SANMATI SAHAKARI BANK LTD.

SANMATI SAHAKARI BANK LTD; ICHALKARANJI. (MULTISTATE CO-OP. BANK) सन्मती सहकारी बँक लि; इचलकरंजी. (मल्टीस्टेट को-ऑप बँक)

Head Office: 7/111 Janata Chowk, Laxmi Market, Ichalkaranii - 416 115 Tal, Hatkanangale Dist, Kolhanur (MH) India

	2431333, <u>2</u> 431334, 24		•	•	sanmatibank.com
		CURRENT ACCOL	JNT OPENING FO	RM	
ranch / शाखा :		Firm Cust	omer ID No. / फर्मचा ग्र	हिक क्र. :	
-KYC No.:			Customer ID No. / ม	ाहक क्र. :	
Account No. / खाते क्र.:				Date / दिनांक:) M M Y Y Y
	n to open a Current	Account as under	(मी/आम्ही आपल्या बँकेत	खालीलप्रमाणे चालू खाते सु	रु करु इच्छितो)
(✓ अशी खूण करावी) (Mark as ✓)	Account Type : खात्याचा प्रकार :	Regular सामान्य	□ So यो	heme जने अंतर्गत	Other इतर
		Title of Accou	ınt / खात्याचे नाव		
Name / नाव :					
Name of Proprietor	/Partners/Directors , कांचे /विश्वस्त नाव/नावे	trustees with custo	omer ID		
	1414 1414 114		4		
			_		
2			5		
3			6		
1 st Applicant	2 nd Applicant	3 rd Applicant	4 th Applicant	5 th Applicant	6 th Applicant
Signature(s)/Thumb Impressions(s) Sole/ First Holder / सही	Signature(s)/Thumb Impressions(s) Sole/ Second Holder / सही	Signature(s)/Thumb Impressions(s) Sole/ Third Holder / सही	Signature(s)/Thumb Impressions(s) Sole/ Fourth Holder / सही	Signature(s)/Thumb Impressions(s) Sole/ Fifth Holder / सही	Signature(s)/Thumb Impressions(s) Sole/ Sixth Holder / सही
Na	me of person's author	orised to operate ac	count / खात्यावर व्यव	हार करणाऱ्यांची नांवे	Gender / लिंग :
Name / नाव	Midd	le Name / वडीलांचे/पती	चे नाव Su	rname / आडनाव	Male. / पुरुष Female / स्त्री
1					Transgender / तृतीयपं
2					
3 —					
4					
5 ———					
6					
0 —	(ত্তাব্যা	वर व्यवहार करण्याचा अधिव	कार असलेल्या व्यक्तीचा C-I		

