



Head Office : 517,A/1, E Ward, Tararani Chowk, Kolhapur. 416001.
Phone : (0231) 2536940 / 41 / 42, Fax : (0231) 2537403, E-mail : info@shriveershaivbank.com, Website : www.veershaivbank.co.in

**श्री. वीरशैव को-ऑप.
बैंक लि., कोल्हापूर.
(मल्टी स्टेट बँक)**



(For Office Use Only)

Branch : _____
शाखा :

A/c No. : खाते क्रमांक :

[illegible]

PLEASE FILL WITH CAPITAL LETTERS AND SKIP ONE BLOCK FOR PER NAME

Middle Name वडीलांचे /पतीचे नाव

[illegible]

I/We request you to open my/our deposit account with your_____branch as under:-

TYPE OF ACCOUNT: खाते प्रकार : (Please ✓)

☐ SAVING ACCOUNT ☐ CURRENT ACCOUNT

STATUS OF ACCOUNT: खाते प्रकार : (Please ✓)

☐ NORMAL ACCOUNT ☐ MINOR (Please fill up minor declaration form)

☐ SR CITIZEN (Provide proof for date of birth) ☐ OTHER (SPECIFY)

MODE OF OPERATION: खाते व्यवहाराची पद्धत : (Please ✓)

☐ SELF ☐ JOINTLY ☐ EITHER/SURVIVOR ☐ FORMER/SURVIVOR

☐ ANY ONE ☐ MINOR BY GUARDIAN ☐ ANY OTHER INSTRUCTION _____

CHEQUE BOOK REQUIRED चेकबुक सुविधा (Applicable for Saving / Current Account Only) -

☐ YES ☐ NO

ATM CARD REQUIRED एटीएम कार्ड सविधा (Applicable for Savings and Current Account only) -

☐ YES ☐ NO (Terms & Conditions Apply)



SHRI VEERSHAIV CO-OP. BANK LTD., KOLHAPUR

(MULTI STATE BANK)

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ACCOUNT OPENING FORM

Customer ID No. ग्राहक क्रमांक

CUSTOMER DETAILS (Please Use Separate Form For Each Applicant)

Name of Account holder :

अर्जदाराचे नाव :

Father's\Spouse Name :

वडीलांचे / जोडीदाराचे नाव :

Maiden Name (If any) :

विवाहापूर्वीचे नाव :

Mother's Name :

आईचे नाव :

1. Gender : लिंग : ☐ Male पुरुष ☐ Female स्त्री ☐ Third Gender इतर 2. D.O.B : जन्म दिनांक :

3. Religion : ☐ Hindu ☐ Muslim ☐ Christian ☐ Sikh ☐ Boudh ☐ Jain ☐ Other(Specify)

धर्म : ☐ हिंदू ☐ मुस्लीम ☐ ख्रिश्चन ☐ शीख ☐ बौद्ध ☐ जैन ☐ इतर

4. Caste : जात : ☐ SC अनुसूचित जाती ☐ ST अनुसूचित जमाती ☐ NT भटक्या जमाती ☐ Other(Specify) इतर

5. Marital Status : वैवाहिक स्थिती : ☐ Married विवाहित ☐ Unmarried अविवाहित ☐ Others इतर

6. Educational Qualification : ☐ Illiterate ☐ Non-matriculate ☐ SSC ☐ HSC ☐ Graduate

शैक्षणिक माहिती : ☐ Post Graduate ☐ Professional ☐ Other(Specify)

7. Occupation : ☐ Service ☐ Business ☐ Housewife ☐ Professional (Specify)

व्यवसाय : ☐ Agriculture ☐ Student ☐ Unemployed ☐ Retired ☐ Other

8. If Salaried : पगारदार : ☐ Public Ltd Co ☐ Pvt Ltd Co ☐ Govt Sector ☐ Others

9. Income : उत्पन्न : ☐ Less than 1 Lacs ☐ 1 to 5 Lacs ☐ 5 to 10 Lacs ☐ 10 to 25 Lacs ☐ above 25 Lacs

10. PAN Card No : पॅन कार्ड क्रमांक :

11. Name of Employer :

नोकरीच्या ठिकाणाचे नाव :

12. Phone (Mob) फोन (मोबाईल) : (Resi) घर

(Office) कार्यालय :

