J TJSB SAHAKARI BANK LTD. MULTI-STATE SCHEDULED BANK

Date :	Branch	:		(Dhoto)
Customer No	Account	t No		(Photo) छायाचित्र
🗌 1. PERSONAL DETAI	LS			
	Prefix First Name		Middle Name	Last Name
)			
Father Name* (Father's name is mandatory if 'PAN' is not furnished)				
Spouse Name				
Mother's Maiden Name*				
Date of Birth*	D D - M M - Y Y	YY		
Gender*	M- Male	F- Female	T-Transgender	
Marital Status*	Married	Unmarried	Others	
Nationality*	IN- Indian	Others (ISO 31	66 Country Code)	
Residential Status*	Resident Indian	☐ Non Resident Ir ☐ Person of India		
Address	Line 1			
	Line 2			
	Line 3			
	State / U.T Code		City / Town / Village	9
	Pin / Post Code	e	ISO 3166 Country Code	·
PAN No		Aadhaar No. 🛛 —		
Passport No		Annual Income		
Occupation Type*	☐ S-Service(☐ Private Sector ☐ O-Others(☐ Professional Work place/Employer Name & Addr	Public Sector Self Employed ress :	☐Government Sector ☐ Ret ☐ Business)	ired)
	Line 1			
	Line 2			
	Line 3			
	State / U.T Code		City / Town / Village	
	Pin / Post Code	9	ISO 3166 Country Code	
	🗌 Housewife 🔲 Student			
	X- Not Categorised PI. Specif	У		



ADDITIONAL DETAILS F	REQUIRED)*									
ISO 3166 Country Code	of Jurisdict	ion of Re	esidence*								
* Tax Identification Number	er or equiv	alent (If i:	ssued by jur	risdiction)*							
Country of Tax Residenc	су		Tax Identifica tional Equiva				uing Country ent issuing Co	ountry	Expiry Date	Do	ocuments provided #
Place / City of Birth*					IS	O 3166 C	Country Co	de of Bir	th*		
# Self attested copy of	documen	tary evic	dence for	TIN/Fun	ctional Ec	quivalent	and tax res	sidency	should be m	nandatori	ily provided.
3. PROOF OF IDEN	ITITY (Pol)	*									
(Certified copy of any one of the	e following pr	oof of Iden	tity [Pol] nee	ds to be tick	(ed)						
A- Passport	🗌 B- Va	ter ID C	ard 🗌 C	- PAN Ca	rd 🗌 D-	Driving Lie	cence 🗌 🛙	E- UID (A	adhaar) 🗌	F- NRE	GA Job Card
Z- Others (pl. specify)											
_						_	<u> </u>				
4. PROOF OF ADD)RESS (Po	A)*				Type :	: Owner	rship 🗌	Rental		
4.1 CURRENT / PERM	ANENT / O\	'ERSEAS	ADDRESS	DETAILS							
(Certified copy of any one of	f the followin	a Proof of	Address			ittod)					
		g 1 100i 0i	Address [F	'oAJ needs	to be subm	meu)					
Address Type*			Business		to be subm Residenti		Busine	ess	Register	ed Office	Unspecified
		dential /				al	Busine UID (A		Register	ed Office	Unspecified
Address Type*	□ Resi □ Pass _	dential /	Business		Residenti	al cence		Aadhaar)	Register	red Office	Unspecified
Address Type*	□ Resi □ Pass _	dential / I	Business		Residenti Driving Li	al cence		Aadhaar)	☐ Register	ed Office	Unspecified
Address Type*	□ Resi □ Pass _	dential / I	Business		Residenti Driving Li	al cence Job Card	UID (A	Aadhaar)	☐ Register	red Office	Unspecified
Address Type* Proof of Address*	☐ Resi ☐ Pass ☐ Vote	dential / l port r Identity	Business Card		Residenti Driving Li	al cence Job Card SIGNAT	UID (A	Aadhaar)	Register	red Office	Unspecified
Address Type* Proof of Address* Date (dd/mm/yyyy)*	☐ Resi ☐ Pass ☐ Vote	dential / l	Business Card		Residenti Driving Li	al cence Job Card	UID (A	Aadhaar)	☐ Register	red Office	Unspecified
Address Type* Proof of Address*	☐ Resi ☐ Pass ☐ Vote	dential / l	Business Card		Residenti Driving Li	al cence Job Card SIGNAT	UID (A	Aadhaar)	Register	red Office	Unspecified
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place*	☐ Resi ☐ Pass ☐ Vote	dential / I port r Identity	Business / Card		Residenti Driving Li	al cence Job Card SIGNAT (with Rubbe	UID (A	Aadhaar)	Register	red Office	Unspecified
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATTESTATION / FOR C	☐ Resi ☐ Pass ☐ Vote	dential / I port r Identity	Business / Card		Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name*	UID (A	Aadhaar) s		red Office	Unspecified
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATTESTATION / FOR C KYC Number	CFFICE US	dential / l port r Identity SE ONL Y	Business Card		Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name*	UID (A Others URE* or Stamp) KYC updat	Aadhaar) s	t)	red Office	Unspecified
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATTESTATION / FOR C KYC Number Account Holder Type*	CFFICE US	dential / l port r Identity E ONLY	Business Card	 Other Re	Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name*	UID (A Others URE* or Stamp) KYC updat ase refer instr	Aadhaar) s te reques ruction 'A'	t) at the end)		
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATTESTATION / FOR C KYC Number Account Holder Type* Documents Received	CFFICE US	dential / l port r Identity E ONL Y rtable ertified	Card	 Other Rep Copies	Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name*	UID (A Others URE* or Stamp) KYC updat ase refer instr	Aadhaar) s ie reques ruction 'A' 🗌 High	t)	lium	Low
Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATT ESTATION / FOR O KYC Number Account Holder Type* Documents Received IN PERSO	CFFICE US	GE ONLY SE ONLY rtable ertified	Card	Copies BY	Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name* Idatory for (Plea Risk Cate	UID (A Others URE* er Stamp) KYC updat ase refer instr	Aadhaar) s te reques ruction 'A' High	t) at the end) Med STITUTION DET.	lium	
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Address Type* Proof of Address* Date (dd/mm/yyyy)* Place* ATT ESTATION / FOR O KYC Number Account Holder Type* Documents Received IN PERSO Identity / Introduction Ver Emp. Name Emp. Code Emp. Designation		GE ONLY SE ONLY rtable ertified	Business Card Card True C RIED OUT I	Copies BY	Residenti Driving Li NREGA	al cence Job Card SIGNAT (with Rubbe Name* Idatory for [UID (A UID (A Others URE* or Stamp) KYC updat ase refer instr egory SB SAHAKAR	Aadhaar) s te reques ruction 'A' High	t) at the end) Med STITUTION DET.	lium	

Obtain personal KYC for Joint Account Holder(s)