



THE ADARSH CO-OPERATIVE URBAN BANK LTD.,

1-251/1, MPR Complex, Phase - 1, IDA, Jeedimetla, Hyderabad - 055
Phones : 23094422, 23191851, 23191852, Fax : 23098833

CC No.

SB
CA NO

ACCOUNT OPENING FORM FOR PARTNERSHIP FIRMS/COMPANIES/CLUBS/ASSOCIATIONS & UNREGISTERED BODIES

Please open my/our Current A/c Date :

Constitution : Partnership Pvt Ltd. Co. Public Ltd. Co. Regd. Assn. Un Regd. Assn.

Operation : Jointly Either or Survivor / Severally Any other (Specify) :

Name of the Account :

Names of Partners / Directors / Office Bearers along with Addresses & Phone Nos.

1.

2.

3.

4.

5.

INTROIDUCION DETAILS :

Introducer's Name.....
Address.....

.....A/c No.....Ph/Cell No.(s).....

I/We know the applicant(s) personally for the last.....Years and recommend the applicant(s) to the Adarsh Co-operative Urban Bank Ltd., Jeedimetla.

Signature

For BANK'S USE

Signature and Date of
Account Opening verified

Signature of Bank Officer

We undertake to bring to the notice of the Bank any change in our constitution by submitting appropriate evidence.

Whenever any claim or demand is made in writing by Government authorities such as Commercial Tax Officials, Income Tax Authorities, EPF Officials, esi Officials etc., to remit from our account towards their dues, Bank is at liberty to debit our account and remit to such authorities, without referring the matter to us. We have no claim as such against the Bank what so ever such statutory remittances.

I/We have read and understood the Terms and Conditions (a copy of which I am in possession of) governing the opening of an account with Bank and those relating to various services. I/We accept and agree to be bound by the said Terms and Conditions including those excluding limiting the Bank's liability. 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 agree that the Bank may debit my account for service charges as applicable from time to time. I/We confirm that I/We am /are residents of India. I/We donot enjoy and credit facility with any other bank. We undertake to inform you as and when credit facilities are availed by us with other banks.

Further in the matter of acknowledging debt arising out of debit balances in this account or anyother facility/facilities granted to any one of us or all of us, the debit acknowledged by any one of us or payment made by any one of us into any of such debt/debts is binding on all of us.

The Bank is at liberty to send the cheques submitted by us for collection to the credit of this account by ordinary post or by Registered post or by courier, and Bank has no responsibility what so ever in the matter incase such an instrument is lost in transit.

SPECIMEN SIGNATURE / DECLARATION

Signature

Signature

Signature

Note : Please sign in black ink. Photographs should be signed across by the applicants. Sole proprietors to sign with firm's stamp

Photo

Photo

Photo
of the
Nominee
(Optional)

Name..... Name..... Name.....

DOCUMENTS FURNISHED (Please Tick)

- Passport Size Photographs 2 Nos.
- Residence Proof
-
-
-

FOR BANK USE
Account opening approved by

Authorised Signatory

CC Entered by :

A/c Entered by :

Scanning by :

Authorised by :

Authorised by :

Authorised by :

Check List :

1. Whether Partnership Deed is Received.
2. Whether Memorandum of Association and Articles of Association is Received.
3. Whether Certificate of incorporation is Received.
4. Whether Certificate of Commencement of Business is Received
5. Whether Resolution is receive to open and operate the account is Received.
6. Whether Proof of Identification as Signatories to the Account is Received.