्रिट्टें हैं हैं हैं हैं हैं हैं बिक सिंह कारी बँक वि	ने ; इचलकरं जी. (मल्टीस्टेट को-ऑप बँक)			
Operational Instruction / खाते व्यवहार करण्यासंबंधी सूचना				
☐ Single ☐ Jointly ☐ Either or surviv	or Jointly or survivor Former or survivor			
Any one of us or any one of the survivor or the last survivor	or. Other (Please Specify)			
Deposi	it Details			
Payment by Cash Cheque Cheque No	Date: D D M M Y Y Y Rs.			
Name of Bank	Account Type			
Customer Detai	ils / ग्राहकांची माहिती			
Profession/Business :	Established on :			
GST Registration No.	PAN / GIR No. ———— पॅन / जी.आय.आर.नं. :			
Annual Turnover / Sales : ₹ वार्षिक उलाढाल / विक्री	Annual Income वर्षिक उत्पन्न :			
	Gall No. & Name of Society			
Office : Owned Rental भाड्याचे	गाळा नं. आणि सासायटीचे नांव :			
Road No./Name रस्ता क्र./नाव :————————————————————————————————————	Area / Locality			
City Nationality	स्थळ / विभाग : PIN			
शहर : नागरीकत्त्व : ं — Telephone No.	पिन :			
द्रस्वनी क्र. :	कार्यालय :			
Mobile भ्रमणध्वनी : ———————————————————————————————————	E-mail ID ई-मेल आयडी : —————			
Previous Banker	A/c Tyne A/c No			
पूर्वीच्या बँकेचे नांव :	खाते प्रकार : खाते क्र. :			
Member/ Nominal Member सभासद / नाममात्र सभासद 🔲 Yes / होय 🔲 No / न	Member / Nominal Member No. नाही सभासद / नाममात्र सभासद क्रमांक			
Account Type[Mark as (✓)]	/ खात्याचा प्रकार (🗸 अशी खूण करावी)			
☐ Individual / वैयक्तीक ☐ Joint A/C / संयुक्त	🗌 Proprietorship / मालकी हक्क 🔲 Partnership / भागीदारी			
☐ Co-op Society / को−ऑप सोसायटी ☐ Company/ कंपनी	☐ Co-op Bank / को−ऑप बँक			
☐ HUF / हिंदू अविभक्त कुटुंब प्रमुख ☐ LLP / एलएलपी	☐ Trust / न्यास ☐ Other / इतर			
NOMINATION FORM-DA [For Individual / Sole Proprietorship Account /	४-1 / नामांकन फॉर्म – डी ए – १ (वारसाची नोंद)			
I/ We nominate following named person as my/our nominee after my	/our death and is entitled legally to receive the money as per section			
45ZA read with section 56 of Banking regulation Act, 1949 and Rule 2 (1) of the Co-operative Bank (Nomination) Rules, 1985. माझ्या / आमच्या मृत्युनंतर खालील व्यक्तीस कायदेशीररित्या पैसे मिळण्यास बँकिंग रेग्युलेशन ॲक्ट १९४९ चे कलम ५६ बरोबर कलम ४५ झेड ए, तसेच को–ऑपरेटिव्ह बँकेचे (नामनिर्देशन), नियम, १९८५				
न्यम, २(१) नुसार मी/आम्ही खालील व्यक्तीचे नामनिर्देशन करीत आहे./ आहोत. (Only on				
Name & Address / नाव व पत्ता Age /	वय Date of Birth (In Case of Minor) Relationship with the Depositor			
As the nominee is a minor on this date, I/We appoint Shri./Smt./Miss आजच्या घडीला नामनिर्देशित केलेली व्यक्ती अज्ञान आहे, म्हणून माझ्या/आमच्या मृत्युच्या वेळी मी,	/आम्ही श्री/श्रीमती/कुमार			
Address पता				
to receive the amount of the deposit on behalf of the nominee in the	event of my/our death during the minority of the nominee.			
या व्यक्तीची अज्ञान व्यक्तीचे वाली म्हणून नेमणूक करतो. नामनिर्देशित केलेली व्यक्ती माझे/आमचे मृ				
Date / दिनांक : D D M M Y Y Y Y	 Applicant's Signature / अर्जदाराची सही			
Witness / साक्षीदार : १)	Witness / साक्षीदार : २)			
Signature/ सही	Signature/ सही			
Name / नाव	Name / नाव			
Address / पत्ता Address / पत्ता				

SANMATI SAHAKARI BANK LTD; ICHALKARANJI. (MULTISTATE CO-OP. BANK)

