



ACCOUNT OPENING FORM FOR INDIVIDUAL (Part-1) Customer Information Sheet (CIF Creation / Amendment) (In case of joint accounts, Part-1 (CIF) to be taken for each customer) Branch Name.... Branch Code: Fields marked asterix(\*) are mandatory. Please fill up in BLOCK letters only and use blank ink for signature. I/We request you to open my/our deposit account with your branch/bank as under. (Tick ( 🗸 ) relevant type of account) Customer ID Application Type New Update Account No. CKYC No. (Mandatory for CKYC update request) Account Type Small Minor Staff P.F. No. Normal A. Personal Details Prefix First Name Middle Name Last Name 1.Name \* 2.Date of Birth\* 3.Gender' Transgender Other 4.Marital Status Single Married 5.Name of Father Mother Spouse (Father name is mandatory if PAN is not provided) 6.Nationality\* Others Country Name Indian B. Proof of Identity/Address (Please tick the appropriate Box (any one ID type) and give details) 1.ID type\* Passport Letter issued by National Population Register containing (Mandatory in case of NRI/PIO) Voter's Identity Card **Driving License** NREGA Job Card details of Name & Address (ii) - Offline verification Proof of Possession of Aadhar No. 2. Document identification Number 3.Issued By 4.Issue Date\* 5. Expiry Date (If Applicable) C. Other Details Christian Sikh Other (Please Specify) 1.Religion Hindu Muslim 2.Category General OBC SC ST Minority 3.No. of Dependents 4.Illiterate No If Yes: Identification Marks: Yes Resident Individual Non-Resident Individual Foreign National Person of Indian Origin 5.Residential Status\* Sr. Citizen PF No. Pensioner 6. Customer Type/Status Staff Minor Pardanashin PF No. 7. Name of Guardian 8. Relationship with Guardian No Visually Impaired Differently Abled 9. Person with disability 10.Education Qualification Below SSC SSC HSC Graduate Postgraduate Professional Others Name of Institution/University:...... D. Contact details( All communications will be sent on provided Mobile No./Email-ID) Email ID. Mobile No. Landline Number Alternative Mob No E. Address Details\* (as per Proof of Address submitted at 2. above) 1.Address Type' Residential/Business Overseas (mandatory for NRI/PIO) Residential **Business** Registered Office 2.Address\* 3.City/Village\* 4.District' 5.State\* 6.Pin\* 7.Country 8.Is the address provided above your Current Address ?\* Yes NO If selected 'No', then please provide Current Address at S. No. F along with Documentary Evidence as per S. No. G.)

