



THE ANANTAPUR DISTRICT COOPERATIVE CENTRAL BANK LTD.,

(Fully Computerised)

Head Office : Subash Road, Anantapuramu - 515001 (Andhra Pradesh)

Branch : _____

APPLICATION FOR OPENING ACCOUNT TO THE FARMERS OF PACS

To

Date:

The Branch Manager,
ADCC Bank Ltd.,

CBS Client A/c No. _____

_____ Branch.

Dear Sir,

I request you to open an account in my name in the books of the Bank. The rules and regulations of the Bank pertaining for opening of an account, which are in force now, have been read by me and understood the same. I agree to abide by and be bound by the Bank's rules for the time being in force for such accounts.

PERSONAL DETAILS

FIRST NAME	MIDDLE NAME	SURNAME
Applicant Mr./Mrs./Ms.		
Father / Husband Name :		
Name of the Parent/Guardian (In case the applicant is a minor) :		
Date of Birth : (DD / MM / YYYY) :		Age :

Mailing address : _____

_____ Pin code _____

Telephone No. _____ Mobile No. _____ E-mail _____

Name of the PACS: _____

G. No. _____ CKCC Loan No. _____

PHOTO	Specimen Signature-1	Specimen Signature-2	Specimen Signature-3
Affix recent photograph			

MINOR'S ACCOUNTS

I hereby declare that I represent the said Minor as Natural Guardian OR appointed by the Court in all future transactions of any description in the above until the said Minor attains majority. I shall indemnify the Bank against the claim of above Minor for any withdrawal / transaction made by me in his / her account, as per the Indian Contract Act.

Relationship with the Minor :

Signature of the Guardian with Date:

NOMINATION DETAILS

I nominate the following person to whom in the event of my / our / minor's death, the amount of the deposit outstanding in my / our account, opened herewith, may be returned by you, as per Sec.45 of BR ACT.

Name & Address of the Nominee		Age:
Relationship with the depositor/s, if any :		Date of Birth (if Nominee is a minor)

As the nominee is a minor on this date, I appoint Mr/Ms..... aged..... years residing at to receive the deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee (When a deposit is made in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor)

Date: Signature(s) of the APPLICANT

ACCOUNTS OF DEPOSITORS USING THUMB IMPRESSION:

Attester's Name and A/c. No.:

Full address of the Attester :

Signature of the Attester with date

INTRODUCER'S DETAILS (FOR NEW CUSTOMER)

I know the depositor/s since..... years. I confirm the identity and address of the applicant(s).

Name: Customer ID No.

A/c. No.

Date: Signature of the Introducer

OR

Attach copy of anyone:

Valid Passport ☐ Aadhar Card ☐ Election ID Card ☐ PAN Card ☐ Employer's ID ☐ Card Driving License

(FOR BANK USE ONLY)

Identity and Address proof of the customer is verified and Signature of introducer verified and account is opened as per information furnished by depositor(s) exercising due diligence.

Date: Account No. Officer II Officer I / Manager

Please present any of these originals for reference and Return. A copy to be submitted for Branch Records.

- A] FOR PROOF OF IDENTITY AND ADDRESS OF THE DEPOSITOR/ACCOUNT HOLDER(S)
- Passport Copy / Photo Credit Card / Adhaar / Voter's ID Card / Employee ID Card / Gas Connection Receipt / Latest Electricity Bill / Driving License (laminated card) with Photograph/Latest Telephone Bill / Ration Card / PAN Card or Form 60/61 in lieu of PAN Card
- Introducer's Confirmation>> Any Other State / Central Govt. Document evidencing Address/ Identity or Local Body / NGO / MFI or Tahsildar.
- B] ADDITIONAL DOCUMENT REQUIRED
- + Proof of PAN
 - + Proof of Age in case of Senior Citizens
 - + Latest passport size photograph (2 copies)
- Note: (Including for Minor's Parents or Guardian / Individual Partners / Directors / Trustees / HUF Members / or Karta/Proprietor etc.,)