



SHREE WARANA SAHAKARI BANK LTD; WARANANAGAR

श्री वारणा सहकारी बँक लि., वारणानगर

Branch
शाखा :

Customer ID
ग्राहक ओळख नं.

Date :
दिनांक :

FD/RD A/c. No.
मुदत/रिकरिंग
ठेव खाते नं.

FD/ RD ACCOUNT OPENING FORM मुदत / रिकरिंग ठेव खाते उघडण्याचा अर्ज

Please open my /our FD / RD Account as per details given below (whichever is applicable)

कृपया खालील माहिती आधारे माझे / आमचे ठेव / रिकरिंग खाते सुरू करावे. (नको असलेला मजकूर खोडावा)

Customer Type ग्राहकाचा प्रकार	☐ Trust	☐ Staff	☐ Mr.	☐ M/s.	Risk Review	High / Medium / Low ☐ ☐ ☐
	☐ Senior Citizen	☐ Minor	☐ Mrs.	☐ Other		

Name of the Customer / ग्राहकाचे नांव :

Gender / लिंग : ☐ Male ☐ Female ☐ Transgender

Sr.No. अ.नं.	Surname आडनांव	First Name प्रथम नांव	Middle Name वडिलांचे / पतीचे नांव	Mobile No. मोबाईल नं.	Pan No. आयकर क्रं.
१.					
२.					
३.					
४.					

खाते चालविणे संबंधी सुचना / Mode of Operation

ठेवीचा प्रकार / Type of Deposit _____

रक्कम / Rupees _____

Self / स्वतः ☐

Either or Survivor / दोहो पैकी एक ☐

मुदत / Term _____ Rate of Int./व्याज दर : _____

Jointly / संयुक्त ☐

Other (Society/Trust) / इतर ☐

व्याज / Interest :

Please credit monthly / Quarterly / on maturity interest to my Saving Bank A/c No. _____

Br. _____

कृपया व्याजाची मासिक / तिमाही / मुदत संपतेवेळी / रक्कम माझे सेव्हिंग खाते क्रमांक : _____

शाखा _____ वरती जमा करावी.

नुतनी करण / Renew

On maturity by this Account Opening from I/We authorised to AUTO RENEW the deposit with interest/without interest for further _____ Days/Months/Year without produce of receipt

ठेवीचे स्वयंनूतनीकरणाचे बाबतीत केवळ या अर्जाचे आधारे ठेव पावती हजर न करता व्याजासह/व्याजाशिवाय _____ दिवस/महिने/वर्षाचे/कालावधी करीता नुतनीकरण करणेत यावे.

टीप : कर रकमेत बदल झालेस अथवा नविन कर प्रणाली लागू झालेस मुदतीनंतरची देय रक्कम बदलू शकते अथवा कर रक्कम कपात करणेत येईल.

Consolidated Maturity amount is excess Rs. 20,000/- it will be credited to that respective A/c. only

मुदतीनंतर देय रक्कम एकत्रितरित्या रु. २०,०००/- पेक्षा जास्त असेल तर ती संबंधीत खात्यावर जमा केली जाईल

I/We have read, understood rules of the scheme and hereby agree to the Terms & conditions and charges as applicable to my/our account. I/We bound by the Bank's (as amended from time to time) for the conduct of such account. मी/आम्ही मुदत ठेव/रिकरिंग खाते त्या संबंधीत संदर्भातील सर्व नियम वाचले असून सर्व नियम व अटी मला/आम्हाला मान्य असून ते सर्व नियम व त्या नियमात वेळोवेळी होणारे बदल माझे/आम्हावर बंधनकारक आहेत. याखातेचे बाबतीत वेळोवेळी होणारे नियम मला / आम्हांवर बंधनकारक राहतील.