13. E-mail Id ई-मेल :

Standing Instruction

खाते व्यवहाराबाबत सूचना

Know Your Customer Details (Please ✓) Documents of Proof for Identify & Address

1. Aadhar Card No : आधार कार्ड क्रमांक :

2. Voter's Card No : मतदान ओळखपत्र क्रमांक :

3. Passport No : पासपोर्ट क्रमांक : Exp Date : शेवटची तारीख :

4. Driving License No : Exp Date :

वाहन परवाना क्रमांक : शेवटची तारीख :

5. ☐ Identity Card ☐ Letter from employer (subject to satisfaction of Bank) ☐ Govt. ☐ Defence Card

6. Letter from recognized public authority verifying identity & address proof : ☐

7. Utility Bill : ☐ Water ☐ Electricity ☐ Telephone ☐ Bank Statement

8. NREGA (National Rural Employment Act) Job Card ☐

9. Registered / Notary Leave & License Agreement (If Applicant Is Staying On Rent) ☐

10. Blood Group :

11. Membership : ☐ 'A' Class ☐ 'B' Class

सभासद प्रकार : 'अ' श्रेणी सभासद क्रमांक 'ब' श्रेणी (नाममात्र)

Applicant's Signature



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ACCOUNT OPENING FORM

NAME & SIGNATURE/THUMB IMPRESSION OF ACCOUNT HOLDER/S.

Recent Photograph

1

Name & Signature/Thumb Impression

Name:

Signature / Thumb Impression 1

2

Name:

Signature / Thumb Impression 2

3

Name:

Signature / Thumb Impression 3

4

Name:

Signature / Thumb Impression 4

Signature of the witness
in case of Thumb Impression

Name & Address of the witness

A/c. No. of the witness

DATE

OFFICER / ASST. MANAGER

BRANCH MANAGER



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Information For Firm / Partnership Firm / Trust / Society / Huf

Name of Firm / Trust / Soc. / HUF

Customer ID No.

[illegible]

Name of The Partner / Director

Last Name

Name

Middle Name

[illegible]

Address

[illegible]

Constitution

- ☐ Sole Proprietorship ☐ Private ☐ Public Ltd. Co ☐ Autonomous Body
☐ Dist. Central Co-op Bank Ltd ☐ Clib or Association ☐ HUF ☐ Govt.
☐ Semi Govt. govt. body ☐ Scheduled Co-op Bank ☐ Other Bank ☐ Private
☐ Public Trust ☐ Partnership Firm ☐ Non-Scheduled Co-op Bank ☐ Society
☐ Educational Institution ☐ Others.

Attested Documents

- ☐ Bye-laws of Society ☐ Trust Deed ☐ Certification of Incorporation ☐ Resolutions

Attached

- ☐ Copy of Regn. Certificate ☐ Regn. Partnership Deed
☐ Memorandum & Articles of Association

HUF

- | | |
|--------------------------|--|
| <input type="checkbox"/> | 1. Photograph of karta and all co-parceners |
| <input type="checkbox"/> | 2. HUF letter signed by karta and all major co-parceners |

NRE

- ☐ 1. Photograph ☐ 2. Passport Xerox ☐ 3. VISA Xerox ☐ 4. Employers letters

Please Offer us:

- ☐ Cheque Book ☐ Tele Banking ☐ Internet Banking ☐ ATM Card

Statement Frequency

- ☐ Daily ☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly on Email
☐ SMS Banking ☐ Password Assigned

Dated Estd. / Regi.

Date of Estd.

D

D

M

M

Y

Y

Y

Y

[illegible]

PAN No.								
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Standing Instruction

विशेष सूचना

FORM DA - 1

(Nomination)Rules, NOMINATION UNDER SECTION 45ZA read with Sec 56 of the Banking Regulation Act, 1949 & Rule 2(1) of the Co-operative Banks (Nomination) Rules 1985 in respect of Bank deposit

NOMINATION DETAILS :

I/We, _____ age _____ address _____

_____nominate the following person to whom in event of my/our/minors death the amount of deposit in the account mentioned herein below may be returned by SHRI VEERSHAIV CO-OP. BANK LTD., KOLHAPUR, Branch : _____

Name and address of Nominee वारसाचे नाव व पत्ता	Relationship With Depositor If Any ठेवीदाराशी नाते	Age वय	Date Of Birth Of Nominee जन्म दिनांक

--

Name, Signature and address of the witness in case of the (Depositor) thumb impression of the depositor