Introducer's Details / ओळख देणाऱ्याचा तपशील					
Introducer's Name / ओळख देणाऱ्याचे नाव :	Branch / शाखा :				
Customer ID / Account No. / ख ग्राहक क्र.:					
Tel./Mob. / E-mail	ID/ ई-मेल :				
I know the applicant/s for the last months/years. I confirm the id	lentity, occupation and address of the applicant/s.				
मी अर्जदारास मागील महिने/वर्षापासून ओळखतो/ओळखते. अर्जदाराचा पत्ता,	ओळख, व्यवसाय याची मी खात्री देतो/देते.				
Date : दिनांक : D D M M Y Y Y Y IIIIIIIIIIIIIIIIIIIIIII					
	•				
[For Proprietorship or Partnership Firm only /					
The Branch Manager, Sanmati Sahakari Bank Ltd;					
Branch					
Dear Sir, I/We the undersigned, hereby declare that I am / we are the sole p	oroprietor / Only partners of the firm & am solely/are Jointly & severally responsible for the				
liabilities thereof. I/we shall advice you in writing of any change that	may take place in the constitution / Partnership and I/ all				
the present partners will be liable to you, on any obligation which mareceipt of such notice and until all obligation shall been liquidated.					
	मी / आम्ही खालील स्वाक्षरी करणार या द्वारे असे जाहीर करतो की, ———————————————————————————————————				
मालकी / भागीदारी संबंधी वेळोवेळी होणाऱ्या घटनात्मक बदलाबदल मी / आम्ही बँकेस वेळेवर माहीती देण्याचे जबाबदारी माझी / आमची आहे. माझी / आमची मालकी / भागीदारी संस्था बँकेस					
कोणात्मारी प्रकारने देणो / कर्ज खाद्मातरील नाते रकम त दनर मत् जबाबदाञ्चा पार पार्ट्यामाम मी / अपूरी म	वटर बटलची यचना मिलालगतर त्या जबाबदाऱ्या पार्ग करायाच्या दमी देन आदोत				
कोणत्याही प्रकारचे देणे / कर्ज खात्यावरील नावे रक्कम व इतर सर्व जबाबदाऱ्या पार पाङण्यास मी / आम्ही र Signature / सही					
Signature / सही	Signature / सही				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				
Signature / सही Sole Proprietor/Partner 1 Partner 2	Signature / सही Partner 4 Partner 5				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3	Signature / सही Partner 4 Partner 5 Partner 6				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3 Date / दिनांक : D D M M Y Y Y Y	Signature / सही _ Partner 4 Partner 5 Partner 6 Place / ठिकाण				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3 Date / दिनांक : D D M M Y Y Y Y For Office Us	Signature / सही _ Partner 4 _ Partner 5 _ Partner 6 Place / ठिकाण se Only				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3 Date / दिनांक : D D M M Y Y Y Y For Office Us Offical Custor	Signature / सही Partner 4 Partner 5 Partner 6 Place / ठिकाण se Only mer Visit				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3 Date / दिनांक : D D M M Y Y Y Y For Office Us Offical Custor Name of Branch Official Visiting	Signature / सही Partner 4 Partner 5 Partner 6 Place / ठिकाण se Only mer Visit No				
Signature / सही Sole Proprietor/Partner 1 Partner 2 Partner 3 Date / दिनांक : D D M M Y Y Y Y For Office Us Offical Custor	Signature / सही Partner 4 Partner 5 Partner 6 Place / ठिकाण se Only mer Visit No				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4 Partner 5 Place / ठिकाण see Only mer Visit No scorrect as mentioned in this form by customer. Visiting Officer Sign				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				
Signature / सही Sole Proprietor/Partner 1	Signature / सही Partner 4				



सन्मती सहकारी बँक लि; इचलकरंजी. (मल्टीस्टेट को-ऑप बँक)

For Office Use (To be Verify by Branch only) Check Points for Compliance of KYC Policy (आपला ग्राहक ओळखा)

Bring original documents for verification and please submit self attested copies of documents / सर्व मूळ दस्तावेज खातरजमा करण्यासाठी सोबत आणावेत. व दाखल करीत असलेल्या सर्व कॉपीजवर खातेदाराची सही असणे आवश्यक आहे.

