

खात्याचे नांव / Title of the A/c. \_\_\_\_\_

पहिल्या खातेदाराचे नांव / First Account-holder's name \_\_\_\_\_ खाते क्र. / A/c. No. \_\_\_\_\_

**वैश्य सहकारी बँक लि.**

**Vaishya Sahakari Bank Ltd.**

७, तात्या घारपुरे पथ, गिरगांव, मुंबई - ४०० ००४. 7, Taty Gharpure Path, Girgaon, Mumbai - 400 004.

\_\_\_\_\_ शाखा

\_\_\_\_\_ Branch

Whether Member	
Non-Member	
Society	

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Date : \_\_\_\_\_

**चालू खाते उघडण्यासाठी अर्ज**

**Application for opening CURRENT DEPOSIT ACCOUNT**

महाशय / Sir,

मी/आम्ही आपल्या बँकेत वरील नावाने चालू खाते उघडू इच्छितो. त्यासाठी मी/आम्ही आपल्याला रोख रु. \_\_\_\_\_ (रुपये \_\_\_\_\_ फक्त) स्विकारण्याची विनंती करतो. मी / आम्ही चालू खात्याविषयी बँकेचे नियम वाचले आहेत व त्या नियमात वेळोवेळी केलेले बदल माझ्यावर / आमच्यावर बंधनकारक राहतील. बँकेचे सेवाशुल्क माझ्या / आमच्या खात्यामधून वेळोवेळी घेण्यास माझी/ आमची मान्यता आहे. I/ We wish to open a Current Deposit Account with your Bank and request you to accept a sum of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ Only). I / We have read and understood rules governing the Current Deposit Account. I /We agree to comply with and be bound by the Rules and changes therein made from time to time. I/ We agree that the Bank may debit my / our account for the service charges applicable from time to time.

१) खात्याचे नाव / Title of Account : \_\_\_\_\_

२) धंद्याचा पत्ता : \_\_\_\_\_

Office Address \_\_\_\_\_ Tel. No. \_\_\_\_\_

३) धंद्याचे स्वरूप व घडण / Nature of Business : \_\_\_\_\_

& Constitution : Individual  Sole Proprietary  Partnership  Company  Others   
वैयक्तिक  स्वयंमालकी  भागीदारी  कंपनी  इतर

\* Enclose copy of Partnership Deed / Memorandum & Articles/ Trust Deed/ Byelaws/ Rules / Reg. Certificate

४) खातेदार /भागीदार /संचालक यांची नावे  
Name of Individuals/  
Partners/ Directors  
1) \_\_\_\_\_  
2) \_\_\_\_\_  
3) \_\_\_\_\_  
4) \_\_\_\_\_

५) पहिल्या खातेदार /भागीदार /संचालक यांचा  
घरचा पत्ता. Residential address of  
first account holder / Partner  
/ Director  
\_\_\_\_\_

६) खाते चालविण्यासाठी तसेच बाकी रकम  
मिळविण्यासाठी खालील अधिकार देण्यात येत  
आहेत. Account will be operated  
by and balance amount will be  
payable to

आमच्यापैकी कोणीही किंवा ह्यात व्यक्ति <input type="checkbox"/>	संयुक्त <input type="checkbox"/>
Either/Any one or Survivor/s	Jointly
आमच्यापैकी कोणी _____ व्यक्ति किंवा ह्यात व्यक्ति	
Any _____ of us or Survivor/s	<input type="checkbox"/>

७) वार्षिक उत्पन्न :  
Annual Income

Upto Rs.1 lac	Rs. 1 lac to Rs.2 lacs	Rs.2 lacs to Rs.3 lacs	Rs.3 lacs to Rs.5 lacs	Rs.5 lacs to Rs.10 lacs	Rs.10 lacs & above

८) पॅन नंबर/जी.आय.आर किंवा फॉर्म ६०/६१  
(हो/नाही)

PAN Number / GIR or Form No.  
60/61 attached? (Yes/No)

PAN /GIR	Form 60/61	PAN /GIR	Form 60/61
Firm / Co.	Y N	2 <sup>nd</sup> Partner Director	Y N
PAN /GIR	Form60/61	PAN /GIR	Form 60/61
1 <sup>st</sup> Partner Director	Y N	3 <sup>rd</sup> Partner Director	Y N

९) निवेदन/ **Declaration** : आमचे दुसऱ्या कुठल्याही बँकेत चालू खाते नाही./ आमचे ..... बँकेत चालू खाते असून आमची तिथे कोणत्याही प्रकारची कर्जपत व्यवस्था नाही. बँकेच्या नियमाप्रमाणे असणारी कमीत कमी रक्कम खात्यात ठेवण्याचे आम्ही मान्य करतो. तसेच वेळोवेळी या खात्याची माहिती कायदा/नियमाप्रमाणे बँकेला कोणासही द्यावी लागली, तर त्यास आमची मान्यता असेल. बरील दिलेली माहिती ही खरी असून हा अर्ज आम्ही बँकेच्या अधिकाऱ्यांसमोर सही केला आहे. बँकेस लागणारा ठराव यासोबत सही केला आहे. आम्हास चेकबुक द्यावे. We are not operating account with any other Bank./ We are operating account with \_\_\_\_\_ Bank and do not enjoy any credit facility. We agree to keep minimum balance as required by the Rules of the Bank. We also authorize the Bank to disclose from time to time any information relating to this account to any third party as required by statute/ Rules of the Bank. Details provided above are correct. We confirmed having signed this application in presence of the Bank Officer. We request Bank to issue cheque book.