F. Address Details	Current / Local / Correspondence	
1.Address Type*	Residential/Business Residential Business F	Registered Office Unspecified
2.Address*		
2.7 (dd/000		
3.City/Village*	4.Distric	ct*
5.State*	6.Pin*	7.Country*
G. If the Proof of A		address, please provide any of the documents below as OVD
1.Utility Bill* 2.PF	PO/FPPO* 3.Property or Municipal Tax Receipt*	
1 1		overnment departments, statutory or regulatory bodies, Public Sector undertaking,
	•	e and license agreements with such employers allotting official accommodation. *  uthentication) and address in AADHAAR is not same as Current Address)*
6.Document No*.		7.Date*
	th updated Current Address within a period of three months, failing w	which bank may restrict the operations in the account.(Not Applicable when Self
•	by the customer as per point No.G above)	
H. Tax Proof		
1.PAN*/Tax Identification	n Number or equivalent (If issued by jurisdiction)	(If PAN not submitted, fill form 60)
2.Country of Tax Reside	ence in India only and not in any other country or territory outside	PIndia* Yes No (If No, please fill the FATCA details form-Annexure)
I Income & Profes	ssion / Activity Declaration	
1.Occupation Type*	Private Sector Service Public/Govt. Sector Service	Student Retired Self-Employed Not Working
	Housewife Other (Please specify)	
2.Business	Trader Jeweller Service Provider	Agriculture Stockbroker Manufacturing
(Only if Self-Employed)	Real Estate Other (Please Specify)	
3.Annual Income* (Rs.)	Real Estate   Giller (Fledse Specify)	5.Nature of Business
6.Networth ₹	Income (Spouse/Son)	(Only if Self-Employed)
(Approx. value) 7. Organization Name (Or	nly if Salaried)	
8. Designation / Profession		
(Only if Salaried)  9. Please tick the approp	priate box* Politically exposed person Related to politically	tically exposed person None
(Politically Exposed Persons	s are individuals who are or have been entrusted with prominent public functions by a	a foreign country including Heads of State / Governments , Senior Politicians / Senior Government / Judicial
	n Undertaking Cum Self-Certification  n Undertaking Cum Self-Certification	
I have read the copy of Te	erms & Conditions of the Account opening given to me. The Terms	s & Conditions have been explained to me/us and having understood, I accept the
same. I hereby declare the the PMLA 2002.	at I have submitted the Aadhar Card issued by UIDAI voluntarily fo	or identification and/or address proof towards the compliance of KYC norms under
•	bank may verify the same with the UIDAI and authorize the UIDAI	expressly to release the identity and address through biometric authentication to
the bank.		
	☐ Yes ☐ No (e-KYC authentication and Aad	har seeding is mandatory for availing DBT benefit )
Please Paste		Signature/Thumb impression of the Applicant Please sign in Black Ink
Recent Passport Photo	Size	only
Do not Staple		
	Place	Date
		True control Martin Page 10 and 10 an
FOR OFFICE USE /AT'I	TESTATION Documents received Self certified Digital KYC p	True copies Notary Data Received from offline verification  Data Received from UIDAI  Directors Video based KYC E-KYC Data Received from UIDAI
	ation & documents received as part of account opening proc	ess have been verified and found correct Yes No
	vith opening only when certification is (YES))	ve been explained to the depositor (only in case of illiterate applicant)
Depositor is: Gene		PF No. Risk Category:* High Medium Low
	identification marks, if any, such as a mole or scar (manda	
*	carried out and Signature/LTI of the applicant verified by	
Officer Name :	Designation :	P.F. No. : Date : Date :
Branch Manager:	Designation :	P.F. No. : Signature : Date :

#### ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUAL (PART-II) FOR SAVING BANK, CURRENT ACCOUNT AND TERM DEPOSITS I/We request you to open my/our deposit Account with your branch/bank as under: (Tick relevant type of account) Savings Bank Account **BSBDA** Current Account (Individual) Type of Account Fixed Deposit/Flexi/RD Caps Gain Either or Survivor Former or Survivor Any one or Survivor Jointly operated Others Mode of operation **Expected Annual Credit\*** (Please mark ✓ in appropriate boxes): (Mobile No. is Mandatory for services from I to VIII) A. Facilities Required I ATM-CUM-DEBIT CARD\* Name as would appear on the card II SMS Alert (Charges Applicable) Yes SMS Alerts on registered Mobile Number 1st Applicant Yes III. Passbook Required (SB) Yes 2nd Applicant 3rd Applicant Yes No (Available only for Singly operated accounts and Joint Accounts operated by Either or Survivor mode in case of a/c operated as Former or Survivor mode ATM-cum-Debit Card is available to 1st Applicant only) IV. Internet Banking Yes No V. Mobile Banking Yes No VI. Cheque Book (Only for eligible accounts) Yes No VII. e-statment (at monthly intervals) : Yes No VIII. AePS Services (Debit Transaction) Yes No B. Fixed Deposit: For the following products/facilities, please furnish options/details: Term Deposit Term Deposit (Reinvestment) Tax Saving Scheme Cap Gain (TDR) Amount Deposited from: By Cash By Cheque/DD By Transfer from A/c Interest Payable Frequency: Monthly Quarterly Maturity Auto Renewal: Yes No Auto renew\* Principal only Auto renew Maturity instruction Pay principal Principal Renewal with additional principal & interest \* (Auto Renewal will be done for the similar term at the prevailing interest rate on the date of renewal.) Credit in A/c No Payment instruction (Maturity Proceeds / Residual amount): Cheque/DD C. AUTO SWEEP/FLEXI DEPOSITS Type of Deposit Term Deposit Period of deposit:......years(s) ...... month(s)......days I/We hereby give consent for debiting my/our Savings Bank/ Current Account for creating FLEXI DEPOSIT / AUTO SWEEP as per the Terms and Conditions. Linked Saving Bank/Current Account No. (Under reverse sweep facility for breaking the FLEXI DEPOSIT/AUTO SWEEP, "Last in first out" will be the default option.) RECURRING DEPOSITS Monthly / Core Monthly installment: Rs. \_\_\_\_\_ Rs. (In words) \_\_\_\_\_ Period: \_\_\_\_ Years: \_\_\_\_ Month(s) \_\_\_ Standing instruction (if any) Debit Account No. On Maturity, credit proceeds automatically to Account No. DECLARATION CUM UNDERTAKING CUM SELF-CERTIFICATION (For Point No. B,C,D) I/We undertake that in case of term deposits with operating instructions "Either or Survivor", or "Former or Survivor" in line with the operating instructions of the application-cum-deposit slip, premature termination/payment will be allowed to the survivor in event of the death of the either of the depositors or former as the case may be on submission of the death certificate of the deceased depositors along with application without obtaining consent of the legal heirs of the deceased depositors. (In case of joint accounts, income tax provision will be applicable to primary/ first account holder only.) For the above Term Deposit Account, please deduct applicable TDS from (SB/CA Account No.) Place: Date :..... Specimen Signature / Thumb Impression Specimen Signature / Thumb Impression Specimen Signature / Thumb Impression