सव मूळ दस्तावज खातरजमा करण्यासाठा साबत आणावत. व दाखल करात असलल्या सव कापाजवर खातदाराचा सहा असण आवश्यक आह.					
List A- Proof of identity (Any one-Tick the document obtained)	List B- Proof of Address (Any one-Tick the document obtained)				
☐ Passport ☐ Defense ID Card	☐ Passport ☐ Bank A/c Stt.				
☐ Voter ID Card ☐ Govt. ID Card	☐ Voter ID Card ☐ Employer's letter with address				
	☐ Latest Utility Bill ☐ Letter from public authority with address				
☐ Driving License ☐ EMp.ID Card	☐ Driving License ☐ Aadhaar Card				
☐ Aadhaar Card ☐ Any other Proof (Specify)	☐ Rent/Lease Deed ☐ Any other proof (Specity)				
	☐ Credit Card Stt.				
For Business Documents [Mark as (\checkmark)]	/ व्यवसायिक कागदपत्रे (🗸 अशी खूण करावी)				
Sole Proprietorship / Partnership / स्वत:च्या मालकीच्या व्यवसाय/भागीदारी संस्था	Private Ltd./Ltd. Company / प्रायव्हेट कंपनी/पब्लिक कंपनी				
Photographs of Sole Proprietor / All authorized Signatories मालकाचे छायाचित्र / अधिकृत स्वाक्षऱ्या करणाऱ्यांची छायाचित्रे	Certified Copy of Memorandum and Articles of Association संस्थेच्या मेमोरंडम आणि आर्टिकल्सची अधिकृत प्रत.				
Udyog Addhar Memorandom Certificate	Certified Copy of Certificate of Incorporation संस्था नोंदणीची अधिकृत प्रत				
Certified Copy of Partnership Deed (in case of Partnership firm) भागीदारी कराराची मोहोरबंद प्रत	संस्था नोंदणीची अधिकृत प्रत Cerfified Copy of Certificate of Commencement				
्रा भागीदारी कंपनी असेल तर)	of business (in case of Public Ltd. Co)				
Partnership Registration certificate	व्यवसाय/धंदा सुरुकरण्यासंबंधीच्या प्रमाणपत्राची अधिकृत प्रत				
भागीदार नोंदणी दाखला	जर पब्लिक संस्था असेल तर				
Request letter to open the account & mode of operation signed by all partners on letterhead.	Business Permission / व्यवसायाचा दाखला				
🔃 खाते उघडण्यासाठी विनंती अर्ज आणि सर्व भागीदारांच्या स्वाक्षरीसह	Resolution to Open the Account, Mode of Operation & List of Authorize signatories / खाते उघडण्यासंबंधीचा				
लेटरहेडवर खात्यावर व्यवहार करण्याच्या पध्दती बदल पत्र.	ठराव आणि व्यवहार करण्याची पध्दत व सर्व अधिकृत स्वाक्ष-यांची यार्द				
PAN and Proof of identity for sole Proprietor/All Partners as mentioned above. पॅन आणि मालकाचे / सर्व भागीदारांचे ओळखपत्र.	List of all directors & Addresses सर्व संचालकांची नावे व पत्यांची यादी				
HUF / हिंदू अविभक्त कुटुंब संस्था					
🗌 Photographs of Karta कर्त्याचे छायाचित्र	☐ HUF letter signed by Karta & all major co-perceners				
 Huf PAN Card, KYC Cuments पॅनकार्ड, केवायसी पेपर्स 	हिंदू अविभक्त कुटुंबाचे कर्त्याने स्वाक्षरी केलेले पत्र आणि सर्व				
🗌 Ration Card/ कौटुबिंक पुरवठा पुस्तिका	वारसांचे संमतीपत्र				
Trust/Club/Society/Association /Bank / ट्रस्ट/क्लब/सोसायटी/असोसिएशन/बँक					
Photographs of all authorized signatories सर्व अधिकृत व्यक्तींची छ्याचित्रे	Certified true copy of certificate of Registration नोंदणीप्रमाण पत्राची अधिकृत प्रत				
Certified true copy of trust deed (for trust) विश्वस्त संस्थेच्या उपविधीची अधिकृत प्रत (विश्वस्त संस्था असल्यास)	Banking Licence बँकींग परवाना				
Certified true copy of bye-laws	Resolution to open the Account, Mode of operation				
(for Club/Society/Association/ Co-op. Bank)घटनेची अधिकृत प्रत (क्लब/सोसायटी/असोसिएशन/को-ऑप. बँक)	& List of authorized signatories. / खाते उघडण्यासंबंधीचा ठराव आणि व्यवहार करण्याची पध्दत व सर्व अधिकृत स्वाक्षऱ्यांची यादी				
All Account Types / सर्व खात्यासाठी					
Latest Shop / Establishment Act Licence अद्यावत शॉप नोंदणी परवाना	Latest Corporation/Municipal permission अद्यावत नगरपालिका / महानगरपालिकेने जारी केलेला परवाना				
GST Registration	☐ Certificate of practice issued by CA/CS				
Last Year Income Tax Return, Statement Finacial	CA/CS यांनी जारी केलेले प्रॅक्टिस प्रमाणपत्र				
	Latest Telephone Bills /अद्ययावत टेलिफोन बील				

SANMAT! SANMATI SAHAKARI BANK LTD; ICHALKARANJI. (MULTISTATE CO-OP. BANK) Check Points for compliance of KYC Policy (आपला ग्राहक ओळखा) Description Yes/No (Y/N) Description Yes/No (Y/N) Copy of PAN Card 6 Identity of prospective customer does notmatch with person 1 with known criminal background/banned in individual terrorist Recent photograph/s of the applicant/all the joint applicants 7 Risk Rating has been done & marked in system 2 3 Proof of identification (as per list A) obtained Personal visit Branch Official Proof of identification (as per list B) obtained Confirmation of cash credit A/c in other bank **Business Documents** 10 If HUF, then Declaration Customer Risk Rating Mark as (V) Risk Rating of Customer at Initial stage: High ____ Medium ____ Low **For Branch Verification** Introducer's signature verified & found correct. I have verified all the relevant Documents and the Account Holder Have signed before me. Particulars of Form DA1 are entered and nomination has been registered. Date Asst. Manager / Branch Manager Officer Clerk **Periodical Updation of Customer Identification Procedure** (Once in 2 years in case of High Risk Account, once in 8 years in case of Medium Risk account and once in 10 years in case of low Risk account) Date of Details of Identification Procedure Entered in List Year Of Authorised Updation Software Date **Next Review** (Including) Signature With Date Name of ID Proof : Please Paste Name of Address Proof : __ Passport Size Photo Photograph (Latest) Obtained: Yes / No Other Documents, If any: Name of ID Proof: Please Paste Name of Address Proof : a Latest Passport Size Photograph (Latest) Obtained: Yes / No Photo Other Documents, If any: Name of ID Proof : Please Paste Name of Address Proof : _ Passport Size Photo Photograph (Latest) Obtained: Yes / No Other Documents, If any: Note: To be filled at the time of fresh KYC updation only. PERIODICAL REVIEW OF RISK RATING (Once in 2 years in case of High Risk Account, once in 8 years in case of Medium Risk account and once in 10 years in case of low Risk account)

