



# THE KALUPUR COMM. CO-OP. BANK LTD.

SINCE : 1970

MULTI STATE SCHEDULED BANK

Head Office: "Kalupur Bank Bhavan," Nr. Income Tax Circle, Ashram Road, Ahmedabad-14  
Phone: 079-27582020 to 27582026 Fax: 079-27544450, 27582033

## CUSTOMER FORM - INDIVIDUALS

Please affix your latest Passport Size Photograph here

For Office use only : CIF ID :  KYC No. :

Branch Name :  Branch Code :

1. Full Name :  First  Middle  Last

Father/Spouse Name :

Mother Name :

Maiden Name :

2. Gender :  Male  Female  Transgender

3. Date of Birth :  DD  MM  YYYY  4. Place of Birth :

5. Minor Declaration Guardian : CIF ID :  KYC No.

Type of Guardian :  Father  Mother  Court Appointed (Enclose copy of court order)

Full Name of Guardian  Mr.  Ms.

I hereby declare that the date of birth of the minor who is my \_\_\_\_\_ is \_\_\_\_ / \_\_\_\_ / \_\_\_\_ 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 shall indemnify the Bank against the claim of the above minor for any withdrawal / transactions made by me in his / her account.

Date :  DD  MM  YYYY (Signature of Guardian)

6. Resident Status :  Resident  Non Resident  Foreign National  Person of Indian Origin

If Non-resident, date of Non-resident :  DD  MM  YYYY

7. Politically Exposed Person (PEP) / Related to PEP :  No  Yes 8. Physically Challenged :  No  Yes

9. Constitution :  Individual  Minor  Basic Individual

10. PAN :

11 A. Address Details : (Permanent / Foreign Address for Non Resident)

City :  State :  Country :  Postal Code :

11 B. Mailing / Local Address for Non-Resident  Same as above

City :  State :  Country :  Postal Code :

12. Mobile 1 :  Mobile 2 :  Fax :

Office :  Residence :

13. Email :  @

### 14. Document Details :

Sr.	Type of Doc.	Doc. No.	Place of Issue	Date of Issue	Valid up to	Issuing Authority	I / A / I+A
1							
2							
3							
4							
5							

(I = Identity Proof, A= Address Proof, I+A=Identity & Address Proof)

15. Nationality : \_\_\_\_\_

16. Cast :  Hindu  Jain  Muslim  Parsi  Christian  Sikh  Buddhist  Bhai  Zoroastrian  Other \_\_\_\_\_

17. Marital Status :  Single  Married  Other \_\_\_\_\_

18. Qualification :  Under SSC  SSC  HSC  Graduate  Masters  Professional

Name of School/University : \_\_\_\_\_

19. Occupation :  Private Sector Service  Public Sector  Government Sector  Self-Employed  Retired  House wife  
 Pensioner  Student  Unemployed  Other \_\_\_\_\_

If Self-Employed:  Doctor  Engineer  CA/CS  Businessman  Investor  Architects  Advocate  Other \_\_\_\_\_

Name and Address of firm / Company : \_\_\_\_\_

Date of Incorporation or in the business since : \_\_\_\_\_

If Employed : Designation : \_\_\_\_\_ Name of Employer : \_\_\_\_\_

20. Average Annual Turnover : \_\_\_\_\_ Net Worth (As on DD MM YYYY)Rs. \_\_\_\_\_  
 (only for self employed)

21. Expected Annual Income : \_\_\_\_\_

22. Please Provide details of Account /Credit Facilities with other banks.

Bank & Branch	Place of Bank & Branch	Type of A/c Facility	Amount	A/c. No.

I certify and declare that the information furnished herein are correct to the best of my knowledge and belief. I undertake to inform you of any changes therein immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I would like to share my personal/KYC details with Central KYC registry.

Customer Signature : \_\_\_\_\_

**For Office Use Only :**

Classification :  Low  Medium  High

Date DD MM YYYY

I hereby certify that this customer opening form is complete in all respect and relevant documents have been obtained and verified with original documents.

**Enclosure details by Branch :**

No. of KYC Documents enclosed : \_\_\_\_\_ (  Self Certified  True copies  Notarised)

CPC request No. : \_\_\_\_\_

Name : \_\_\_\_\_

Employee ID : \_\_\_\_\_

Designation : \_\_\_\_\_

Signature : \_\_\_\_\_