DECLARATION

I/We declare and confirm that

1. I/We have read the rules of the Bank and agree to abide by the same. I/We agree to inform the Bank Whenever any change occurs in my/our address/constitution/Partnership/Articles and /or Memorandum of Association. 2. I/We agree to maintain a minimum balance as per rules in our SB/CAA/c failing which the Bank may debit the charges as per rules. 3. I/We confirm that to the best of my / our knowledge and belief the above information is correct. I/We will indemnify you against any loss or damage you may suffer should any of the information prove to be incorrect,

I/We may have occasion from time to time to hand over to you for collection or negotiation cheques, Drafts or bills of Exchange (with our without document attached) and I/We hereby agree to you forwarding the same to you against for the time being for collection or negotiation. In the event of your having no independent collecting agent at anycenter, I/We hereby authorize you to send cheques by main directly to the drawee bank itself. I/We hold you harmless, free from responsibility and indemnified for any loss suffered by your agent and also from any misdelivery, non-delivery or loss or documents in transit or at the destinations on account of any fault or neglect or for any reason whatsoever on the part of postal authority and / or agent/s employed by you for this purpose. In addition to your ordinary as holders of such cheques, drafts or Bill or Exchange, you are authorized to accept in payment there of banker's cheque/s payable at your station or other places and in the event of such cheque/s not being paid on presentation to debit the amount to our account with all charges incurred thereon. I/We confirm that you can present bill and receive the amount in respects at our entire risk and responsibility.

I/We also declare and confirm that I/We are not enjoying any credit facility with any other other bank/financial institution or any branch of your Bank except the credit facilities declared and detailed in this application and I/We undertake to inform you in writing, as soon as any other credit facility / facilities is / are availed of by me / us from any bank / financial institution / any other branch of your Bank.

In case of basic savings account I/We hereby declare that I/We don't have any other basic savings account with any other Bank.

I/We clearly understand that all the operation effected through my/our own ATM card at any of the ATM's installed by Shree Warana Sahakari Bank Ltd, Warananagar and / or installed by other bank and permitted to be used by ATM card holders of Shree Warana Sahakari Bank Ltd; Warananagar are binding on me/us. I/We have read and understood the terms and condition governing the network operation of ATM card and I/We have agreed to have agreed to Terms/Conditions as may be stipulated by Shree Warana Sahakari Bank Ltd; Warananagar from time to time.

I/We understand and undertake that the usage of the ATM card shall be strictly in accordance with the Exchange control regulation and in the event of any failure to do so, I/We will be liable for action under foreign Exchange Management Act, 1999, and the amendments thereof, stipulated by the Reserve Bank of India. I/We understand that the bank may at its absolute discretion, discontinue any of the Services completely or partially without any notice to me/us. I/We agree that the bank may debit my account for service charges as applicable from time to time. I/We accept full responsibility for my / our debit card / UPI transactions and agree not to make any claims against Shree Warana Sahakari Bank Ltd; Warananagar in respect thereof.

IN WITNESS WHEREOF the Account Holder has put his Signature to this form after it was read over and explained to him/her in his/her vernacular language on the day and year herein above first written.

खातेदाराने या फॉर्ममध्ये भरलेली माहिती त्याच्या मातृभाषेमध्ये समजावून घेवूनच फॉर्मवर आज रोजी सही केलेल्या आहेत.

Yours faithfully

Signature of Main Applicant
प्रमुख खातेदार सही क्र. ०१

Signature of Joint Applicant 02
संयुक्त खातेदार - ०२ ची सही

Signature of Joint Applicant 03
संयुक्त खातेदार - ०३ ची सही

Signature of Joint Applicant 04
संयुक्त खातेदार - ०४ ची सही

Date : _____

Clerk

Officer

Branch Manager



SHREE WARANA SAHAKARI BANK LTD; WARANANAGAR

Tal. Panhala, Dist Kolhapur 416 113.