Sr. No.	Date of Review	Risk Rating (Low / Medium / High)	Entered in List Software Date	Next Review Due Date	Officer Signature
1					
2					
3					
4					
5					
6					
7					
8					

Note: Sr. No. 1 should be filled at the time of account opening & later as per periodic review.

हैं ਫ਼ੈਲੋਵੇਵੇਂ । सन्मती सहकारी बँक लि; इचलकरंजी. (मल्टीस्टेट को-ऑप बँक)				
E-Banking Services Application				
Branch / शाखा : Customer ID / ग्राहक क्र. :				
Account No./ खाते क्र. : Date / दिनांक : D D M M Y Y Y Y				
I/We wish to avail following E-Banking Services.				
☐ Debit cum ATM Card I/We request you to issue ☐ Insta Card ☐ Personalised Debit Card ☐ Other				
☐ SMS Banking I wish to register my account for SMS-Messaging. My Mobile Number				
□ Aadhaar - Linking कृपया माझे खाते आधार नंबर जोडणेत यावा. Please link my account to following Aadhaar No. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				
☐ E-Statement Frequency ☐ Monthly ☐ Quarterly ☐ Yearly Email ID :				
Mobile Banking (Separate form to be filled / स्वतंत्र अर्ज सादर करण्यात यावा)				
ि Cheque Book ∕ चेकबुक YES / No				
Declaration / जाहीरनामा				
I/we have read and understood the terms & conditions. I/we accept and agreed to be bound by terms and conditions applicable from time to time. I/we agree that Bank may debit my/our account for service charges as applicable from time to time for the use of required services. Terms & Conditions as mentioned on page no. 7 & 8 of this form has been read, understood & binding on me. / मी/आम्ही नियम वाचले व समजून घेतले. मला/आम्हाला सर्व नियम मान्य असून, नियमांत वेळोवेळी होणारे बदल पाळण्यास आम्ही बांधील आहोत. माझ्या/आमच्या खात्यातून वेळोवेळी आवश्यक असणारे सर्व्हिंस चार्जेस घेण्यास माझी/आमची मान्यता आहे. पान न. ७ व ८ वरील नमूद केलेले सर्व नियम व अटी वाचले असून ते सर्व मला मान्य व काबुल आहेत.				
First Holder Second Holder Third Holder Date / दिनांक :				
Fourth Holder Fifth Holder Sixth Holder				
For Branch Use Only				
The Above chosen services by customer has been marked in system properly & Welcome kit has been given to customer. वरील प्रमाणे ग्राहकाने मार्क केलेले सर्व सूचना सिस्टीममध्ये अपडेट केलेले आहे आणि वेलकम किट ग्राहकास दिले आहे.				
Date / दिनांक : DDMMYYYYY Officer Asst. Manager / Branch Manager				

SANMATI SAHAKARI BANK LTD; ICHALKARANJI. (MULTISTATE CO-OP. BANK)