	FORM DA-1 (N	lomination Forn	n)					
Type of Deposit: Account Number	:		Regist	ration No.				
Nomination under section 45ZA of the Banking Regulatio								
I/We	Sind Bank,							
I/We want the name of the nominee to be printed on  Details of Nominee Name:	the passbook							
Address		Ε	District	Stat	ePin	code		···
Mobile Number of the Nominee	V D to	E-mail ID :				V V	•••••	
Relationship with the depositor Age Age As the nominee is a minor on this date, I appoint Shri/Smt/		of Birth of nominee(in				ars		
Addressthe minority of the nominee							during	
Signature of the first witness Name: Signature: Address		Signature of the seco Name:		_				
(Witnesses are required only in case, applicant is illiterate a		•	<u> </u>			:		
I/We do not want to nominate any person in this acc	count							1
1st Applicant	2nd /	Applicant			3rd Applic	ant		
Specimen Signature / Thumb Impression	Specimen Signature	/ Thumb Impression		Specime	en Signature / Th	umb Impressio	on	
	FATCA DECLARA	ΓΙΟΝ FORM (Ani	nex-II)	-				
Place / City of Birth :				Tax Residen	ce:			
Tax Identification No. or equivalent if issued by Jurisdiction	•							
Address*								
City/Village*	District*			State	e*			
Country Name*	Zip/Postal Code*							
Date: Place :  DECLARATION CUM UNDERTAKING CUM			Signature					
1. I/We have read the copy of Terms and Conditions of the understood, I/we accept the same. 2. I hereby declare that I do not maintain a Basic Savings 3. I/We hereby give consent for debiting my/our account 4. I hereby declare that I have submitted the Aadhaar Card issued 5. I hereby consent that the Bank may verify the same with authentication to the Bank. 6. (In case of Minor Accounts) I hereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declare that date of birth of the minor whereby declared that date of birth of the m	Bank Deposit Account (BSB for recovering service charged by UIDAI voluntarily for identith the UIDAI and authorise NO (and is my(copy enclosed)	DA) with any other Bass as normally applicable fication and /or address per the UIDAI expressly the E-KYC authentication is	ank/Branch (A ble to Savings broof towards to to release the a & Aadhar so d m m	Applicable is Bank and Ohe compliance identity and ending is may y y y y all future tr	n case of BSBD Current Accoun e of KYC norms u d address throu andatory for ava and I am hi cansactions of a	Account) t. nder the PML igh biometric illing DBT b s/her natur: ny descriptio	A, 2002 c/ OTP enefits) al and on in the	lawful above
7. (Only for Foreign Nationals)  Visa Details				tete		iry Date iry Date		
Place :		2nd Applicant			^	3rd Applican	t	
Specimen Signature / Thumb I FOR OFFICE USE/ATTESTATION	mpression Sp	ecimen Signature / Thumb	Impression		Specimen Sign	ature / Thumb	mpressio	n
Open Account  Date: d d m m y y y y y					(Far. 6	AC . II.		1\
	2. Mobile Banking Ye	s No			(For C	office Us	e on	ly)
3. ATM Card data transmitted on d d m m y y	y y Application No.							
4. Nomination Serial Number	7 ppineation 140.							
5. Threshold (KYC) Limit					(,	Authorised	Signat	tory)
							-=	£
	NOMI	NATION EMENT OVE	RLEAF					

