

ACCOUNT OPENING FORM: ELECTRONICALLY SOURCED CASA ACCOUNT

Branch Name: Branch Code: Product Code:
Mode of Operation: ☐ Self ☐ Either or Survivor ☐ Former or Survivor ☐ Jointly ☐ Minor Under Guardian Others.....
Customer Name 1:
CRN 1: Mobile Number: + 9 1
(if existing customer)
Customer Name 2:
CRN 2: Mobile Number: + 9 1
(if existing customer)
LG Code : LC Code : Account Number:

Declaration in case of Minor (To be filled if MOP is Minor Under Guardian)

I, hereby declare that the minor is my and I'm his/ her natural/ legal guardian appointed by court vide order dated I shall represent minor for all further transactions in the above account until the said minor attains majority. I indemnify the minor against the claim of the above for my withdrawal/transactions made by me in his/her account.

Date Name of the Guardian Signature of the Guardian

Mandatory Documents

PAN No. ☐ Form 60 (only if PAN is unavailable)
(Please fill Form 60 and attach) Aadhaar No.
(capture only last 4 digits of Aadhaar)

Name of the Document	Document No.	Document Type	Date of Issue	Date of Expiry
		<input type="checkbox"/> Address <input type="checkbox"/> Identity		
		<input type="checkbox"/> Address <input type="checkbox"/> Identity		

CKYC ID :

FATCA-CRS Declaration

Please tick the applicable tax resident declaration (Any one)*

I am a tax resident of India and not a tax resident of any other country ☐ Y ☐ N (If no, Seperate FATCA Declaration form need to be filled)

Nomination (DA1 Form) (Only one individual nominee permitted)

☐ I wish to nominate ☐ I do not wish to nominate****

Nomination under Section 45 ZA of the Banking Regulation Act, 1949 and Rule 2 (1) of the Banking Companies (Nomination) Rules 1985 in respect of bank deposits

I/We (Name) (Address)

Nominate the following person to whom in the event of my/our/minor's death the amount of deposit in the above account may be returned by JANA SMALL FINANCE BANK.

Name Address: ☐ Same as Primary Applicant

☐ If different from Primary Applicant

Relationship with depositor, If any Age Years Date of Birth of nominee D D M M Y Y Y Y Y Y

As nominee is minor I/We appoint (name) Relationship with minor

Address: ☐ Same as Primary Applicant ☐ If different

to receive the amount of deposit on behalf of the nominee in the event of my/our/ minor's death during the minority of the nominee

Nominee Mobile Number:

Signature of Primary Applicant** Signature of the Joint Applicant(s)

*Strike out if nominee is not a minor **Where account is opened in the name of a minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor.

*** In case of thumb impression, nomination to be filled in as an annexure **** I have understood the benefits of nomination and still do not wish to nominate

Initial Deposit Details

a) Deposit Amount Rs.....(In Words

b) Mode of Payment: ☐ Cash ☐ Debit from My/our Existing A/C No.

☐ Cheque No Dated D D M M Y Y Y Y Y Y drawn on account number SA/CA.....
in the name ofwith.....Bank.....Branch.....

☐ NEFT/RTGS/IMPS Payment bank/UPI.Ref.....branch.....SA/CA.....in the name of.....

Acknowledgement (to be filled by Bank official)

Received a sum of Rs..... (Rupees.....) by way of

☐ Cash ☐ Cheque drawn on..... Bank.....branch.....

