

JANA SMALL FINANCE BANK
(A Scheduled Commercial Bank)

W1-01122025

CASA ACCOUNT OPENING FORM FOR EXISTING NON-INDIVIDUALS

-OR-

C). We hereby declare that no natural person is holding more than 10% of total share holding of the entity in case of Company/Firm/Trust/Societies/Clubs/LLP/Partnership and no one holds more than 15% in case of Association as per (B) above or information about the ultimate shareholders is not available with the company. The details of senior managing officials (e.g. Managing Director/Chief Executive Officer, etc) are as under:

Name	DOB	Nationality	Residential Address	DIN/PAN/Name & No. of other ID proof	Designation

(Managing Director/Company Secretary/Chairman/Two Directors/Authorised Signatory) Notes: In Table B, the details of natural person who exercises control over the entity needs to be furnished. The said natural person may act alone or together, or through one or more juridical person.

* In case no such natural person is identifiable, indicate "Not Identified" in Table B and provide details required as per Table C.

In case Director Identification number (DIN)/Permanent Account Number (PAN) is not available, separate ID proof needs to be furnished.

Date _____

Signature of Authorized Signatory _____

DECLARATION

Applicable for Sole Proprietorship Account

I, on behalf of _____ ("Sole Proprietorship Firm") intend to open

_____ account with the Bank. The said account may be opened in the name of _____

I confirm that am the proprietor of the Sole Proprietorship Firm. I understand that I am solely and personally responsible for liabilities of the Sole Proprietorship Firm. I undertake to intimate the Bank in writing of any change that may take place in the Sole Proprietorship Firm's name. I authorize the Bank to honour instructions from me in relation to the operation of the account. I agree and accept that I shall be liable to the Bank in relation to any obligation which may be outstanding in the Sole Proprietorship Firm's name in the Bank's books until all such obligations shall have been liquidated.

Name: _____

Signature: _____

Applicable for Partnership Firm

We, on behalf of _____ ("Partnership Firm")

intend to open _____ account with the Bank. The said account may be opened in the name of

_____. We confirm and declare that we are the only partners in the Partnership Firm and are jointly and severally responsible for liabilities of the Partnership Firm. We authorize the Bank to honour instructions of the signatories herein below in relation to the operation of the account in line with the mode of operation laid down in this AOF. We undertake to intimate the Bank in writing of any change that takes place in the constitution of the Partnership Firm. We agree and accept that all the existing partners shall be liable to the Bank in relation to any obligation which may be outstanding in the Partnership Firm's name in the Bank's books until all such obligations shall have been liquidated.

Name & signature of Partners

1 _____ Sign _____ 2 _____ Sign _____

3 _____ Sign _____

Applicable for HUF

We, on behalf of _____ ("HUF") intend to open _____ account with the Bank. The said account may be opened in the name of _____.

In view of the above, we hereby confirm that the first signatory to this AOF, i.e. _____ is the Karta of the HUF and the other signatories are the adult co-parceners of the HUF. We further confirm that the HUF is not carrying on business, professional or trading activity and will not operate the Savings Account for carrying out such activities. We authorize the Bank to honour instructions of the signatories herein below in relation to the operation of the account in line with the mode of operation laid down in this AOF. We undertake that claims due to the Bank from the HUF shall be recovered personally from all or any of us and also for the entire family properties of which the first signatory is the Karta, including the share of minor co-parceners. We hereby undertake to inform Bank of the death or birth of any co-parceners/members or any change occurring at any time in the constitution of the HUF during the currency of the account.

Name & signature of Karta

1 _____ Sign _____

Name & signature of Adult Co-parceners

1 _____ Sign _____

2 _____ Sign _____

3 _____ Sign _____

Name & Date of Birth of Minor Co-parceners

1 _____

D	D	M	M	Y	Y	Y	Y
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2 _____

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

3 _____

D	D	M	M	Y	Y	Y	Y
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Declaration

(Please read carefully and sign at the end of this section after you have filled in all the details in the form)

I/we hereby solemnly declare that the information voluntarily provided above is up to date and true to the best of my knowledge and belief and I/we hereby submit my/our recent KYC documents. I/we acknowledge and agree that I/we have read, understood and accepted the terms and conditions and the other terms and conditions relating to deposit services stipulated on www.janabank.com (the "Website"). I/We agree that the Bank shall have the right to modify/amend any of the terms and conditions from time to time, at Bank's own discretion, which may be hosted and noticed on the Website and the same shall be sufficient notice, to me/us regarding such modification/amendment and I/we shall be bound by such modification/amendment.

Name: _____

Name: _____

Name: _____

Designation: _____

Designation: _____

Designation: _____

Signature of Authorized Signatory 1

Signature of Authorized Signatory 2

Signature of Authorized Signatory 3