

CURRENT ACCOUNT – NON-INDIVIDUAL CUSTOMER**PHYSICAL VERIFICATION REPORT**

Name of the Entity : M/s _____

Account No. : _____

We hereby certify that we have visited the premises of M/s _____ at the following address on ___/___/20___ and submit our observations/ findings as under.

Business / Office Address Details:	
Door / Unit No.	
Name of the Building	
Street Name	
Locality	
Village/ Town	
District/ State	
Pin code	
Landmark	
Contact Details of Unit	Phone/ Mobile no.: Email ID: Website:
Details of Other Unit/ Entity	

Operating from the same address/ premises, if any, with justification			
Name Of Proprietor/ Partners/ Key Persons <i>* Whether present during Physical Verification</i>	Name	Mobile	*Present
	1.		Yes/ No
	2.		Yes/ No
	3.		Yes/ No
	4.		Yes/ No
Ease of accessibility/ locating	Easy/ Difficult/ Untraceable		
Cooperation from Customer	Fully cooperated / Hesitant/ Did not cooperate		
Type of ownership of the Business Address	Inherited/ Owned / Rented/ Others (pl specify) If rented,		
	Name & address of owner		
	Monthly rent		
	Period of agreement		
	Other, if any		
Type of locality	Village/ Semi Urban/ Urban/ Metropolitan Residential/ Commercial/ Project Area		
Documents with which address was verified			
Business Activity exists	Yes/ No		
Level of business/ stock/ activity (Compared to other units in the area)	Negligible/ Average/ Normal/ High		
Ambience/ Look	Poor/ Good/ Excellent		
Assets seen at the premise (Viz. Vehicles/ Furnitures/ Computers/ ACs etc)			
Nature of signage	Permanent/ Temporary (on Paper/ Cardboards) New / Old		
Distance of the Unit from the Branch			

No. of attempts made to contact Customer for the verification		
No. of Selfie taken during the visit and attached.	Selfie taken with/ at	No.
	Account holder/ key person(s)	
	Sign board	
	Frontage	
	Stocks/ godown etc.	
	Others (pl specify)	
	Total	
Any other observations, not covered above		

	Person conducting the physical verification
Signature of Authorised Signatory	
Name & PF No. / Employee No. of Signatory of Branch/ Agency	
Name of Verifying Agency (If done by Verifying Agency)	
Date & Time of Verification	

----- For Branch/ TB Hub/ Office use only -----

We have scrutinised the 'Physical Verification Report' and discussed with Customers regarding 'Declaration by Customer' and FOUND / NOT FOUND them to be reasonable and acceptable. We recommend TO OPEN/ NOT TO OPEN the account.

Signature of Official Authorised to open Account	
Name & PF No. of Authorised Signatory	
Branch & Code no.	