# ACCOUNT OPENING FORM FOR RESIDENT INDIVIDUAL (PART-II) FOR SAVING BANK, CURRENT ACCOUNT

Pho	<b>8</b> o	Signature				(For Office Use)
		h Head				Date Date
Pur BO	-	Sind Bank		Branch Code		
I/W	e hereb	y agree to comply by the Bank's existing Rules	as detai	led in the passbook/AOF/Bank's Website, ç	governing	Savings / Currentaccounts
		t Name*				CIF
		at Name				CIF
3rd /	Applica	nt Name				CIF
				Custo	mer Signatu	re/Photo Scanning Area
	Accou	nt No.				
	Mode	of operation: Self Either or Survivor	Fo	ormer or Survivor Anyone or Survivo	or Jointly C	perated Others
		Applicant-1		Applicant-2		(Please specify) Applicant-3
		Applicalit-1		Applicant-2		Applicant-3
<i>p</i>		DECENIT		DECENT		DECENTE US
Are		RECENT PHOTO		RECENT PHOTO		RECENT Stop PHOTO S
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Scan						ignc
oto ,						ature
stomer Signature/Photo Scanning Area						RECENT PHOTO  Signature/Photo Scanning
atur						oto .
Sign						Scar
ner .		Signature/Thumb Impression		Signature/Thumb Impression		Signature/Thumb Impression
ustoi	N	ame:	Na	ame:	Name	e: 🗦 🗎
Ö						rea
		Signature of specimen witnessing office	r		e of specime	n witnessing Branch Manager
	P.F.	No	_	P.F. No.		
	Dat	e:		Date:		
				Customer Signature/Photo Scanning Area		
Q	_					~ 0
>	NOW					· <del>-</del>
		wledge receipt of nomination made by yo	u in fav	your of :	te:	पंजाब एण्ड सिंध बेंक Punjab & Sind Bank
		he Nominee		Du		र्थनाम औंक निय सेंक (सामान समार / A Gor, al role indeplantancy
		ect to your Account No.	········	Age	15418	Yours faithfully
		on No.	11			Cioretta al De 1 om 11
1108	,					Signature of Bank Official (with seal)



## TERMS & CONDITIONS AND DECLARATION FOR OPENING OF DEPOSIT ACCOUNT

1.I/We confirm that I/We have been informed that the holder of Basic Saving Bank Deposit Account will not be eligible for opening any other Saving Bank Deposit Account in the same bank. BSDBA holder will be required to close all existing saving fund account in our Bank within 30

days from the date of opening of the account.

2.I/We hereby declare that the details above in this form including details in Annexure 1 and Annexure 2 are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I /We am / are  $\,$  aware that I /We may be held liable for it.