१०) सहा/ Signatures : For and on behalf of \_\_\_\_\_




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

Date : \_\_\_\_\_

११) वारस नेमणूक / **Nomination of Current Deposit Account** :

I / We hereby nominate the following person to whom in the event of my / our / minor's death, the amount of this deposit may be returned by the Vaishya Sahakari Bank Ltd.

Name and Address of the Nominee	Age	Relation with Depositor	Date of Birth if Minor	Nomination Register L/F

- (If nominee is minor)- As the nominee is minor on this date, I / We appoint Shri. / Smt. \_\_\_\_\_ (Name, Address & Age ) 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.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
Signatures / Thumb impression  
of all depositors

- Witnesses** : 1) Name \_\_\_\_\_  
& Address \_\_\_\_\_

\_\_\_\_\_  
Signature

- 2) Name \_\_\_\_\_  
& Address \_\_\_\_\_

\_\_\_\_\_  
Signature

\* **Strike out if nominee is not Minor.**

\* **Where deposit is in the name of Minor, the nomination should be signed by a person lawfully entitled to act on his behalf.**

\* **Thumb impression shall be attested by two witnesses.**

१२) शिफारस/ **Introducer's Particulars** :

i) नाव व पत्ता /Name & Address \_\_\_\_\_  
\_\_\_\_\_ Tel. No. \_\_\_\_\_

ii) खाते क्र. व शाखा /Account No. & Branch : \_\_\_\_\_

मी प्रमाणित करतो कि, मी वैश्य सहकारी बँकेचा सहा महिन्यांहून अधिक काळ खातेदार आहे. मी बरील खातेदारांना गेली \_\_\_\_\_ महिने/ वर्षे ओळखतो आणि त्यांनी अर्जामध्ये दिलेली ओळख, व्यवसाय व पत्ता बरोबर असल्याची खात्री देतो. I certify that I am an account holder of **Vaishya Sahakari Bank Ltd., Mumbai** over 6 months. I confirm that I presently know the above applicants for \_\_\_\_\_ months/ years and confirm his/their identity, occupation and address.

तारीख : \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
शिफारस करणाऱ्याची सही /Introducer's Signature

## DECLARATIONS

### **a) For Sole Proprietorship to be signed in his personal capacity :**

Dear Sir,

I, the undersigned, wish to inform you that I am the sole proprietor of the firm M/s. \_\_\_\_\_ and I am solely responsible for the liabilities thereof. I shall 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 firms name in your books on the date of the receipt of such notice and until obligations shall have been liquidated in full.

\_\_\_\_\_  
Name of the Proprietor

\_\_\_\_\_  
Signature of Proprietor

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### **b) For Partnership Firm to be signed by all partners in their personal capacity :**

Dear Sir,

As the firms M/s. \_\_\_\_\_ having dealing with the Bank, we wish to inform you that we, the undersigned are the partners of the said firm. We are jointly and severally responsible to the bank for the liabilities of the firm to the Bank. The Bank may recover its claims from the estates of any or of all the partners of the firm. Whenever any change occurs in our partnership, we undertake to inform the same in writing and our individual responsibility to the Bank will continue until we receive from the Bank an acknowledgement of such letter and until all our liabilities to the Bank are discharged.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_  
(To be signed by each partner in individual capacity)

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### **c) For Clubs, Societies, Associations and Companies-**

A copy of Resolution passed on \_\_\_\_\_ by the Managing Committee/Board of Directors :

Resolved that a Current Deposit Account of M/s. \_\_\_\_\_ be opened with **Vaishya Sahakari Bank Ltd., Mumbai** and be operated under signatures of \_\_\_\_\_ and \_\_\_\_\_ jointly and the said Bank be and is hereby authorised to honour cheques, Bills of Exchange of Promissory Notes drawn on us or accepted by us and to act on any instructions so given, relating to the account whether by the same account be overdrawn or not.

Date : \_\_\_\_\_

Chairman \_\_\_\_\_

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### **FOR OFFICE USE ONLY**

Introducer's signature  
verified & found correct

\_\_\_\_\_  
Supervisor's Signature

Date : \_\_\_\_\_

- Applicants and Introducer have signed in my presence.
- Letter of confirmation of introduction of applicants address (Ref. No. \_\_\_\_\_ dated \_\_\_\_\_) sent and confirmation received on \_\_\_\_\_ signature on letter found correct.
- Particulars of nomination entered in nomination register under Sr.No. \_\_\_\_\_ L/F No. \_\_\_\_\_

- Proof of identification, residence obtained. Allowed to open account. Cheque Book issued on \_\_\_\_\_

Date : \_\_\_\_\_

\_\_\_\_\_  
Officer

\_\_\_\_\_  
Branch Manager

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### **Documents Required**

- 1) Photo of each depositor.
- 2) Pan card Xerox (with original for verification) **OR** Form 60
- 3) Identity : Pass Port /Driving Licence / Voter's identity card-Xerox (Any One)
- 4) Business Proof : Shop or Estate Licence/ Registration Certificate / Partnership Deep / Trust Deed / Memorandum or Articles of Association (Any One)
- 5) Address Proof : Telephone Bill / Electric Bill (Original) / Ration Card (Any One)
- 6) Introduction of Current Deposit Account-holder

विशेष टिप : प्रत्येक खातेदाराने आपल्या फोटोवर काळ्या शाईने स्वाक्षरी करावी. **/The photograph should be signed in Black ink by each depositor.**