☐ NEFT/RTGS/IMPS debit by account bearing number..... from Bank,

towards the initial deposit for opening of.....account with Jana Small Finance Bank

Is Nomination requested ☐ Y ☐ N If Yes, Nominee Name

Name of the Bank Official Signature

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INSTAKIT Acknowledgement (To be filled only if availed Instakit)

I confirm that I have received an untampered Instakit No. as mentioned below containing my debit card & PIN number linked to my Savings a/c opened with Jana Small Finance Bank. Instakit No. Applicant 1 Instakit No. Applicant 2

Signature of the Primary/ 1st Applicant

Signature of the Second/ Joint Applicant

General Terms & Conditions

- I hereby declare and confirm that I do not hold BSBDA* with any other bank
- I/We agree that these terms and conditions form a contract between me/us and Jana Small Finance Bank Limited (the "Bank")
- By applying for opening the account, I/we acknowledge and agree that I/we have read, understood and accepted these terms and conditions and the other terms and conditions relating to various services, including Phone Banking, ATMs and Debit Cards 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
- I/we hereby agree that the Bank, its agents, representative, affiliates and any other person/entity authorized by may call, email, WhatsApp or SMS me/us regarding the services, its advantages & offers. This consent will override any registration for NC/NDNC (National Do Not Call Registry).
- I/We agree that I/we have been provided various options by the Bank for establishing my/our identity/address proof for the purpose of account opening and I/we have voluntarily submitted my/our Aadhaar to the Bank.
- I/We have no objection in the Bank authenticating the genuineness of the Aadhaar through Quick Response (QR) code or through such other manner as set out by UIDAI or any other law from time to time.
- I/We give consent to use/exchange or share the Aadhaar number, Aadhaar/identity information for registration of client information or for any other purpose with UIDAI, ED, NPCI, CKYC, KRA, CERSAI and with any other authority or regulatory body or as per requirements of law.
- I/We declare that all the information voluntarily furnished by my/us to the Bank are true, correct and complete.
- I/We have credit facilities from other Bank: ☐ Y ☐ N If Yes, fill in the following details (applicable only for current accounts)

Bank & Branch	Facility	Amount

- I/We confirm that the monies deposited or which may be deposited from time to time into in my/our account belong to me/us. I/We undertake to deposit such monies into my/our account as I am/we are legally entitled to deposit. I/We understand and acknowledge that the Bank is entitled to information with regard to the source of any monies being deposited by me/us into my/our accounts and I/we shall, upon demand, without demur or dispute, inform the Bank of any such source of monies.
- I/We hereby declare/undertake to inform the Bank, as and when the total credit facilities availed by me/us from the banking system reaches >=Rs. 5 Crores.
- I/We confirm that I/we have read and understand the above declaration, and that the details provided are correct and I/we have signed in the presence of Bank's officer.
- I/We hereby affix my/our signature/s as confirmation of the above.
- I/We hereby understand that the signature captured can be used to authorize/verify all future transactions.
- I/We agree that the below signature can be used as the specimen signature also.
- I/we hereby solemnly declare that the information voluntarily provided above is up to date and correct and I/we hereby submit my/our recent KYC documents.

Signature of the Primary/1st Applicant

Name:

Date:

Signature of the Second/Joint Applicant

Name:

Date:

*BSBDA - Basic Savings Bank Deposit Account

Bank Official Declaration

- Is the customer a High Net worth Individual ☐ Y ☐ N
- Is the source of funds of the customer identifiable? ☐ Y ☐ N
- I have seen original documents and the customer(s) has signed in my presence ☐ Y ☐ N
- Address Verification done on (for new customers)

Declaration by the Branch:

I hereby certify that this account opening form is complete in all respects and relevant documents have been obtained as per the KYC guidelines of the Bank and RBI (as amended from time to time) and performed due diligence to verify the genuineness of the customer.

Signature of Bank Official

Name

Employee No

Please visit www.janabank.com for more queries on CASA related information.

Branch Details

Branch Code :

Address :

Contact No. :

Registered Office:

Jana Small Finance Bank Limited, The Fairway Business Park,
10/1, 11/2 & 12/2B, Off Domlur, Koramangla Inner Ring Road,
Next to Embassy Golf Links, Challaghatta, Bengaluru - 560071.



TOLL FREE NUMBER
1800 2080



CUSTOMER CARE EMAIL ID
customercare@janabank.com



WEBSITE
www.janabank.com