3.I /We agree to be bound by the terms & conditions, Instructions etc. as listed below & Annexure FATCA/CRS and by the rules of Punjab & Sind Bank and the RBI and any subsequent amendment(s). My/Our personal / KYC details may be shared with Central KYC Registry. I/We hereby consent to receiving information from Central KYC Registry through SMS / Email on the above registered number / Email address

4.I/We hereby give my consent to download my KYC records from the Central CKYC registry (CKYCR) only for the purpose of verification of my identity and address from the database of CKYCR registry. I understand that my KYC record include my KYC record/personal information such as my name/address, date of birth, PAN no. etc.

5.In case of FDR / RD in joint name with mode of operation Either or Survivor, any one can apply loan against the same. And anyone can also apply for premature payment/payment on maturity. 6.I/We hereby declare that in case of any credit facility is to be availed from any Banks/FIs in the future, the same will be informed in advance. (Applicable when opening Current Accounts).

7.I affirm and declare that I have read over and understood the rules and regulations of the "Bank" and those relating to various services offered by the Bank including but not limited to debit card/internet banking/SMS banking/whatsappBanking/Tele-Banking/Mobile Banking /Virtual Banking and any other facility. I agree to abide by the same as amended/modified from time to time by the Bank/Regulator/Government published through circulars, notifications, notice board/websites/newspaper publications etc. I waive the rights, if any, to have personal notice in respect of such amendments/modifications. I agree that the transactions and requests executed in my account(s)through internet, mobile, telebanking or virtual banking under my User ID and password/PIN/OTP will be legally binding on me & I am responsible for the maintenance of secrecy and confidentiality of the authentication credentials and any other information/details/OTP/PIN, etc., in such matters. I agree that Bank has got all the rights to debit my account for any service charge, expenses or other, dues which the Bank is entitled/ liable to recover from me. I also authorize the Bank and agree to close/discontinue my account without any notice to me. I hereby undertake to inform the Bank on any change in my communication address or constitution.

8.In respect of accounts opened on the basis of Aadhaar details, I hereby declare that I have submitted the Aadhaar Card issued by UIDAI voluntarily for identification and /or address proof towards the compliance of KYC norms under the PMLA, 2002 and I hereby consent that the Bank may verify the same with the UIDAI and authorize the UIDAI expressly to release the identity and address through biometric authentication to the Bank. My Aadhaar number is NOT Seeded with any Bank: I wish to seed this account with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) to avail benefit under Scheme(s) notified under Section (7) of the Aadhaar Act. For this, I hereby declare that I have submitted the Aadhaar Card issued by UIDAI.

9.I confirm and declare that I am not prevented/prohibited/restricted by any applicable legal/regulatory/contractual or other provisions from opening and/or maintaining the accounts or

to transact with the Bank in any other way.

10. I agree that my personal KYC details may be shared with Central KYC registry or any other competent authority. I hereby consent to receive information from the Bank/Central KYC Registry/GOI/RBI or any other authority through SMS/e-mail on my registered mobile number/email address. I also agree that the non-receipt of any such SMS/e-mail shall not make the Bank

liable for any loss or damage whatsoever in nature.

11. I hereby certify that I have declared my status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No. S.O. 2155(E) dated 7 August 2015 and RBI Circular Ref No. DBR.AML.BC.No.36/ 14.01 .001/2015-16 dated 28 August 2015 in the matter including any subsequent modification/amendment thereof

12. I understand, acknowledge and authorize that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government /RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account(s) as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and I or any other similar arrangements.

13. I certify & declare that the information provided by me for opening loan account and availing

other services herein or through website/electronically as applicable to me signed/authenticated other services nerein or through website/electronically as applicable to me signedraturenticated by me as well as in the documentary evidence provided by me for opening loan account and availing other services are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may afect the assessment categorization of my account as a U.S. Reportable Account or Other Reportable Account or otherwise. In case any of the information or details provided by me is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

14. I undertake the responsibility to declare and disclose immediately and in no case beyond 30 days from the date of change, any change that may take place in the information provided herein/or otherwise, as well as in the documentary evidence provided by me or if any certification becomes incorrect or undergoes a change. I further undertake to provide fresh and valid self-certification along with documentary evidence as and when so required nevertheless all declaration and undertaking given herein will also be applicable to all such modified/amended document information provided by me unless revised self-certification as above is provided to the

15.I also agree that my failure to disclose any material / information known to me now or ir future or my failure to rectify any deficiency in documents/information/other details within the stipulated period, may invalidate me from transacting in the account and the Bank would be within its right to put restrictions in the operations of my account or to close it or to report to any regulator and/or any authority designated by the Government of India(GOI)/RBI for the said purpose or take any other action as may be deemed appropriate by the Bank under the guidelines issued by CBDT/RBI/Gol from time to time.