Nomination Form

FORM FOR NOMINATION, CANCELLATION OF NOMINATION AND VARIATION OF NOMINATION IN RESPECT OF THE BANK DEPOSITS AND LOCKERS

(See Sections 45-ZA, 45-ZC and 45-ZE read with Section 56 of the Banking Regulation Act, 1949 and rules 2 to 4 of The Co-operative Banks (Nomination) Rules, 1985)

Customer ID:

Deposit Account No./ Locker No.:

Name of Depositor/Hirer of a locker: 1. _____

2. _____

3. _____

1. If Nomination required fill Nomination Details :

I/We, the undersigned, hereby nominate the following individual(s) to receive the amount of the deposits(s) or the contents of the locker in respect of the particulars above mentioned in the event of my/ our death:

Type of Nomination: ☐ Successive Nomination ☐ Simultaneous Nomination

Serial Number.	Name of Nominee	Adhar Number	Mobile number, if any.	Relationship with customer, if any.	Age	Order of priority in case of successive nomination.	#Proportion of amount of deposit in percentage in case of bank deposit.
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
1.						First Nominee	
2.						Second Nominee	
3.						Third Nominee	
4.						Fourth Nominee	

In case of nomination in respect of the locker or Successive Nomination, this column is to be deleted.

Note: Simultaneous nomination refers to nomination of one more nominee but not exceeding four, with defined percentage and total amounting to 100%.

- Successive nomination refers to nomination in favour of one individual in order of priority and is also limited to four nominees; and the nominee lower in the order shall become effective only after the death of the nominee in the higher order.
- Column (H) above is not applicable in case of nomination in respect of the lockers.
- In respect of the deposits, out of column (G) and (H), only one column is to be filled.
- Total percentage across all nominees in column (H) must equal 100%.
- If more than one individual is nominated, the order of priority shall be deemed to be in order in which names appear in column (B)

2. Cancellation of Nomination/Variation of Nomination:

I/We _____

of cancelling previous nominations in respect of the bank deposit/locker.

3. Guardian Details (If any nominee is a minor)

Serial Number	Name of Nominee.	Name of Guardian.	Relationship with Nominee.	Adhar Number of Guardian	Mobile number of guardian, if any.
1					
2					
3					
4					

4. Declaration & signature

I/We declare that the information provided above is true to the best of my/our knowledge and belief I/We understand that this nomination will supersede any previous nominations for the above-mentioned accounts(s).

Name of Depositor(s) :

@Signature of Depositor

If nomination not required:

I/we do not wish to make any nomination **in respect of the above deposit account. I/we confirm that the** implications of not making a nomination have been explained to me/us **by the bank and that I/We am/are fully aware of the same.**

This declaration is made voluntarily and with full understanding

Name of Depositor(s) :

@Signature of Depositor

@ In case of individual who cannot read and /or write, the signature means thumb-impression of such individual, which should be attested by two witnesses.

Only Thumb impression (s) shall be attested by two witnesses

Signature of witness No1: _____

Name and address : _____

Signature of witness No : _____

Name and address : _____

Instructions for Customer:

1. You may nominate more than one individual, with clearly defined share percentages.
2. You may appoint successive nominees. In case of successive nomination, nomination shall be effective **only In favour of one individual In order of priority** in which their name appears in above table of nomination details. It may be noted that nomination of any nominee lower in the order of nomination shall become effective only after the death of all the nominees whose names are higher in the order of nomination.
3. Nomination is applicable to **all bank accounts/lockers detailed** above unless otherwise specified.
4. If deposit is made in the name of minor and locker is solely hared In the name of minor, this nomination form should be signed by an individual lawfully entitled to act on behalf of the minor.

5. For Bank Use Only

Received Nomination from Account Number/ Locker Number: _____

Date of Receipt: ____/____/____ Recorded on CBS / Core Banking System: Yes/ No

Signature of Bank Official: _____

Name & Designation: _____ Acknowledgement Date -

We acknowledge receipt of registration, cancellation and/ or variation of the nomination made by you with respect to your deposit/locker No-_____



Received

Customer Copy

Date _____

Customer Sign _____

Yours faithfully,

Signature of bank official with seal