CASA ACCOUNT OPENING FORM FOR EXISTING NON-INDIVIDUALS

For Jana Small Finance Bank (Authorized Signatory)



(A Scheduled Commercial Bank)

FOR BRANCH USE		ount 🗆 🤇	Savings Ac	count Application Date		Account Opening Date	1 Y Y Y Y		
_				'		Product Name:			
						C-KYC ld:			
				Entity Infor	mation				
Name:									
New A/C No.					CRN No.				
				Authorized Sign	atory Details				
Name 1:					CRN 1				
FATCA*: I am a tax	resident of I	ndia and n	ot a tax re	sident of any other countr	y Yes No (If No	o, seperate FATCA declaration form needs to b	e filled)		
Name 2:					CRN 2				
FATCA*: I am a tax resident of India and not a tax resident of any other country Yes No (If No, seperate FATCA declaration form needs to be filled Name 3: CRN 3									
	resident of I	ndia and n	ot a tax re	sident of any other countr	_	o, seperate FATCA declaration form needs to b	e filled)		
Mode of Operation Prop/Auth Sign	ı	Any C		Any Two Jointly	Jointly By All	As per Document attached (Re Partnership Letter, Mandate et			
Credit Facilities We do not enjoy any credit facilities with other bank/s					We enjoy the following "credit facilities" with other bank/s		k/s		
S.No	Bank N	lame & Brai	nch	Type of Facility	Amount (Rs.Lacs)	Authorised Signatories Signatur	e		
1									
2									
(Note: If borrowir If applicable, I / W					ities availed by me / us from the	e banking system is equal to or is greater than I	NR 5 Crores		
	-			Initial Deposit	Details				
a) Deposit Amour	nt Rs			(In Words)		
b) Mode of Payment: Cash Debit from My/our Existing A/C No.									
Cheque No		Date	ed D D I	M M Y Y Y Y draw	n on account number SA	A/CA			
in the name of			wit	h	Bank		Branch		
NEFT/RTGS/IM	PS Payment	bank/UPI.	Ref	branch	SA/CA	in the name of			
				Services Rec	quired				
Debit Card	RuPay Platin	um 🗍	RuPay Sele	ect CIB [*]	** Yes No	MCC Cod (for QR)	е		
Nomination Details		kisting CAS			unt No.	(IOI QR)			
(Applicable only for S * Please fill form DA1			ifferent from	existing nomination		** If Yes, please fi	ll CIB annexure		
Trease file form B/G	or riornination	ridenty, ii d		Controlling Ownership	& Beneficiary Details				
				Ion Exempt Category sect					
			=	case the Entity or its shar ned subsidiary (i.e. 50% o		mnany or			
	_			-		y/Firm/Trust/ Societies/Clubs/LLP/Pai	tnership, and		
no one holds	more than 1	5% in case	of Associa	ition.					
II. Non Exempt Cat (A). Shareholding P									
	hareholders	%	of share	Mention reason if belor	ngs to exempt entity#				
(B). Details of ultima LLP/Partnership and					l share holding of the ent	tity in case of Company/Firm/Trust/Soc	cieties/Clubs/		
Name	Name DOB Natio		lity	Residenti	DIN/PAN/Name & No. of other ID proof	% of share			
				Acknowled	gement				
	,			Acknowled	-	N (D) (D) () ()			
We Acknowledge \	rour Initial F	unding De	tails for an	nount:	having Cash/Cheque	e No. (Date & Bank details)			

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Signature of Authorized Signatory 1



(A Scheduled Commercial Bank)

-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
			Directors/Authorised Signatory) Notes: In Table B, the details of natural person led. The said natural person may act alone or together, or through one or more	Date	
			Not Identified" in Table B and provide details required as per Table C. Account Number (PAN) is not available, separate ID proof needs to be furnished.	Signature of Author	ized Signatory
DECLARATION					
Applicable for Sole Pro	prietorship	o Account			
I, on behalf of			("Sole Proprietorship Firm")	intend to open
I confirm that am the Proprietorship Firm. I Bank to honour instru	e propriet undertake ictions fro	tor of the Sole to intimate to om me in relat	aid account may be opened in the name ofe Proprietorship Firm. I understand that I am solely and person the Bank in writing of any change that may take place in the Sole Proprietorship Firm's name in the Bank's books until all such	ally responsible for liabilit roprietorship Firm's name. all be liable to the Bank in	ies of the Sole I authorize the relation to any
Name:			Signature:		
Applicable for Partners	hip Firm				
• •	•			("Par	tnership Firm")
			account with the Bank. The said acc		
			We confirm and dec	lare that we are the only	partners in the
to the Bank in relation been liquidated. Name θ signature of Pa 1	rtners	5	n may be outstanding in the Partnership Firm's name in the Bank's t	J	
3					
		0.9.1.			
Applicable for HUF			/*	anno controllato de Darelo Te	:_
			("HUF") intend to open In view of the above, we he		
			s the Karta of the HUF and the other signatories are the adult co-		
that the HUF is not cauthorize the Bank to laid down in this AOF. family properties of w	arrying or honour in We unde hich the fi	n business, pronstructions of ertake that claidirst signatory in	ofessional or trading activity and will not operate the Savings Acc the signatories herein below in relation to the operation of the ac ms due to the Bank from the HUF shall be recovered personally fr s the Karta, including the share of minor co-parceners. We hereby hange occurring at any time in the constitution of the HUF during t	count for carrying out suc count in line with the mod om all or any of us and als undertake to inform Bank	n activities. We de of operation o for the entire of the death or
Name & signature of Ka			Name & Date of Birth of Minor C	o-parceners	
1		5	1	D D M M Y	YYY
Name & signature of Ad			2	D D M M Y	YYY
1		_	3	D D M M Y	YYY
3		_			
			Declaration		
I/we hereby solemnly dec KYC documents. I/we ack services stipulated on ww	lare that the knowledge w.janabank iich may be	e information vo and agree that k.com (the "Web hosted and not	after you have filled in all the details in the form) bluntarily provided above is up to date and true to the best of my knowledge a l/we have read, understood and accepted the terms and conditions and the besite"). I/We agree that the Bank shall have the right to modify/amend any of iced on the Website and the same shall be sufficient notice, to me/us regardin	other terms and conditions re the terms and conditions from	lating to deposit time to time, at
Name:			Name: Na	ame:	
Designation:			Designation: De	esignation:	

Signature of Authorized Signatory 2

Signature of Authorized Signatory 3