Terms and Conditions / नियम व अटी

- 1. Meaning The Term Bank refers to the Sanmati Sahakari Bank Ltd. Ichalkaranji. (Maltistate Co-op. Bank) 'ATM' refers to the Automated Teller Machine installed of the branches of the Bank. 'Card Holder' refers to the Authorized User of 'ATM Card'. The 'CIS' refers to Card Issuing Branch of the Bank and 'ITC' refers to Information Technology Cell at Head Office of the Bank. The applicant (hereinafter called THE CARDHOLDER) along with the joint a/c holder, if any, of the Savings / Current account unconditionally accept the following terms & conditions for using the ATM Card.
- 2. ATM-Account Eligibility: a. A satisfactorily KYC complying savings / current account to be eligible for opening of an ATM Account. b. The cardholder shall give his preference of such account(s) held by him in writing on this application form for the issue of 'ATM card'. c. An account operated under joint signature(s) shall be eligible to be an 'ATM Account'. d. Special Accounts: In case of Partnership Firm, Private Limited, Ltd Company, Co-operative Soc, Trust, HUF and Pensioners account ATM cards will not be allotted. e. Joint Account: In case of joint account, the card shall be offered in the first name, who will be authorized to utilize to this card. But all accountholders in joint account will be held responsible made through ATM.
- 3. ATM PIN (Personal Identification Number): PIN Select: Each ATM card holder shall be issued his or her 'Personal Identification Number' (PIN) to gain access to the ATM services and to operate account. The Card holder should change his pin immediately on receipt of printed pin mailer issued by Branch. The PIN shall under no circumstances be disclosed or open to any third party or keep the card & pin together. The card holder should keep memory of his PIN and maintain its secrecy to avoid any misuse and keep custody of ATM card safe and inaccessible. The cardholder shah be solely responsible for the consequences arising out of the disclosure of his PIN and / or unauthorized use of ATM card and shall be liable for any increased liability which he may incurred on account of unauthorized use
- 4. ATM Card Validity: The ATM card will be valid maximum for a period of seven years from the date of issuance of card. However, validity period may be extended for further period under notice to the card holder.
- 5. Minimum Balance: Minimum balance at all times is required to be maintained as may be specified by the bank from time to time while enjoying the Debit-Cum-ATM Card facility. The bank has liberty to entail the penal interest or service charges as per the Bank's rules from time to time. The bank reserves the right to $continue\ or\ discontinue\ this\ service\ unilaterally\ without\ assigning\ the\ reason\ to\ the\ customer.$
- 6. Fees: All fees related to ATM facility as determined by the Bank from time to time shall be payable forthwith on issuance of card and recovered by debiting the ATM card holders account if not paid in cash. In case of insufficient balance to debit account Bank has full right to stop the operation of ATM card and /or cease account or Bank-shall withdraw the ATM card facility.
- 7. Non transferability: ATM card is non transferable under any circumstances. The ATM Card is and shall be meant for individual and not joint operations by any number person/s more than one
- 8. Card Ownership: The card is and shall remain the property of the Bank and will be surrendered to the Bank upon request or in the event of cardholder no longer requiring the service.
- 9. Loss of card: In case of loss or theft of the ATM card the cardholder shall intimate to bank immediately on same date in writing of loss / theft of ATM card. The cardholder shall advice the branch as prompt as possible in writing of the loss of the card howsoever off coming. The cardholder shall however be responsible for all transactions effected by use of the card until it is on confiscated / cancelled it is mandatory on the part of the cardholder to lodge police complaint at the nearest police station where the incidence of theft occurs. The cardholder shall, however be responsible and liable for all transactions effected by the use of the card till it is cancelled. Account holder will have to give in writing application for issuance of new card. Another ATM card will be issued to account holder in lieu of lost / stolen/damage ATM card on payment of card fees /charges. The card holder will have give the declaration form to the respective branch in the prescribed format as specified by bank
- 10. Refusal / termination / withdrawal of ATM CARD: The Bank has absolute right and sole discretion to refuse to issue or to renew or to cancel or to suspend or to call off or to withdraw facility for misuse, malfunction, tampering ATM, non payment of account charges, interest, dues etc. without assigning any reason therefore or giving prior notice.
- 11. Indemnification: ATM cardholder shall indemnify the Bank for the loss or damage caused, directly or indirectly, by his act of commission / omission contrary to any of the terms and conditions, or even otherwise.
- 12. Closure / Termination: ATM cardholder if desires to close the ATM account or terminate ATM facility can do so provided minimum seven working days prior written notice to Bank is given along with surrendering ATM Card to the Bank. The closure of such account will be allowed only on settlement of all-dues in connection with ATM facility.
- 13. Account Status Change: Any change in the mode of operation, transfer or change of ATM card account shall not be allowed unless Bank's written permission is sought. For any change or transfer ATM card will have to be surrendered to the bank and a fresh card will be issued on payment of fees / charges
- 14. CHANGE IN STATUS OF SAVING / CURRENT ACCOUNT: Any change in mode of operation of Savings / Current account of the cardholder by way of closure, transfer or any other such way will not be allowed, unless the card is surrendered and dude if any against it are paid.
- 15. NOTICE TO WITHDRAW DEPOSIT / CLOSING THE ACCOUNT: If the cardholder desires to close his / her Savings / Current account or even otherwise decides to terminate the use of ATM Card facility he / she shall forthwith surrender the card at the branch and obtain a valid receipt
- 16. DELISTING OF CARD: A card can be de-listed for loss of card misuse of card expiry of validity period of card damage of card on specific request form the cardholder option of customer withdrawing from the scheme demise/Lunacy/insolvency of the cardholder any other eventuality such as police case, judicial order, operation of law etc., which may demand delisting.
- 17. Authority & Responsibility: I) The Bank shall not be responsible for any loss or damage arising directly or indirectly as a result at any malfunction failure of the ATM card or the ATM or for the temporary Insufficiency of funds in such machine or otherwise whatsoever. ii) The Bank reserves the right to limit the amount which may be withdrawn by cardholder daily any time without giving, any prior notice. The Bank also reserves the right to restrict the ATM to certain Hours of the day as may be notified and displayed from time to time. iii) The Bank reserves the right to amend, add or delete any of terms & conditions or rules without prior notice to ATM account Holder. iv) It is sole responsibility of the cardholder, for the transaction done by ATM card as with cardholder's knowledge or authority, express or
- 18. Refund of Amount: If the cardholder withdraws the amount from the other BANKS Network ATM, and if the cardholder not receives the amount then he / she has to fill up the complaint form to branch within 30 days from the date of transaction. After the process is done it will take nearly 07 days to credit the amount to the customer account.
- 19. DELIVERY OF CARD: Upon receiving information from the Bank that the card is ready the cardholder shall go to the designated officer / branch manager of the bank and take delivery of the card after sufficiently establishing his / her identity.
- 20. DELAY IN TRANSACTIONS: The Bank is and shall not be held responsible for any loss or damage or in convince caused to the cardholder if the cardholder is not honored in the desired manner for whatsoever reasons disrupted due to failure of software / hardware or exhaustion of cash in ATM Centre. However Bank will take reasonable care in servicing the cardholder.
- 21. TRANSACTIONS RECORD: A cardholder shall accept the Bank's record of transactions as final conclusive and binding for all purposes.
- 22. DRAWING LIMIT FIXATION: The Customer can withdraw Rs.20,000/-(Rs. Twenty Thousand) per day through the balance amount. The exposure limit shall be decided by the bank from time to time as and when required, which will be binding on customers.
- 23. CHANGE OF T&C: The Bank reserves the right to act or to delete any / or to vary any one of these terms & conditions of any time without any notice.
- 24. IRREVOCABILITY OF POWERS: All authorization and powers conferred herein on the bank are irrevocable
- 25. Instant Debit Card: Instant Debit card will be provided in Well-Come Kit. This Debit card doesn't have printed card holders name. Except this, all other terms and conditions as above said are same for Instant debit card. If any customer wants his/her name printed on card, then he/She have to make an application for personalized debit card and needs to submit Instant Debit Card to bank.
- 26. The transaction made after Bank's working hours shall be recorded on the account of cardholder on next day as value date.



