



Bank of Maharashtra

Bank with personal touch – One Family One Bank – Bank of Maharashtra

Account No.

Branch Name

Branch Code

Current Account Opening Form for Indian Residents

Documents obtained (Please tick on appropriate clause)

- Account opening form
- Customer Information forms for all applicants / signatories
- Identity Proof for each individual applicant
- Address Proof for each individual applicant
- Undertaking for account opened under relaxed KYC Norms, where Identify/Address proof not submitted
- Undertaking by Guardian for Minor's accounts
- HUF Letter for Joint Hindu Family Accounts
- Form 60/61 in case, PAN not available
- Any other, _____
- In case of Non-Individual customers, Customer information form for Non-individuals and all required documents listed on page 2 of Customer information form for Non-Individuals

FOR BRANCH USE

| | | |
|---|--|---|
| Letter of thanks/ Letter for confirmation sent to • Introducer Date: _____ • Customer Date: _____ | Account opened by Name of the operator _____ Signature of the operator. | Risk Classification High / Medium / Low Name of the Authorised Official _____ Signature of AO with Code No. |
|---|--|---|

Observations of the Official opening the account briefly indicating the reasons for risk classification

Approvals

- Approved for issue of cheque books
- Approved for issue of Mahabank Debit card
- Approved for access to the following delivery channels
 - Phone Banking Mobile Banking Internet Banking Others _____

Signature of authorised Official

Date / /

Approvals - Delivery Channel Requests

| | | |
|--|---|---|
| Mahabank debit Card Request ID _____ Primary Card _____ Add on Card 1 _____ Add on Card 2 _____ | Internet Banking <input type="checkbox"/> Enquiry and request only <input type="checkbox"/> Including financial transactions Request ID _____ Mode of operation - Singly / Jointly / Severally | Mobile Banking Request ID _____ Phone Banking Request ID _____ Cheque Book Request ID _____ |
| Entered on / / | Entered by _____ | Verified By _____ |

Please tick and fill in details wherever applicable
Instructions for Account Operation

| | | | | |
|--|---|---------------------------------------|--|---------------------------------------|
| For Individuals | <input type="checkbox"/> Singly | <input type="checkbox"/> Jointly | <input type="checkbox"/> Any one severally | <input type="checkbox"/> Other _____ |
| For Firms/ Companies | <input type="checkbox"/> As per Partnership deed dated _____ <input type="checkbox"/> As per Resolution dated _____ <input type="checkbox"/> Jointly by all signatories <input type="checkbox"/> Other _____ (Copy of the partnership deed / resolution enclosed) | | | |
| Balance Payable to – | <input type="checkbox"/> Self <input type="checkbox"/> Jointly to all <input type="checkbox"/> Anyone or survivor <input type="checkbox"/> As per Partnership Deed / Resolution <input type="checkbox"/> Other _____ | | | |
| Additional Facilities Required | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Mahabill Pay | <input type="checkbox"/> Bancassurance | <input type="checkbox"/> Others _____ |
| Statement Requirement (Charges Applicable based on frequency) | | | | |
| <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____ | | | | |
| Access Channels Required | <input type="checkbox"/> Debit Card <input type="checkbox"/> Add-on Card <input type="checkbox"/> Internet Banking <input type="checkbox"/> Mobile Banking <input type="checkbox"/> Phone Banking | | | |

Request for Mahabank debit Card (maximum 19 characters for cardholder's name)

A. I / We request for issue of Mahabank debit card

Primary Card (Name of first applicant) _____

Add on Card 1 (Name of the joint applicant 1) _____

Add on Card 2 (Name of the joint applicant 2) _____

B. I / We authorise the bank to levy applicable fees and charges as prescribed from time to time

Request for Phone Banking

I / We register my /our Fax No. for Phone Banking - Fax No.

