

(To be filled in by Bank) (ଟିଆଁଫ ଓ କ୍ଷେତ୍ରାକ୍ଷ)

**Branch Name / མཁའ་ཁྲུ ལྟམ་**

[illegible]

Customer Signature Scanning Area / පාරිශ්‍රයාගේ අත්සන සැකය ස්ථානය	
<div style="border: 1px solid black; padding: 10px; text-align: center; margin-bottom: 10px;"> <b>Photograph</b>  <b>චිත්‍රපට</b> </div> <p style="text-align: center;">Please affix a recent passport size photograph</p>	<div style="border: 1px solid black; padding: 10px; text-align: center; margin-bottom: 10px;"> <b>Photograph</b>  <b>චිත්‍රපට</b> </div> <p style="text-align: center;">Please affix a recent passport size photograph</p>
<p style="text-align: center;">Specimen Signature 1st Applicant 1<sup>st</sup> අයදුම්කරුගේ අත්සන</p>	<p style="text-align: center;">Specimen Signature 2nd Applicant 2<sup>nd</sup> අයදුම්කරුගේ අත්සන</p>

To / 58

**PUNJAB & SIND BANK / ਪਾਣਡੇਬ ਆਂਡਰ ਆਂਡ ਚੰਘਘ**

Date /ᄃᄃ .....

Branch Office / ଝାଣେଇସା .....

Please open

## Saving Account

## Current Account

## ମାଟିର ଘର

ಗೌರವೀಯ ಆಂಶೋದ್ಭವ

ਅੰਮ੍ਰਿਤਸਰ ਆਖੰਡਲ

Name / Title of Account / <b>ಹೆಸರು/ಉದ್ದೇಶದ ಯೋಜನೆ</b>	
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**1. Personal Details / ນັ້ນ ພຣະ : (Please leave one space between words) (To be filled in Capital letters)**

[illegible]1st Applicant / 1<sup>st</sup> අයදුම්කරු2nd Applicant / 2<sup>nd</sup> අයදුම්කරු

2. Gender /ආලේඛන ☐ Male/පැර ☐ Female/පැර ☐ Third Gender/3<sup>rd</sup> ආලේඛන ☐ Male/පැර ☐ Female/පැර ☐ Third Gender/3<sup>rd</sup> ආලේඛන

- 3. Date of Birth / ଖଞ୍ଜି ଏବଂ ପ୍ରାପ୍ତ**

- #### 4. PAN/ཀའུ

(Fill Form 60/61 as applicable if PAN is not submitted)

- 5. Communication Address\*** / **যোগাযোগের ঠিকানা**

<b>Permanent / Registered Address (Land Mark is compulsory) /</b> <b>நடுநிலை முகவரி (புவன அடையாளம் கட்டாய)</b>	<b>Correspondence Address (Land Mark is compulsory) /</b> <b>தொடர்பு முகவரி (புவன அடையாளம் கட்டாய)</b>
..... ..... State/குறுக்கு ..... <b>Pin Code/பின் குறியீடு .....</b> <b>Nationality/பௌதிக ராஜ்யம் .....</b>	..... ..... State/குறுக்கு ..... <b>Pin Code/பின் குறியீடு .....</b> <b>Nationality/பௌதிக ராஜ்யம் .....</b>
<b>Phone/Mobile No./</b> <b>ஹேண்ட் செட் நம்பர் .....</b>	<b>Phone/Mobile No./</b> <b>ஹேண்ட் செட் நம்பர் .....</b>
<b>E-mail ID /</b> <b>மின்னஞ்சல் முகவரி .....</b>	<b>E-mail ID /</b> <b>மின்னஞ்சல் முகவரி .....</b>

(\*In case of joint holders' address, fill the annexure for joint holders)

6. Staff/ᄆᄆᄆᄆ ☐ Yes Staff ID / PF Code ☐ No.

7. Minor/ਛੋਟਾ ☐ Yes (If yes, furnish below details) ☐ No.

[illegible]

- ### 8. Account Operating Instructions/ආකාශන ගිවිසුමේ ප්‍රවේශය

- ☐ Single/တစ်ဦးတည်း ☐ Either / Any one or Survivor (s) ☐ Jointly or Survivor(s)