16.I also agree to furnish and intimate to the Bank any other particulars that are called upon me

to provide on account of any change in law either in India or abroad in the above matter or

17.I shall indemnify the Bank from any loss/damage that may be caused to the Bank on account of any mistake in the details provided herein or on account of providing incorrect or

18.I undertake to submit data/information together with fresh KYC documents for updating of KYC details at periodical intervals as may be required by the Bank.

19.I understand that the account will be activated, and debits will be allowed only after completion of Customer Due Diligence relating to KYC by the Bank.
 20.In case the account is opened without PAN, I undertake to submit PAN on or before such

date as may be notified by the Government of India, failing which the account shall cease to be operational till the time PAN is submitted, as per Prevention of Money -Laundering (Maintenance of Records ) Rules 2005.

21.In case, deemed OVDs are submitted for Current Address at the time of Account opening, I

undertake to submit Aadhaar or any of the OVD having Current Address within 3 months from the date of account opening, failing which I understand that my account may cease to be operational as per GOI guidelines at the material time.

22.I have received the Welcome Kit containing ATM card/cheque book and understand that in case of any misuse/misplacement of the contents of the Kit, the Bank will not be liable for any loss/damage.

23.I hereby certify that the Savings Bank Account would be used by me to route transactions of only non-business/non-commercial nature. In the event of occurrence of such transactions or any such transactions that may be construed as commercial/business/dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such account and /or close the

24. have been advised Quarterly Average Balance(QAB) requirement for the account to be opened and given to understand that these requirements are subject to revision/changes and such revision/changes will be uploaded in the Bank's site which will be acceptable to me as a notice to that effect.

25.I confirm that the product features of BSBD account have been explained to me(applicable to BSBD account applicant)

26.I acknowledge receipt of rules and regulations of Savings Bank Account.

27.Applicable for Small Accounts: I/We understand that this account shall remain operational initially for twelve months which can be extended for further twelve months on submission of having an OVD (Officially Valid Document). The entire relaxation/provisions shall be reviewed after twenty-four months.

28.I/We have been advised that if I/We do not provide my/our mobile number, I/We will not be eligible for any facility of electronic transactions

29.(Applicable for accounts opened for credit of Social Welfare Benefits), I understand that this account will be opened under BSBD category. I also understand that in case, I do not wish to continue in this BSBD account, and switch over to Regular Savings Bank account, I will have to maintain the Quarterly Average Balance (QAB) applicable for Regular Savings Bank Account .I therefore undertake to maintain QAB in the account if I switch over to Regular Savings Bank Account from BSBD.

30. (Applicable for accounts opened in the name of Minors), I understand that the requirements of QAB and penalty for non-maintenance will be applicable in this account once the applicant

becomes Major. I therefore undertake to maintain QAB from the date of attaining majority.

31.I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately in case any of the above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.

32.I/We confirm that the product features of account have been explained to me.
33.I/We hereby give consent for debiting my/our account for recovering service charges as normally applicable to Savings Bank and Current Account.

34.1 confirm and undertake that I will not deal in virtual currencies and will not use my account for any services relating to virtual currencies or facilitate any person or entity in dealing with or settling Virtual Currencies.

35.I understand that in the event of failed Standing Instruction for Loan Repayment/dishonor of cheque/NACH/ECS due to lack of funds / insufficient funds on 04 occasions during financial year, no fresh cheque book would be issued, closure of account may also be considered.

