



THE JALGAON PEOPLES CO-OP. BANK LTD.

(Multi-State Scheduled Bank)

since 1933

Registered Office : 152, Polan Peth, Dana Bazar. Jalgaon. www.jpccbank.com

Non-Personal KYC

I request the Bank to open account/s/ provide services opted by me/us & the required entity/individual details are given below: Customer Name & Address (ALL IN BLOCK LETTER PLEASE) (Please ✓ wherever applicable)

PARTICULARS	DETAILS OF APPLICANT	OTHER DETAILS	
NAME OF ENTITY		CONSTITUTION	PROPRIETARY/ PARTNERSHIP/ PVT.LTD./ PUBLIC LTD./ LLP TRUST/ JHU/ SHG/NGO
NATURE OF ACTIVITY		DATE OF INCORP.	
ADDRESS (REGISTERED OFFICE)		PHONE NO.	
		PHONE NO.	
		FAX NO.	
CITY & PIN CODE		E-MAIL ID	
STATE		PAN NO.	
NATURE OF ACTIVITY		TAN NO.	
ADDRESS (REGISTERED OFFICE)		CST/VAT NO.	
CITY & PIN CODE			
STATE			

Particulars of Identification / Introduction

A] Any one document from each of the under-noted 2 list, for Identity and Proof of Address

List I (latest/ recent)	Put ✓	List II (latest/recent)	Put ✓
1. Memorandum of Association		1. Telephone Bill	
2. Articles of Association		2. Bank Account Statement	
3. Board Resolution		3. Income/ Wealth Tax Assessment Order	
4. Partnership Deed		4. Credit Card Statement	
5. Trust Deed		5. Electricity Bill	
6. Joint Hindu Family letter		6. Certificate/ License under Shops & Establishment Act	
7. Minutes of SHG Meeting			
8. CST/ VAT Certificate			
9. Certificate by Sales/Service/Prof. Tax authorities			
10. Certificate/ License under Shops & Establishment Act			

B] Applicant Declaration:

- I / we hereby declare that the details furnished above are true & correct to the best of my / our knowledge and belief and I / we undertake to inform you of any changes therein immediately. In case of any of the above information is found to be false or untrue or misleading or misrepresenting. I / we are aware that I / we may be held liable for it.
- I / we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.
- My / our Non personal / KYC details may be shared with Central KYC Registry.

Details of Beneficial Owners :

Name	Designation	Signature	Personal Client ID

Information of the Customer details & Non-Personal KYC particulars are verified by me.

Signature of the Verifying Officer :

Signature of the Branch Manager :

USER ID & EMP. ID :

USER ID & EMP. ID :

Risk Category Low Medium High

Date : Entity Client ID NO _____ Created By: Initial _____ Authorized By : _____