9. **Deposit Details:** /ଜମାବଣ୍ଟିର ଜମାବଳୀ Amount /ମାତ୍ରା ☐ Cash /ମାତ୍ର

- ☐ Cheque No./ಸಂಖ್ಯೆ \_\_\_\_\_ Dated/ದಿನ \_\_\_\_\_ Drawn on \_\_\_\_\_ Bank/ಬ್ಯಾಂಕ್ \_\_\_\_\_ Branch/ಶಾಖೆ \_\_\_\_\_

- ### 10. Request for Seeding of Aadhaar Number /ଆଜ୍ଞାପନ අନୁରୋଧ

- ☐ Yes/हाँ (If yes, please provide the Aadhaar Number)      ☐ No/नहीं (I/We do not wish for seeding of Aadhaar Number)

[illegible]

**11. Tax residence declaration under FATCA-CRS** /FATCA-CRS നම් ಹඳුන් උදෙසා වාර්ෂිකව පත්‍රයක් සපුරාලන්න.

Tax residence declaration-Tick any one, as applicable to you	<input type="checkbox"/> I am/We are/Entity is a/the tax resident of India and not resident of any other country/ies.
	<input type="checkbox"/> I am/We are/Entity is a/the tax resident of other country/ies.
Note: If the customer declares that he/she is tax resident of other country/ies , other additional details in the FATCA -CRS declaration form as per Annexure-I for Individuals / Annexure-II for entities must be procured.	

12. **Occupation Details/වෘත්තීය ක්‍රියාකාරීත්වය** ☐ Salaried ☐ Self Employed ☐ Retired ☐ Housewife ☐ Student ☐ Others \_\_\_\_\_

If salaried, employed with ☐ Pvt Ltd. ☐ Public Ltd. ☐ Partnership ☐ Proprietorship ☐ Govt. ☐ Others \_\_\_\_\_

Self Employed since \_\_\_\_\_ Years \_\_\_\_\_ Months      Date of Incorporation \_\_\_\_\_

Establishment Name \_\_\_\_\_

Nature of Business ☐ Manufacturing ☐ Service Provider ☐ Trader ☐ Agriculture ☐ Others \_\_\_\_\_

Type of Company ☐ Sole Proprietorship ☐ Partnership ☐ Public Ltd ☐ Pvt Ltd ☐ Others \_\_\_\_\_

Registered Office Type ☐ Owned ☐ Rented / Leased

Self Employed Professional ☐ Doctor ☐ CA/CS ☐ Lawyer ☐ Architect ☐ Others \_\_\_\_\_

Source of Fund ☐ Salary ☐ Business ☐ Agriculture ☐ Investment Income ☐ Others \_\_\_\_\_

Grant Amount ☐ P. 1,00,000 ☐ P. 1,00,000+ ☐ P. 5,00,000 ☐ P. 5,00,000+ ☐ P. 10,00,000

Gross Annual Income ☐ <Rs. 1,00,000 ☐ Rs. 1,00,000 to Rs. 5,00,000 ☐ Rs. 5,00,000 to Rs. 10,00,000  
☐ Rs. 10,00,000 to Rs. 15,00,000 ☐ > Rs. 15,00,000

☐ Rs. 10,00,000 to Rs. 15,00,000 ☐ > Rs. 15,00,000

**13. Internet Banking Services\* :** /ನರಸಾಹುರಾಂ ಸಂಪರ್ಕಿತ ಗಣಕೀಕೃತ (a) ☐ I / We wish to apply for PSB Internet Banking Services

Please provide an email id for each of the applicants for further communication. (Write in **BLOCK LETTERS** only)

1st Applicant / 1 <sup>st</sup> අයදුම්කරු	
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(b) **Mobile Banking:** **ମୋବାଇଲ୍ ବ୍ୟାଙ୍କିଂ** ☐ I / We wish to apply for **PSB Mobile Banking** Mobile No.: \_\_\_\_\_

14. SMS Alerts: /എന്നും അറിയാം ☐ Required (Mobile No. \_\_\_\_\_) ☐ Not Required

**15. (A) ATM Card / Debit Card:** ☐ I / We wish to apply for PSB ATM CUM DEBIT CARD    **(B) Cheque Book** ☐ Yes    ☐ No

