



The Greater Bombay Co-operative Bank Ltd.

(Scheduled Bank)

Premises 1, Gr. Floor, & Premises 105, 1st Floor, Churchgate Chambers, 5, New Marine Lines,
Sir Vithaldas Thackersey Marg, Churchgate (E), Mumbai - 400 020.

Part - II : Account Opening Form

INDIVIDUAL

CKYC No.:

* Date:

d	d	m	m	y	y	y	y
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 (For office use only) A/c. No.

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* Branch Name :

Type of Account

SYS No. :

* **Customer Status** : Individual Senior Citizen Minor Staff

* **Account Type** : SB - Sweekar Gold Premium Sampoorna Sadhan Basic Savings **Current** **Term Deposit** Others _____

* **Deposit** : ₹ _____ ***Mode**: Cash Cheque Transfer From A/c No.

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Cheque No. _____ Cheque Date _____ Drawn on (Bank) _____

Please tick the type of account to be opened. To know more about various schemes please contact Bank Officials.

*** Details of Applicant(s)**

Sole/First Holder Name: For existing customers CIF No. to be filled in by branch :

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First Name

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 Middle Name

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 Last Name / Surname

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Second Holder Name: For existing customers CIF No. to be filled in by branch :

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First Name

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 Middle Name

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 Last Name / Surname

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Third Holder Name: For existing customers CIF No. to be filled in by branch :

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First Name

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 Middle Name

--	--	--	--	--	--	--	--	--	--

 Last Name / Surname

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Part A

*** Services Required**

- ATM CUM DEBIT CARD** (Charges Applicable for ATM Cum Debit Card)
 ATM CUM / RUPAY DEBIT CARD Name as would appear on the card

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- CHEQUE BOOK:** Required Not required
- MOBILE BANKING:** _____ Yes No I confirm that I have read and understood the terms and conditions for usage of mobile banking services as set forth in www.greaterbank.com.

*** Mode of Operation**

Self Either or Survivor Former or Survivor Any one or Survivor Jointly Other _____

In case of Term Deposit Additionally Fill Part -B

Type of Deposit: F.D. R.B.D. M.R.D. <Special Scheme> _____

Period: _____ Days Months Years Interest payment: Compound Monthly Quarterly

Effective Date: _____ Mode: Account Transfer E.C.S. NEFT Pay Order

Interest Rate : _____ Email Address - _____

15.G / 15.H (In case a person is above 60 age, 15.H is applicable)
(If applicable, 15H and 15G forms are required to be submitted by the customer at the beginning of each financial year during continuation of TD else the TDS will be deducted as per I.T.Act.)

Details of authorized Account for transfer of interest (Credit to Account)

Type: SB Current _____ A/c.No.

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Bank: _____ Branch: _____

Standing Instruction for debiting installment of Monthly Recurring Deposit (Debit to Account)

Type: SB Current _____ A/c.No.

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Branch: _____ S.I. Date: _____ Amount of SI per month ₹ _____

In case of Interest payment by E.C.S. 9 Digit MICR Code

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IFSC Code

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Note : To record ECS/NEFT instruction kindly attach cancelled cheque or photocopy of the cheque.

Premature repayment of Term/Fixed Deposit with "Either or Survivor" or "Former or Survivor" Mandate - Required Not Required

We the undersigned joint holders of above Term/ Fixed accounts, permit the Greater Bombay Co-operative Bank Ltd, to allow premature withdrawal of deposits by one of the joint depositors on the death of the other.

- Auto renewal instructions :
- On maturity, renew the deposit for a further period of _____ months(s)/years(s) at the rate of interest prevailing on the maturity date.
 - Unless you receive from me/us a demand for payment of instructions for maturity proceeds on or before the date of maturity, please renew the deposit for the same period as that of the matured period at the rate of interest prevailing on the maturity date.
 - On Maturity please credit the Principal & Interest to my/our Savings / Current Ac. No. with Greater Bombay Co-operative Bank Ltd..... Branch _____

Please fill if interest credit is required by ECS or NEFT

Please tick appropriate box

* Names of Depositor/s	* Signatures of Depositor/s
1st Holder	
2nd Holder	
3rd Holder	

Part C

