Account Opening Form

Rajadhani Co-op. Urban Bank Ltd		Branch	Current Account No.
Individual / Joint	Proprietary	Partnership	Joint Hindu Family Firm
I/We request you to open a Current Depo	osit Account as per details	given below:	
Name of the Account			
Address			
			PAN / GIR No
Name of Individuals representing the	1		
Concern/ Firm (Proprietor, Partners,	2		
Karta, etc.) and Co-Parceners, in the	3		
case of Joint Hindu Family Firm**	4		
Nature of Business			
Telephone No.	Fax	k No	
E-mail			

Kindly supply me/us with monthly statement of account / pass book and book of cheque forms.

I/We agree to comply with and be bound by the Bank's rules for the time being in force and as amended from time to time for the conduct of such accounts.

*In the case the Joint Hindu Family Firm, a letter in a form signed by all the major co-parceners authorising the karta to operate the account has to be attached.

I/We further declare :

In the case of Joint Account :

The account will be operated by either / by any one of us/ all of us Jointly or by...... and in the event of the demise of any of us, the balance at the credit of the account will be payable to the survivor or survivors. In the event of the account being overdrawn at any time, we agree to be jointly and severally liable for the balance due to the Bank.

In the case of Proprietary Account :

In the case of Partnership Account :

We hereby inform you that we are partners in the above firm and jointly and severally responsible for the liabilities thereof. We shall notify you in writing of any change that may take place in the partnership, (which notice shall not be effective until acknowledged by the Bank), and all the present partners will be liable to you on any obligations which may be standing in the firm's name in your books on the date of acknowledgement of such notice, and until all such obligations shall have been liquidated.

The account will be operated by*

jointly / severally on behalf of the firm whose specimen

signature is given below: (to be signed by each partner of the firm).

F 509 (Revised) (EH) (011271) 50 000 F NRP 10/2004

1.		will sign as
2.		will sign as
3.		will sign as
4.		will sign as
5.		will sign as
6.		will sign as
		b
	C	d
	e	f

Date :

Signature of Depositors (a to f)

* Indicate the names of the partners who will operate. If all will operate, state all of us. Delete the word jointly and severally as the case may be. Partners should sign in their personall capacity.

DECLARATIONS

With reference to the account opened with you, I/we declare :

that I am / we are not enjoying any credit facility with any other bank / any other branch of your bank and I/we undertake to inform you, in writing, as soon as any credit facility is availed of by me/us from any other bank / any other branch of your bank.

(or)

that I am / we are enjoying credit facilities with other branches of your bank / other banks as per details given in the enclosed sheet.

CUSTOMER'S LETTER OF AUTHORITY

For collection and negotiation of bills, etc.

We may have occasion from time to time to hand you for collection or negotiation cheques, Drafts or Bills of Exchange (with or without documents attached) and we hereby agree to your forwarding the same to your branches / Collecting Agents for collection / negotiation through Registered Post or any other authorised independent carrier.

In the event of your having no independent collecting Agent at any centre, we hereby authorise you to send such instruments / documents directly to the drawee bank itself by any of the above said authorised modes of transit.

In the event of loss of an instrument / documents in transit or otherwise, I/we undertake to take up the matter with the drawer for obtaining duplicate / replacement instrument / or provide duplicate documents.

In addition to your ordinary rights as holders of such cheques, drafts or bills of exchange, you are authorised to accept in payment thereof a banker's cheque or banker's cheque on or other cities and in the event of such cheque or cheques not being paid on presentation, to debit the amount to my / our account with all charges incurred thereon.

Date :

Signature of Depositors

Account introduced by

Date :

FOR OFFICE USE

Ownership Code : Date :

Authorised Signatory

NOMINATION

I / We nominate the following person to whom the balance in the account may be paid by Rajadhani Co-op. Urban Bank Ltd, inthe event of my / our / minor's death.

Name and address of Nominee		Relationship	Date of Birth, if nominee is a minor	
			51	

(In case of Nominee is minor)

Place :

Date :

Signature / LTI of depositor(s)

Name(s) and signature of witness (In case of LTI)

1.

2.

Nomination Registered

For Office use

Authorised Officer

ACKNOWLEDGEMENT

Rajadhani Co-c	p. Urban	Bank Ltd		Branch
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Account No. Name of Depositor

Nomination in favour of

dated has been registered in the books of the Bank.

For Rajadhani Co-op. Urban Bank Ltd.

DA1