"/> Any one or Survivor/s
			<input type="checkbox"/> Guardian
			<input type="checkbox"/> Other (Pl. Specify)
Signature	Signature	Signature	_____

CIF ID1 \_\_\_\_\_ CIF ID2 \_\_\_\_\_ CIF ID3 \_\_\_\_\_

## IN CASE OF FIXED DEPOSIT

☐ Fixed Deposit ☐ Cumulative Deposit ☐ Recurring Deposit

Amount \_\_\_\_\_ Tenure \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days.

Payment of Interest amount ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ On Maturity

☐ By Transfer to my/our account No. \_\_\_\_\_ with BMLB Bank \_\_\_\_\_ Branch.

☐ By ECS Bank \_\_\_\_\_ Branch \_\_\_\_\_ IFSC Code \_\_\_\_\_

MICR Code \_\_\_\_\_ Account No. \_\_\_\_\_

I/We authorised BMLB Bank to set standing instruction on my/our A/c No. \_\_\_\_\_ for RD A/c.

## IN CASE OF MINOR

I \_\_\_\_\_ hereby declare that the date of birth of minor, is           who is my \_\_\_\_\_ and I am his/her natural and lawful guardian / guardian appointed by court order, dated         (copy enclosed). I shall represent the said minor in all future transactions of any description in the above account, until the said minor attains majority. I indemnify the bank against the claim of the above minor for any withdrawal/transactions made by me in his/her account.

Date :

Signature of Guardian

### I / We wish to avail following E-Banking Services.

☐ Internet Banking (Separate Form to be filled)

☐ I/We request you to issue new Rupay Card

☐ Name to be embossed on ATM Card

☐ I wish to get cheque book \_\_\_\_\_ leaves

☐ SMS Alert : SMS Alert on Mobile ☐ Required - Mobile No. \_\_\_\_\_ Not required ☐

### In Case of joint accounts, all accounts holders must sign.

I /We authorize the applicant to access the account(s) via the channels selected and authorize the Bhuj Mercantile Co-operative Bank Ltd. and we accept and agree to be bound by the said terms and conditions for the use of the above selected services.

NAME

1. \_\_\_\_\_ Signature

NAME

2. \_\_\_\_\_ Signature

NAME

3. \_\_\_\_\_ Signature

## KYC DETAILS

### A) For Normal Saving Account ☐ PAN

Any other of the followings (Document should be valid till date)

☐ Passport ☐ Driving Licence ☐ Aadhar Card ☐ Voter's Identity Card ☐ Job Card issued by NAREGA

### B) For Small Saving Account ☐ PAN ☐ OR ☐ Form No. 60

Any one of the following

1. Identity card with photograph issued by Central/State Govt. Depts., Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Bank, and Public Financial Institution.
2. Letter issued by a Gazetted Officer, with duly attested photograph of the person.
3. Utility bill (not more than two months old.)
4. Property or Municipal Tax receipt.
5. Bank account or post office savings bank account passbook.
6. Pension of family pension payment orders issued to retired employee by Govt. Dept., or Public Sector Undertakings, if they contain the address.
7. Letter of allotment of accommodation form employer issued by State or Central Govt. Dept., Statutory / Regulatory bodies, Public sector undertakings, scheduled comm. Banks, Financial Institutions and listed companies. Leave & License agreements with such employers allotting official accommodation.

### Declaration

- I/We understand that My / our account is opened as a small savings account with limited identity documents by applying simplified procedure.
- I/We understand and agree that being a small account (1) Balance in my/our account in any day will not exceed Rs. 50,000/- (2) Total of Credit amount in a financial year will not exceed Rs. 1,00,000/- and (3) Amount withdrawals by all means from my/our account will be restricted upto Rs. 10,000/- per month, and further agree that bank will restrict the amount of withdrawals from my/our account upon breach of any of these conditions till I / We furnished full KYC documents to the satisfaction of the bank.
- I/We understand that the rules and regulations for small savings accounts prescribe by Reserve Bank of India from time to time will be applicable to my/our account.

Signature : 1

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## NOMINATION (Nomination Form DA-1)

(Nomination under Sec. 45 ZA of the Banking Regulation Act, 1949 and rule 2(1) of the Co operative Societies (Nomination) Rules. 1985 in respect of bank deposit

I/We (Name & Address) \_\_\_\_\_  
\_\_\_\_\_

nominate the following person to whom in the event of my / our / minor's death the amount of deposit in the account, particulars whereof are given below, may be returned by Bhuj Mercantile Co. Operative Bank Ltd. , \_\_\_\_\_ Branch

Nature of Deposit	Distinctive No.	Name, Age and Address of Nominee	Relationship with Depositor	If Minor Birth Date	Other Details

As nominee is minor on this date I/We appoint Mr./Ms. \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_\_\_ to receive the amount of  
deposit in the account on behalf of the nominee in the event of my/our/minors/death during the minority of the nominee.

