



Estd. 1984

Branch _____

Cust. ID of CIF-2																				
Group Cust. ID																				
If Shareholder of the Bank, Membership No.																				

**ACCOUNT OPENING FORM FOR NON INDIVIDUALS
(FOR FIRMS / CORPORATES / TRUSTS / SOCIETIES / HUF / HUF FIRMS / OTHERS)**

To,
The Branch Manager,
Progressive Co-operative Bank Limited.,
_____ Branch. Branch Code No. _____ Date _____

Type of Account : _____
Account No. _____

Please fill in **CAPITAL** letters and use **BLACK BALL POINT PEN** for signature. Please tick (✓) the appropriate boxes
 Please open CD A/c. SB A/c. Other A/c. _____ as per details given below, for which I/We Deposit _____/-
 (Rupees _____) Payment By Cash Cheque No. _____
 Date : ____/____/20____ Drawee Bank _____ Branch _____ (Cheque from own account with other bank)

Details of Business / Firm / Trust / HUF / Association of Persons / Company / Society / Others _____

Name / Title of Account																				
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Constitution

Proprietorship Partnership Firm Pvt. Ltd. Co. Educational Institution Co-op. Society Trust
 Ltd. Liability Partnership (LLP) HUF HUF Firms Association of Persons Others (Specify) _____

Mode of Operation

Proprietor All Jointly Any One As per Resolution Karta Others (Specify) _____

Personal Details of Authorised Signatories

Cust. ID No. _____ 1st Applicant (Mr./Mrs./Ms.)	Cust. ID No. _____ 2nd Applicant (Mr./Mrs./Ms.)	Cust. ID No. _____ 3rd Applicant (Mr./Mrs./Ms.)
FIRST NAME	FIRST NAME	FIRST NAME
MIDDLE NAME	MIDDLE NAME	MIDDLE NAME
SURNAME	SURNAME	SURNAME

Please Offer us Following Facilities

Cheque Book SMS e-Statement Others (Specify) _____ (separate form to be obtained for SMS Banking)

Declaration :

- I/We am/are not related to any of the Directors of your Bank. **OR**
 I/We am / are related to Mr. / Mrs. / Ms. _____ (Director of your Bank)
 as _____ (Relationship).
- I/We hereby declare that all the transaction routed through this account and funds involved will be owned by me/us. If funds owned by other party, which are routed through my/our account I/We undertake to inform the Bank immediately
- I/We hereby declare that, I/We the undersigned or their relatives have not been entrusted with prominent public functionary in a foreign country e.g. Heads of states of Governments, Senior Politicians, Senior Government / Judicial / Military Officers, Senior Executives of State Owned Corporations, Important Political Party Officials, etc. I/We hereby further declare that in case in the future, I or any of the undersigned or their relative have been entrusted with prominent public functionary in a foreign country as stated above, I/We will immediately notify the Bank about the same.
- The Bank's rules & regulations relating to the account have been read & understood by me/us and I/We agree to abide by the said rules & regulations and any amendments made thereto from time to time as displayed on Bank Website/Notice Board and those relating to various services including but not limited to SMS Banking etc. I/We understand that the Bank may at its discretion discontinue any of the services completely or partially. I/We agree that the Bank may Debit to my/our account with service charges as applicable from time to time. I/We Confirm that I/We am/are resident(s) of India.
- Joint Accounts: We hereby authorize the Bank to make payment of deposit/s to the survivor without concurrence of the legal heir/s of the deceased account holder/s.
- I/We hereby declare that the information furnished above is true & correct to the best of my knowledge.
- I/We have read, understood and agree to abide by the Bank's rules for _____ (the type of account) and agree to comply with and be bound by them as they are in force now and from time to time be in force for such accounts. I/We undertake to advise the bank promptly in writing of any change in my/our constitution/partners/directors/documents and any other material change.

FOR PROPRIETARY CONCERNS

To,
Progressive Co-operative Bank Limited
Branch _____
Sir,

I, the undersigned, inform you that I am the sole Proprietor of the firm Named M/s. _____ and I am solely responsible for liabilities thereof. I shall promptly advise you in writing of any change that may take place in the constitution of the firm and I will be liable to you for any obligation which may be standing in the firm's name in your books on the date of receipt of such notice and until all such obligation shall have been liquidated.

Yours faithfully,

Signature of the Proprietor
(with Rubber Stamp)