36.Documentary evidence must be submitted for proof of Annual Income/ Annual Turnover. Bank will set Account level Threshold limit based on expected Annual Credits declared by the customer. In case, Self Declaration is submitted for Annual Turnover/ Income/expected Annual Credits, lower Threshold limit, as decided by the Bank from time to time will be fixed and If Threshold Limit is breached, further credits will not be allowed in the Account till the time documentary evidence is submitted by the Customer.

37. I/We hereby authorise the Punjab & Sind Bank to use my/our Know Your Customer (KYC) details for the purposes of account validation, marketing and personalized services

38.I/We acknowledge that I understand the potential risk of fraud associated with not receiving SMS notifications. Despite this, I choose not to provide my mobile number for SMS registration.

Date:

Signature/Thumb impression of the 1st Applicant. Please sign in Black Ink only	

Date:

Signature/Thumb	impression of the 2nd Applicant.
Please	sign in Black Ink only

Date:

Signature/Thumb impression of the 3rd Applicant. Please sign in Black Ink only

# Income-tax Rules, 1962 FORM NO.60 [See second proviso to rule 114B]

Formfor declaration to befiledbyanindividualor aperson (not being a companyor firm)who does not have a permanent account number and who enters into any transaction specified in rule 114B

1	Firs		Middle			Surname				
	Ntame	D: # //	Name				<u> </u>		1	_
2		Birth / Incorporation of declarant								
3		Name(in case of individual)	-							
4		/Floor No.	-							
5		f premises / Block Name & No.	-							
6		Street / Lane	-							
7	Area / L	,	-							
8.		strict/State	-							
9	Pin code		1							
10	Mobile I	ne Number (with STD code)	+							
11 12										
13		ofTransaction (Rs.) transaction	1							
14		oftransactionin joint names,								
	transact	of persons involved in the								
15		ftransaction Cash Cheque Ca	rd Droft/E	Banker's (	Shoarro	Online trar	actor	Oth	or	
16		r Number issued by UIDAI (if availab		Dalikei 5 (	Jileque	Offilitie trai	13161	Oti	ici	
17		d for PAN and it is not yet generated		of applic	ation and	acknowledg	nemer	nt nur	nher	
' '		Date:				acitiowica	gorrioi	it mai	iiboi	
18	If PAN r Income- (Rs.)	not applied, fill estimated total income tax Act, 1961) for the financialyear in 	e (including n which the (Rs.)	income o above tra	ofspouse, ansaction	minor child isheld (a) A	etc., a gricul	as pe tural i	r section ncome	64 of
19	Details	ofdocument being producedin	Docume	nt Do	cument	Name a	nd ad	dress	of the a	uthority
		ofidentityin Column1 (Refer	code	ide	ntification				locumen	
	Instructi	on overleaf)		r	number		_			
20	Details	of document being produced in	Docume	nt Do	cument	Name a	nd ad	dress	of the a	uthority
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	(Refer I	nstruction overleaf)		r	number					
			Verifica	ation						
l,					do her	eby declare	e that	what	is stated	d above is
true t	o the bes	t of my knowledge and belief. I furthe	er declare th	nat Ido no						
estim	ated tot	al income (including income of	spouse, m	inor child	d etc., a	s per sect	ion 6	4 of	Income	Tax Act,
		edinaccordancewith the provisions				the financ	ial ye	ar in	which t	he above
trans	action is l	neld will be less than maximum amou	nt not charg	jeable to t	ax.					
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v ei ili	eu iouay	the	uayul_			_20				
Place	:				(Sig	nature of de	eclara	nt)		

Note: Before signing the declaration, the declarantshould satisfyhimselfthat theinformation furnished inthis formistrue, correct and completein allrespects. Anypersonmaking a false statement in the declaration shall be liable toprosecutionunder section 277 of the Income-tax Act, 1961 and on conviction bepunishable,

- (i) in acase where tax sought tobe evaded exceeds twenty-five lakh rupees, with rigorousimprisonment which shall not beless than six months but which may extend to seven years and with fine;
- i) in anyother case, withrigorous imprisonment which shall not be less than three months but which may extend to two years andwith fine.

