



THE HYDERABAD DIST. CO-OP. CENTRAL BANK LTD.,

ACCOUNT OPENING FORM

Branch Code :					For office use	Date :									
Customer ID :					Account No.										

Type of A/C :	Saving A/C ☐	Current A/C ☐	FD ☐	RD ☐
Nature of A/c :	Individual ☐	Jt. Account ☐	Co.op. Society ☐	Business ☐
Mode of operation :				
Self ☐	Any one or Survivor ☐	Minor Account Operated by Guardian ☐	All Jointly ☐	Either or Survivor ☐

Primary Applicant :				Photo
1. Full Name :				
S/o.,W/o.,D/o				
M/F :	Category :	Nationality :	Occupation :	
Date of Birth :				Specimen Signature 1) 2) 3)
Age :				
Mobile :				
E-Mail ID :				
Current Address :		Permanent Address :		
PIN :		PIN :		

Joint / Second Applicant :				Photo
2. Full Name :				
S/o.,W/o.,D/o				
M/F :	Category :	Nationality :	Occupation :	
Date of Birth :				Specimen Signature 1) 2) 3)
Age :				
Mobile :				
E-Mail ID :				
Current Address :		Permanent Address :		
PIN :		PIN :		

KYC Details :

Primary A/c :

Aadhar ☐ Passport ☐ Votar's Identity Card ☐
Driving Licence ☐ NREGA Job Card ☐ PAN Card ☐

Identity

Aadhar ☐ Passport ☐ Votar's Identity Card ☐
Driving Licence ☐ NREGA Job Card ☐

Address

Joint / Second A/c :

Aadhar ☐ Passport ☐ Votar's Identity Card ☐
Driving Licence ☐ NREGA Job Card ☐ PAN Card ☐

Identity

Aadhar ☐ Passport ☐ Votar's Identity Card ☐
Driving Licence ☐ NREGA Job Card ☐

Address

SMS Registration

Yes / No

Name :

Mobile :

Signature

Mobile Banking Registration

Yes / No

Name :

Mobile :

Token :

Signature

ATM Registration

Name to be printed on card :

Card No :

Date of Birth :

Mobile No :

Address :

PIN :

Signature

UPI Registration

Yes / No

Name :

Mobile :

Signature

Cheque Book :

Yes / No

Name to be printed :

Leaves Required :

Signature

**APPLICATION FOR LINKING /SEEDING AADHAR NUMBER
AND RECEIVING BENEFITS INTO BANK ACCOUNT-(NPCI MAPPING)***

The Branch Manager,

Date:.....

.....Branch

.....Bank

Dear Sir,

Account No.....in A/c Name.....

Linking / Seeding of Aadhar in NPCI-Mapping for Receiving Direct Benefits

1. I am maintaining a Bank account No.....with your Branch.

2. I submit my Aadhar number and voluntarily give my consent to

* Use my Aadhar Details to authenticate me from UIDAI.

* Use my Mobile Number mentioned below for sending SMS Alerts to me.

* Link the Aadhaar Number to all my exiting/new/future accounts
and customer profile (CIF) with your Bank.

(Signature/Thumb Impression of customer)

Know Your Customer (KYC) Risk Categorization Form for all Accounts
(to be filled for all accounts opened and attached to Account Profile Form)
(This form to be completed by an Authorised Officer of the Branch before end of the day)

	LOW - 1	1 Point	MEDIUM - 2	2 Point	HIGH - 3	3 Point
Category 1 Clint Type	Student/Housewife/Pensioner		Employee Executive			
	Employee Non executive Government		Lawyer & Accountant		PEPs	
	Employee Non executive Private		Government Institution		NGOs	
	Public Limited Liability company		Private Limited Liability Company		Off Shore/Non Resident Company	
	Business Individual		Business-Proprietor/Partnership		Foreign Citizen	
	Clu					
	al Institution					
	Self Employed - Professional					
	Self Employed - Business					
	Other Individuals (Specify)					
Category 2 Business / Trade Usage	Professional/Family Use Dealer in Petroleum Products		Travel Agent		Dealer in gem and jewellery	
	Professional Services		Importer & distributor of commercial goods		Finance/Insurance Companies	
	Dealer in brand new vehicles		Entrepot trade		Money change/remitters	
	Retail trader/Business		Exporter of local products		Buying and selling of Real Estate	
	Service Provider		Telephone/Communication Provider		Share & Stock Brokers	
	Printers & Publishers		Commission Agent Wholesale trader		Investing/administering/Managing public funds	
	Marketing & Advertising		Shipping Airline and freight forwarding		Restaurant/bar/casino/Gaming house/night club	
	Small/Medium work shop/repair shop		Construction - Buildings/Roads		Importer/Dealer in 2nd hand motor vehicles	
	Nursing Homes/Health Care Centres					
	Manufacturing Industry					
	Transport operations					
	Social/Religious Activities					
	Less Than 1,00,000/-		From 1,00,000 to 3,00,000/-s		Above 3,00,000	
Category 3 Turnover per Month						
Overall Rating / Risk Category	1-3 Low		4-6 Medium		7-9 High	

Mandate of Minor Account :

I hereby declare that the date of birth of the above minor who is my (relation with the minor) is (Date of birth) and I am his/her natural guardian/legal guardian appointed by Court Order Dt..... (copy enclosed). I Shall represent the said minor in all future transactions of any discrepancy in the said account until attains majority. I undertake to indemnify the Bank against any claim of the said minor in respect of any transaction made by the in his/her said account. I also undertake to inform the bank of his / her attaining majority.

Signature of the Guardian**Details of Nominee :**

Name :
Relationship with depositor Age date of birth of nominee
Address :
.....
As the nominee is a minor as on this date, I/We appoint Sri/Smt.
Age Years, Address
to receive the amount of deposit on behalf of the nominee, in the event of my/our minor's death during the minority of the nominee.
Nominee Reg. No.. ..

Customer Profile :

Details	Applicant 1	Applicant 2
Occupation		
Salary category		
Nature of business		
Education		
Gross Annual Income		

Official Use :**Customer Signature**

Certified that the applicant (s) have signed in our presence. We confirm having verified, referring to his original application and relevant documents, KYC norms stands complied.	
Cheque book bearing no..... to issued and delivered to the depositor.	
Sign. Staff Asst./Asst. Manager Name of the Employee : Employee Code (ID) No :	Sign. Authorized Officer : Designation Code (ID) No : Office Seal