In case of joint accounts / HUF all authorised signatories hereby give consent to avail the service

In case of trusts, charitable institutions, societies, etc. persons listed as authorised signatories as per resolution are authorised to avail the service

Request for Internet Banking

I / We apply and would like to register for internet banking facility -

For inquiry and request only

For inquiry, requests and financial transactions (Funds transfer between my/our own accounts and to third party accounts maintained with the bank, utility payments, etc.)

| | User name | Login ID Preference (10 digits) | Email Address |
|----|-----------|---|---------------|
| 1) | _____ | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | _____ |
| 2) | _____ | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | _____ |
| 3) | _____ | <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> | _____ |

I/We request the bank to link my / our D-mat account to my/our internet banking ID for enquiry only. My client ID is _____

In case of joint accounts and HUF all signatories / members have read and agreed to abide by the terms and conditions governing the said internet facility and authorise above-mentioned user/s to access and operate this account through internet facility

In case of trust / society etc. above mentioned users are authorised as per the resolution (Copy attached).

Request for Mobile Banking

I / We register my / our mobile number/s for mobile banking facility

| | Names of persons authorised to avail Mobile banking facility | Mobile No |
|----|--|-----------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |

In case of joint accounts and HUF accounts all the joint holders/coparceners hereby give consent to nominate the above mentioned person/s

| | | | |
|--|-------------------|------------------------|-----------------------|
| Please tick and fill in details wherever applicable | | | |
| Any accounts with other banks <input type="checkbox"/> Yes <input type="checkbox"/> No | | Main Bankers _____ | |
| Details of Accounts and / credit facilities with other banks, if any | | | |
| Name of bank & branch | Account No | Credit Facility | Balance Amount |
| | | | |
| Nomination details, if any, as per enclosed nomination form (Only for Individuals / Joint Individuals / Proprietorship) | | | |

Authorisation and Undertaking by applicants

I / We confirm that we have read and understood the account Rules and I / We hereby accept and agree to be bound by the terms and conditions, outlined in these rules which govern the above selected account and services and amendments there to made by the Bank from time to time.

We request you and authorise you until any notice in writing to the contrary is given to you by either/any of us, to honour all cheques, Bills of Exchange, Promissory Notes, and other orders, drawn accepted or made on the said Account by _____, and to act on any instructions so given relating to the account, whether the account be in credit or overdrawn. In the event of such notice, the account will be operated by both / all of us jointly. We shall be jointly and severally liable on all such cheques, Bills of Exchange, Promissory Notes and Orders honored by you as aforesaid, and for any overdrafts created in our account, together with interest and charges.

I/We agree that the bank may debit my/our account for service charges/ incidental charges as applicable from time to time. I / We understand that the bank may at its absolute discretion discontinue any of the services completely or partially and / or close the account without any notice to me/us in case account operations are not satisfactory which include frequent dishonour of cheques / dishonour of high value cheques, etc. In the event of death, insolvency or withdrawal of any one or more of us the monies then and thereafter standing at the credit of the said account and / or any securities held by you in our account be at the disposal of the survivor or survivors of us.

I/We confirm that I am / We are resident of India and I / we certify that the information furnished above is true and correct to the best of my/ our knowledge. I/We authorize the bank to verify the details given therein through any third party as necessary. I/ We also authorise issuance of Mahabank Debit card / Phone Banking / Mobile banking / Internet Banking facilities, and or any other Mahabank facilities with linkage to the account. I/ We undertake to ratify and confirm the transactions that the user /s do /es or cause/s to do through any of the above mentioned multiple delivery channels. This authority shall be in force until any one of us revokes by a notice in writing delivered to the bank and duly acknowledged by the bank.

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| Affix recent photo of 1st applicant/ signatory |
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| Affix recent photo of 2nd joint applicant/ signatory |
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| Affix recent photo of 3rd joint applicant/ signatory |
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|--|
| Affix recent photo of 4th joint applicant/ signatory |
|--|

| | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| _____ Signature of 1st Applicant | _____ Signature of 2nd Applicant | _____ Signature of 3rd Applicant | _____ Signature of 4th Applicant |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|

(Please sign in black ink inside the blocks provided above. Applicants should also sign across photographs)

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| Note: Customer is requested to contact the branch for a copy of terms and conditions |
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