Part - I: Customer Information Form The Greater Bombay Co-Operative Bank Ltd. Separate CIF for each customer (new customers only) (Scheduled Bank) Premises 1, Gr. Floor & Premises 105, 1st Floor, Churchgate Chambers, 5, New Marine Lines, **NON - INDIVIDUAL** Sir Vithaldas Thackersey Marg, Churchgate (E), Mumbai - 400 020. CKYC No.... (For office CIF No * Date: d d m m use only) Ac.No. Regular Membership No. * Branch Name : .. Please fill up in BLOCK letters only and use black ink for signature. Please leave one box blank between two words. Tick (<) the appropriate boxes. Please affix a recent passport size photograph in the box provided 3. All fields marked with * (asterisk) are mandatory to be filled * Customer Type: Proprietorship Partnership Pvt. Ltd. Public Ltd. HUF Society Trust Club / Asso Others. * Entity Name: * Date of Incorporation : d d m m * Entity PAN No.: * Nature of Business (Specify Business) : ₹ 10 lac to ₹ 50 lac ₹ 50 lac to ₹ 100 lac *Yearly Turnover : up to ₹ 10 lac above ₹ 100 lac Landmark/Street: *City: *State Telephone No. Landmark/Street: Fax No. *City: *State: Telephone No. *Mobile no.: **Email Address:** Photograph with Signature

Paste a recent passport size photograph inside this box

partially on photograph & partially on form without covering the face.

> Signature with entity designation Stamp

Paste a recent passport size photograph inside this box

partially on photograph & partially on form without

Signature with entity designation Stamp

Paste a recent passport size photograph inside this box

partially on photograph covering the face

> Signature with entity designation Stamp

Paste a recent passport size photograph inside this box

partially on photograph & partially on form without covering the face.

> Signature with entity designation Stamp

Please Sign across partially on photograph & partially on form without covering the face.

Mobile no. will be used for sending SMS
alerts &
Product

Information (Mobile No. mandatory)

address is required for monthly statement

◀ Email

* DECLARATION

BEOMMETTION
(for Sole Proprietorship to be signed by proprietor in personal capacity) I the undersigned do hereby state and solemnly declare that I am the sole Proprietor of and I am solely responsible for liabilities there of. I shall advise you in writing of any change that may take place in the constitution of the firm and will be liable to you for any obligation which may be standing in the firm's name in your books on the date of the receipt of such notice and until obligation shall have been liquidated.
Signatures of the sole proprietor (without Firm Stamp)
(for Partnership Firm to be signed by all partners in their personal capacity)
We, the undersigned, do hereby solemnly affirm and declare that we are the partners of We are jointly and severally responsible to the Bank for the liabilities of the firm with the Bank. The Bank may recover it's claims from the estate of any or of all the partners of the firm. We are submitting herewith the Partnership Deed executed between us. Wherever any change occurs in our partnership we undertake to inform the Bank the same in writing and our individual responsibility to the Bank will continue until we receive from the Bank an acknowledgement of that letter and until all our liabilities with the Bank are discharged.
1. 2. 3. 4.
Signatures of all Partners (Without Firm Stamp)
(For Trusts, Club, Societies, Associations and Companies)
I, the undersigned, do hereby state and declare that I amof
submitting herewith certified true copy of Resolution No passed on by the Managing Committee / Board of Directors, RESOLVING that a Banking Account be opened with
your Bank and authorizing your Bank to honour Cheques, Bills of Exchange, Promissory Notes drawn, accepted hundies and to act on any
instructions so given relating to the account. I am also submitting herewith copies of the Memorandum and Articles of Association and
incorporation certificate (incase of Companies) and copies of Certificate of Registration and bye-laws (in case of others).
Signatures
related rules & regulations of the bank and hereby agree to abide by the said conditions and such other conditions as may be prescribed by the bank from time to time. All conditions are explained to me / us in my / our mother tongue. In the event of change in address due to relocations or any other reason, I/We will intimate the new address to the bank within two weeks of such a change. I/We, therefore, authorize the Bank to open Account as per instructions herein. In Witness where of, I/We have signed hereunder. *I/We hereby authorise, the GBCB Ltd. to verify in UIDAI website the details of my / our Aadhaar No.
*Place: *Date: d d m m y y y y Signatures / Thumb impression(s) of depositors (with Firm Stamp)
* FOR OFFICE USE (Branch) Certificate by Branch Head / Competent Official I certify that all documentary proofs attached herewith have been duly verified by me with originals and found genuine. KYC/AML Norms of RBI have been duly complied with. Customer has signed in my presence & I have verified the signature hence, customer is accepted. *Risk Classification of Account - Low Medium High
Signature of verifying Employee No. Date / approving official
Only for use of Centralized Processing Office
Document Verified by
Input by Approved by (Signature & Emp. Code) (Signature & Emp. Code)