सन्मती सहकारी बँक लि; इचलकरंजी. (मल्टीस्टेट को-ऑप बँक)

DECLARATION / जाहीरनामा

Any Branch Banking:

1. The Bank shall facilitate payment and collection of cheques through all its branches while I/we shall have one account at the branch (for short 'Home Branch'). Bank shall also accept cash from me/us and pay in cash against presentation of cheques drawn by me/us in favor of myself/ourselves with the Home Branch as per the applicable limits for the account. The cash transaction will be on the same lines as is the case when deposits/withdrawals take place at the home branch. Charges for cash deposit in branch other than home branch will be as per bank rules. 2. While the instruments for and on my/our behalf will be collected in local clearing, the credit in respect of the proceeds there under will be afforded at the home branch on and subject to realization at the respective center(s) Branch(es). 3. The Bank entitles to debit by its home and any other branch(es) in my/our account as its base branch against the cheques presented at various branches of the Bank. 4. My/our written intimation of "stop payment" to the various branches of the Bank will be at my/our risk and I/we agree to grant a lead time of at least 24 hours for intimation of such "stop payment" instruments to all its branches. In case of any mutilated and/or erroneous information which may emerge by of due any communication error and if the "stop payment" is not carried out in good faith based in the said information, the bank shall not be held responsible for the said act. 5. I/We agree to inform my/our existing bankers for the availment of any of the facilities hereby granted to me/us. I/we also agree from time to time to furnish such information details and the documents to the existing bankers and also the bank as is mandatory under the law and force from time to time to time or as the bank regards necessary and/or expedient under the banking practice/procedure. 6. The agreement herein contained shall not affect prejudice or derogate from the bank's rights and privileges under the law including the right to claim set off general and the bankers disposing or retaining lien or similar rights pertaining to my our credit balance in the account with the bank. 7. In the event of any malfunctioning and/or break down in the working of the said network for the $reasons beyond the control of the bank, the benefits and the facilities hereby granted to \,me/us \,will \,stand \,suspended \,during \,such \,break-down \,in \,which \,such \,such$ case the bank will not in any manner be liable and /or responsible to me/us for any damages/compensation and/or for any other consequences arisingout of such suspension. 8.1/we agree on behalf of business firm to hold the Bank indemnified in case the bank suffers any loss in account of operation of the scheme for my/our benefit.