--

Signature / Thumb Impression



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FORM NO. 60

[See second provision to rule 114B]
Form of declaration to be filed by a person who does not have a permanent account number
and who enters into any transaction specified in rule 114B

- Full name and address of the declarant _____
- Particulars of transaction _____
- Amount of the transaction _____
- Are you assessed to tax ? (Please ✓) ☐ Yes ☐ No
- If yes, (i) Details of Ward / Circle / Range where the last return of income was filed _____
(ii) Reasons of not having permanent account number _____
- Details of the document being produced in support of address in column (1)
Date :

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place : _____

Signature of the declarant

FORM NO. 61

[See second provision to rule 114C(1)]
Form of declaration to be filed by a person who has agricultural Income and is not in receipt of any other
income chargeable to income-tax in respect of transactions specified rule 114B

- Full name and address of the declarant _____
- Particulars of transaction _____
- Details of the document being produced in support of
address in column (1) (Please ✓) ☐ Yes ☐ No
I hereby declare that my source of income is from agriculture and I am not required to pay income - tax on any other
income, if any.
Date :

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Place : _____

Signature of the declarant

VERIFICATION (To be filled along with form 60/61)

I, _____, do hereby declare that what is
stated above is true to the best of my knowledge and belief, Verified today, the _____
day of _____, _____ Place _____ Date

D	D	M	M	Y	Y	Y	Y
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Signature of the declarant



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ACCOUNT OPENING FORM

RULES & REGULATIONS

1. Savings Bank Account should be used to route transactions of non-business/non-commercial nature only. In case any transaction that may construed as dubious or undesirable, the Bank reserves the right to unilaterally freeze and/or close account.
2. Interest on Savings Bank Deposit is calculated at a rate fixed by the bank in terms of RBI guidelines from time to time and will be paid interest on the daily balance in the accounts as per norms.
3. The minimum balance to be maintained in the savings Bank Account is Rs 100 /- (without cheque book) and Rs 500 /- (with cheque) and for current account is Rs 1000/-.
4. If there are no transactions in the said account for more than three years, the account gets classified as "DORMANT" account, where in further debit transactions are will not be permitted.
5. Change of address/phone/mobile/email Id should be immediately communicated in writing to the bank along with the documentary evidence.
6. Any special instructions (both financial & non-financial) like standing instructions, stop payment, issue of cheque book/draft/pay order/issue of duplicate pass book/lost ATM card should be communicated in writing to the Bank.
7. Every Cheque book will be charged as per charges fixed by the bank from time to time inclusive of service tax and cess thereon.
8. No interest will be paid to Current account holders.
9. Savings Account where Passbook is issued, Charges will be debited for issue of Statement of Account if requested by the Customer in addition to Passbook.
10. The Bank reserves the right to frame, amend, alter, add or delete any rules and service charges from time to time.

DECLARATION

1. I/We have read the rules and hereby agree to be bound by the terms and conditions outlined by the Bank. Amendments to the rules made from time to time and those relating to various services are accepted by me/us. 2. I/we understand that the bank may at its absolute discretion discontinue any of the services Completely/partially without any notice to me/us. 3. I/we declare that the details furnished above are true and correct to the best of us/our knowledge and belief. I understand to inform of any charges there in. 4. I/We authorize to share our personal/kyc details with central KYC registry. 5. I hereby comment receiving information from Central KYC through SMS on email on above reg Number/Email address

DISCLAIMER

I/We am/ are aware that SHRI VEERSHAIV CO-OP. BANK LTD.does not seek any information relating to login id/password in any form including through e-mails from its customers.

I/We agree and undertake that I/We shall never part with any sensitive information of my/our account especially through internet/e-mail/phone medium. I/We further agree and confirm that The SHRI VEERSHAIV CO-OP. BANK LTD.shall not be liable for any losses arising from my/our sharing/disclosing of login Id, password, cards, card numbers or PIN(Personal Identification Number) to any one, nor shall make claims on the Bank for any unauthorized use. I/we shall take all precautions to protect my/our account details so as to avoid any unauthorized use.

मी / आम्ही फॉर्ममध्ये भरलेली माहिती मातृभाषेमध्ये समजावून घेऊन मान्य असलेले अर्जावर मी / आम्ही आजरोजी सहाय केल्या आहेत.

Signature of the 1st Applicant

Signature of the 2nd Applicant

Signature of the 3rd Applicant

Signature of the 4th Applicant

For Banks Use Only (KYC Certification and Order for creation of customer ID)

I _____ Employee Code _____ met the applicant in person and hereby confirm that the true copies of following documents in support of identity and address of applicant have been verified by me from the originals and kept on record .The applicant has filled in this ID form in my presence.