### Instruction:

(1) Documents which can be produced in support of identity and address (not required if applied for PAN and item 16 is filled):-

SI.	Nat	ure of Documents	Document Code	Proof of Identity	Proof of Address				
Α	For	Individuals and HUF							
	1	AADHAR Card	01	Yes	Yes				
	2	Bank/Post office passbook bearing photograph of the person	02	Yes	Yes				
	3	Elector's Photo identity card	03	Yes	Yes				
-	- 1	Ration/Public Distribution System card bearing photograph of the person	04	Yes	Yes				
	5	Driving License	05	Yes	Yes				
	6	Passport	06	Yes	Yes				
	7	Pensioner Photo Card	07	Yes	Yes				
	8	National Rural Employment Guarantee Scheme (NREGS) Job Card	08	Yes	Yes				
	9	Caste or Domicile certificate bearing photo of the person	09	Yes	Yes				
		Certificate of identity/address signed by a Member of Parliament or Member of Legislative Assembly or Municipal Councillor or a Gazetted Officer as per annexure A prescribed in Form 49A	10	Yes	Yes				
	11	Certificate from employer as per annexure B prescribed in Form 49A	11	Yes	Yes				
	12	Kisan Passbook bearing photo	12	Yes	No				
Ī	13	Arm's license	13	Yes	No				
		Central Government Health Scheme / Ex-servicemen contributory Health Scheme	14	Yes	No				
	15	Photo identity card issued by the Government/Public Sector Undertaking	15	Yes	No				
Ī	16	Electricity bill (Not more than 3 months old)	16	No	Yes				
Ī	17	Landline Telephone bill (Not more than 3 months old)	17	No	Yes				
	18	Water bill (Not more than 3 months old)	18	No	Yes				
	19	Consumer gas card/book or piped gas bill (not more than 3 months old)	19	No	Yes				
Ī	20	Bank Account Statement (Not more than 3 months old)	20	No	Yes				
	21	Credit Card Statement (Not more than 3 months old)	21	No	Yes				
Ī	22	Depository Account Statement (not more than 3 months old)	22	No	Yes				
f	23	Property registration document.	23	No	Yes				
Ī	24	Allotment letter of accommodation from Government	24	No	Yes				
	25	Passport of spouse bearing name of the person	25	No	Yes				
Ī	26	Property tax payment receipt (Not more than one year old)	26	No	Yes				
В	For	Association of persons (Trusts)							
		by of trust deed or copy of certificate of registration issued by Charity nmissioner.	27	Yes	Yes				
		For Association of person (other than trusts) or Body of Individuals or Local authority or Artificial Juridical Person)							
	com auth	by of Agreement or copy of certificate of registration issued by Charity missioner or Registrar of Cooperative society or any other competent nority or any other document originating from any Central or State vernment Department establishing identity and address of such person.	28	Yes	Yes				
D	For	a foreign company		-					
		by of Certificate of Registration or incorporation issued in the country where applicant is located, duly attested by authorised officials of IFSC banking unit	29	Yes	Yes				
		py of tax identification number issued in the country where the applicant ocated, duly attested by authorised officials of IFSC banking unit	30	Yes	Yes (If address mentioned in the same)				

<sup>3.</sup> In case of a transaction in the name of a Minor, any of the above-mentioned documents as proof of Identity and Address of any of parents/ guardians of such minor shall be deemed to be the proof of Identity and address for the minor declarant, and the declaration should be signed by the parent/guardian.

<sup>4.</sup> For HUF any document in the name of Karta of HUF is required.

<sup>5.</sup> In case the transaction is in the name of more than one person the total number of persons should b SI. No. 19 and the total amount of transaction is to be filled in SI. No. 17.

<sup>6.</sup> In case the estimated total income in column 23b exceeds the maximum amount not chargeable to ta should apply for PAN, fill out item 22 and furnish proof of submission of application.]