Name to be printed on the card/ **ନାମ** ଯା ଟିକାକର ଲେଖିବ \_\_\_\_\_

**16. FORM No. 60/61 / ຄໍາຂໍ ຄຸ້ມຄອງ** (to filled by those who do not have PAN / ນຳໃຊ້ ສໍາລັບ ທ່ານ ທີ່ ບໍ່ ມີ ພັນ ນາມ)

<p>1. Full name of the declarant./<b>ಸಿರಿಗೃಹಾಧಿಕಾರಿ</b> <b>ನಾಮ</b></p> <p>2. Particulars of transaction: New ..... Account No. ....</p> <p>3. Amount of transaction : ..... Rs. ....</p> <p>4. Are you assessed to Tax?</p> <p>5. If Yes, (i) Details of Ward/Circle/Range where the last return of income was filled? (ii) Reasons for not having Permanent Account No./General Index Register No.?</p> <p>6. Details of document being produced in support of the address in Column no. 1.</p> <p>7. I hereby declare that my source of income is from agriculture and I am not required to pay income-tax on any other income, if any. (Applicable for Form 61)</p> <p><b>Verification:</b> I /We do hereby declare that what is stated above is true to the best of my knowledge &amp; belief.</p> <p>Verified today, the day of.</p> <p><b>ತಾರೀಖು/ Date :</b> ..... <b>ಕಡತ/ Place :</b> ..... <b>ಹಸ್ತಾಕ್ಷರ/ Signature/s</b> .....</p>	
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**(A) ID Proofs /ལྟན་པུ་ལྟོགས་ :** (i) Passport (ii) PAN Card (iii) Voter's Identity Card (iv) Driving License (v) Job card issued by NREGA

(vi) E-Aadhaar or other officially valid documents duly self attested

**(B) Add. Proof /ଅନୁମତି ପତ୍ର :** Passport / Voter ID / Driving License / Aadhaar / E-Aadhaar or other officially valid documents duly self attested.

**For Bank Use Only/ଏକ ଟଙ୍କା ଟଙ୍କା ପ୍ରତି**

### Risk Categorization / අවිභවන අනුප්‍රාප්ති

☐ High  
☐ Medium  
☐ Low

**Offcer /ဇယ့်ဇိဇာ**Branch Manager / શાખા મેનેજર**FORM DA-1**

17. **Nomination** ☐ Yes (if yes, please fill the nomination form) ☐ No (I / We declare that I / We do not wish to make nomination in my / our Saving / Current Account)

Nomination under Section 45ZA of the Banking Regulation Act, 1949 and Rule 2 (1) of the Banking Companies (Nomination) Rules, 1985 in respect of Bank Deposits.

I/We ..... (name(s) and address(es), nominate the following person to whom, in the event of my/our/minor's death, the amount of deposit, particulars whereof, are given below, may be returned by (name and address of branch/office in which deposit is held).

Deposit/தேposito			Nominee/உருது				
Nature (Saving / Current Account)	Account No. ஁ுதுருது ஁ுது	Additional details, if any	Name ஁ுது	Address ஁ுதுருது	Relationship with applicant	Age ஁ுது	Date of birth ஁ுது ஁ுது ஁ுது

\*As the nominee is a minor on this date, I/We appoint Mr/Mrs/Ms .....(name, address and age) to receive the amount of deposit on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

Place/နေရာ..... Signature/Thumb impression of 1st Applicant /1<sup>st</sup> ဖျာဉ်တံဆိပ်/ ဖျာဉ် တံဆိပ် .....

Date/ଯେ..... Signature/Thumb impression of 2nd Applicant / 2<sup>nd</sup> ପ୍ରାର୍ଥୀଙ୍କ ଦସ୍ତଖତ/ ଥମ୍ବ ପ୍ରିଣ୍ଟ .....

**1st Witness / 1<sup>st</sup> පරික්ෂක** **2nd Witness / 2<sup>nd</sup> පරික්ෂක**

Signature/གསེས་ ..... Signature/གསེས་ .....

Name/名前.....

Address/ཁྱེད་ཀྱི་ address ..... Address/ཁྱེད་ཀྱི་ address .....

\* Strikeout if nominee is not a minor. /ಹೆಸರಾದ ಅಭ್ಯರ್ಥಿ ಹಿರಿಯ

**For office use/ଓଫିସ୍ ଉପଯୋଗ:** Accepted the nomination and registered vide Serial No ..... dated/ତାରିଖ .....

Please open the account. / ګاډي ټولنه ته ډېر ځای ښکاري

Account opened on date/ආරම්භක දිනය ..... A/c No./ආරම්භක අංකය .....

OFFICER / ဖုဲ့ဇ်ဇ်ဇ်

**BRANCH MANAGER/சும்துர ஸ்டா஢ு**