Name and identification number of document in support of identity _____

2. Name and identification number of document in support of address _____

DATE

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Signature of Officer

Signature of Introducer verified

Enroll Customer ID

--	--	--	--	--	--	--	--	--	--

Authorized Signatory

Incharge / Branch Manager

Introducers signature verified and found correct.I have verified all the relevant documents and the Account Holder have signed before me . Applicants and introducer have signed in my presence letter of confirmation of introduction Ref.No _____ Date _____ sent and confirmation received on _____ signature of letter verified. Particulars of Form DA1 (if received) entered in Nomination Register Sr.No. _____ Date _____

DATE

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

CLERK

OFFICER / ASST. MANAGER

BRANCH MANAGER



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ACCOUNT OPENING FORM

Customer ID No. ग्राहक क्रमांक

CUSTOMER DETAILS (Please Use Separate Form For Each Applicant)

Name of Account holder :

अर्जदाराचे नाव :

Father's\Spouse Name :

वडीलांचे / जोडीदाराचे नाव :

Maiden Name (If any) :

विवाहापूर्वीचे नाव :

Mother's Name :

आईचे नाव :

1. Gender : लिंग : ☐ Male पुरुष ☐ Female स्त्री ☐ Third Gender इतर 2. D.O.B : जन्म दिनांक :

3. Religion : ☐ Hindu ☐ Muslim ☐ Christian ☐ Sikh ☐ Boudh ☐ Jain ☐ Other(Specify)

धर्म : ☐ हिंदू ☐ मुस्लीम ☐ ख्रिश्चन ☐ शीख ☐ बौद्ध ☐ जैन ☐ इतर

4. Caste : जात : ☐ SC अनुसूचित जाती ☐ ST अनुसूचित जमाती ☐ NT भटक्या जमाती ☐ Other(Specify) इतर

5. Marital Status : वैवाहिक स्थिती : ☐ Married विवाहित ☐ Unmarried अविवाहित ☐ Others इतर

6. Educational Qualification : ☐ Illiterate ☐ Non-matriculate ☐ SSC ☐ HSC ☐ Graduate

शैक्षणिक माहिती : ☐ Post Graduate ☐ Professional ☐ Other(Specify)

7. Occupation : ☐ Service ☐ Business ☐ Housewife ☐ Professional (Specify)

व्यवसाय : ☐ Agriculture ☐ Student ☐ Unemployed ☐ Retired ☐ Other

8. If Salaried : पगारदार : ☐ Public Ltd Co ☐ Pvt Ltd Co ☐ Govt Sector ☐ Others

9. Income : उत्पन्न : ☐ Less than 1 Lacs ☐ 1 to 5 Lacs ☐ 5 to 10 Lacs ☐ 10 to 25 Lacs ☐ above 25 Lacs

10. PAN Card No : पॅन कार्ड क्रमांक :

11. Name of Employer :

नोकरीच्या ठिकाणाचे नाव :

12. Phone (Mob) फोन (मोबाईल) : (Resi) घर

(Office) कार्यालय :

13. E-mail Id ई-मेल :

Standing Instruction

खाते व्यवहाराबाबत सूचना

Know Your Customer Details (Please ✓) Documents of Proof for Identify & Address

1. Aadhar Card No : आधार कार्ड क्रमांक :

2. Voter's Card No : मतदान ओळखपत्र क्रमांक :

3. Passport No : पासपोर्ट क्रमांक : Exp Date : शेवटची तारीख :

4. Driving License No : Exp Date :

वाहन परवाना क्रमांक : शेवटची तारीख :

5. ☐ Identity Card ☐ Letter from employer (subject to satisfaction of Bank) ☐ Govt. ☐ Defence Card

6. Letter from recognized public authority verifying identity & address proof : ☐

7. Utility Bill : ☐ Water ☐ Electricity ☐ Telephone ☐ Bank Statement

8. NREGA (National Rural Employment Act) Job Card ☐

9. Registered / Notary Leave & License Agreement (If Applicant Is Staying On Rent) ☐

10. Blood Group :

11. Membership : ☐ 'A' Class ☐ 'B' Class

सभासद प्रकार : 'अ' श्रेणी सभासद क्रमांक 'ब' श्रेणी (नाममात्र)

Applicant's Signature