Current Account:

1. The current account should be used to route the transactions of only business/ commercial nature. In the event of occurrence of such transactions or any such transactions that may be constructed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and/or close the accounts. 2. Bank will not pay any interest on current deposit. 3. The customer should maintain minimum balance as may be required from time to time in the account and communicated at the time of opening of the account. Changes in the bank/service charges or minimum balance requirements are displayed on the notice board of the branches and on the website. The non-maintenance of the adequate balance shall automatically entitle the Bank to levy the charges for non-maintenance of balance. In such an event, the Bank shall have first right to set-off any available credit that may be available in the account including from amounts flowing into said account for collection proceeds or any deposits. Notwithstanding the above, if the Bank is of opinion that if the customer does not maintain minimum balance and/or if the account remains a Zero balance and/or the overall conduct of the account is not satisfactory, the Bank shall have a right to close the account by issuing reasonable period notice. In the event, if the said account is funded within reasonable period, the Bank may not exercise the said right to closure. If not, the Bank shall close the account without any further notice to customer. 4. If there is no transaction in the account for 2 years, the account automatically gets classified as a 'dormant account' whereupon further debit transactions are not permitted in the ordinary course. A request for activation of the account along with complete KYC has to be made by the customer. 5. Satisfactory conduct of the account entails maintaining stipulated minimum balance as well as sufficient balance to honour cheques issued to third parties. If there are high incidences to the contrary, the Bank reserves the right to close the accounts without any further notice to the customer. **6.** Any special instructions, both financial and non-financial in nature, like Standing Instructions, Stop Payment Instructions, Issuance of cheque books, Demand Drafts, Pay Orders, request for ATM card, ECS Credit & Debit, Issuance of duplicate card/PIN must be communicated in writing. Otherwise, it shall not be binding on the Bank to comply with such instructions, Charges as applicable will be levieable to customer. 7. The Current Account entitles free access to Sanmati Sahakari Bank Ltd. Ichalkaranji. (Maltistate Co-op.Bank) Internet Banking unless otherwise stated. 8. All other charges for services like RTGS, NEFT, E-Tax payment facility, SMS Banking, ATM Card Usage and any other services etc. will be applicable as per banks rules issued from time to time. 9. Any change of address or contact details should be immediately communicated in writing to the bank along with address proof. If bank is unable to inform any changes in rules or service charges due to wrong submission of contact details or due to failure to submit the updated contact details by applicant, then it will be sole responsibility of applicant and all the changes will be binding. 10. There is no restriction on number of deposits or withdrawals that can be made into the account. 11. Accounts may be transferred between branches of the Bank at the request of account holder(s). Request for closure of account should accompany with pass-book if taken, unused cheque leaves and Debit-Cum-ATM card. Joint accounts can be closed only at the request of all such joint signatories.

Declaration:

I/We read the terms and conditions on the Bank's Website (www.sanmatibank.com) and detailed in the terms and conditions available at Branch, governing the opening of account with bank and those relating to use of various services including but not limited to above explained i.e. ATM cum Debit Card facility, Branch Banking and Current Account etc. I/we have understood the same and agree to abide by such/any other terms and conditions that may be in force from time to time. I/we have also read the Bank's Schedule of charges for the respective and agree to abide by the same. I/we have also understood that all the terms & conditions and the service charges are subject to change without any prior notice. The information furnished/declaration given by me/us in this form is true and I/we shall be held responsible for the same at all time. I/We also understand that the continuation of the accounts is at the Bank's sole discretion, and in case of dissatisfaction with the conduct of the account, the bank has right to close the account after giving suitable notice of withdraw some/all services /concessions granted to me/us.

	First Holder	Second Holder	Third Holder
Date / दिनांक :			
D D M M Y Y Y Y	Fourth Holder	Fifth Holder	