☐ We do not want to nominate any person in this regard.

### FOR OFFICE USE ONLY

Account No.

Date of Opening

Risk Profile : ☐ Low ☐ Medium ☐ High

Enclosure Details : ☐ No.of KYC Documents enclosed :

#### Declaration by the Branch :

I hereby certify that this account opening form is completed in all respects and relevant documents have obtained as per the KYC policy of the Bank & RBI (as amended from time to time) and the same are verified with original documents and also performed due diligence to verify the genuineness of the customer.

Name : \_\_\_\_\_ Emp. ID : \_\_\_\_\_ Designation : \_\_\_\_\_ Signature : \_\_\_\_\_

## Rules governing maintenance and conduct of Saving Bank Accounts

1. Resident Indian national Individual/s competent to contract can singly or jointly open a Savings bank a/c. by offering acceptable introduction, KYC documents and two copies of their latest Pass Port size photographs with initial cash deposit of Rs. 1000/- or the amount that may be decided by Bank from time to time. For opening "Small Saving Account" without cheque-book facility, initial cash deposit is Rs. 100/-.
2. Aliterate minor above the age of 10 years can open his/her SB a/c. individually without cheque book facility.
3. Cheques/Bill of Exchange/Dividend-interest warrants/Drafts drawn in favour of a/c. holder having duly introduced a/c. are collectible. No such instruments payable to third party or endorsed in favour of a/c. holder shall be accepted for collection in SB a/c.
4. Simple Interest @ 4% per annum calculated on daily balances on half yearly basis to SB a/c. is payable. However rate of interest, method of calculation and periodicity are subject to RBI directives from time to time.
5. SB a/c. holders shall be supplied with Pass Book without extra charges. However, request for duplicate Pass Book in the event of loss of original one shall be entertained on payment of Rs. 50/- subject to changes from time to time. No addition, alteration, deletion in figures/ writings except those made by Bank officials with authenticity in Pass Book are binding to bank.
6. SB a/c. holder should get Pass Book updated regularly in his/her own interest. Any discrepancy in Credit/Debit entry or credit balance should be notified to the Manager immediately.
7. Pass Book and cheque book are important security documents. Please keep them in a place of security under lock and key. Amount in words and figures in cheques should be written clearly and distinctly leaving no room for alteration or insertions therein.
8. Nomination facility is available to the a/c. holders. Subsequent variation, cancellation and re-registration of nomination is entertained.
9. Bank has got undisputed right to close unsatisfactory a/cs. with due notice. Those a/cs. wherein Inward cheques/Dr. ECS had to be returned frequently for want of sufficient funds shall be closed by the bank with prior notice.
10. Cheque book standing instruction, Dr. ECS, signature verification charges shall be recovered at the prevailing rates at the time of issuance/acceptance/verification.
11. For opening "Small Saving Account" contact Manager. Conduct and maintenance of such a/cs. shall be as per RBI/Banks BODs Policies.
12. Deposits upto Rs. 1/- lac are insured by DICGC as per their rules.
13. Savings a/cs. without cheque book facility can be operated with Bank's preprinted withdrawal forms. Introduced savings a/c. holders with an average credit balance of Rs. 1000/- and above shall be provided with cheque books for operation of a/cs.
14. Issuing a cheque of Rs. 10/- or less in value is prohibited. Likewise a/c. holders are permitted to draw maximum 10 cheques per month on bank. Bank reserves it's discretion to honour or return cheques drawn on it in violation of this rule. In the event, if cheques honoured in violation of this rule, bank may levy extra charges at it's sole discretion.
15. Bank shall accept and record "Stop Payment" instruction of the a/c. holder with recovery of stipulated charges. However, bank shall not be liable for any losses caused to a/c. holder in the event payment of countermanded cheque before receipt of such instruction.
16. Account holder is permitted to close his/her a/c. any time, provided bank's rules/rights & charges are not infringed.
17. Account holder/s will have to surrender unused cheque leaves to the bank while closing a/c. interest shall be paid for completed months as per rule specified hereabove subject to changes made therein by RBI/BOD of bank from time to time.
18. Bank reserves right to effect changes in above rules, rate of interest without notice.
19. In his/her/their own interest a/c. holder/s should notify bank about change in address and nominee. Bank shall not be liable for any losses that may cause to a/c. holder/s upon his/her their failure to notify Bank in this regard.
20. Bank enjoys its paramount "charges of lien", "Right of set off" and "Right of appropriation" against credit/debit balances lying in different a/c/s/instruments tendered for collection while transacting and rendering normal banking business.

Signature : 1

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