

5. NATURE OF BUSINESS

MANUFACTURER TRADER RETAILER SERVICE PROVIDER EXPORT / IMPORT OTHERS _____

INDUSTRY CODE*: (PLEASE REFER TO INDUSTRY CODES GIVEN AT THE BOTTOM) OTHERS: _____

ANNUAL TURNOVER <input type="checkbox"/> 0-5 LAKH <input type="checkbox"/> 5-10 LAKH <input type="checkbox"/> 10-25 LAKH <input type="checkbox"/> 25 LAKH- 1CR. <input type="checkbox"/> 1 CR <	SOURCES OF FUND : <input type="checkbox"/> SALARY <input type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> AGRICULTURE <input type="checkbox"/> INVESTMENT INCOME <input type="checkbox"/> PENSION <input type="checkbox"/> OTHER
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MLM UNDERTAKING :

"I Declare that my Proprietorship Firm is not a MLM (Multi Level Marketing) Firm"

"I Declare that my Proprietorship Firm is a MLM (Multi Level Marketing) Firm" (Select Industry code 98, if MLM Firm)
 Firm is doing business of MULti-Level Marketing and has given an undertaking to the Department of Consumer Affairs that the Firm is in compliance with Direct Selling Guidelines, 2016 issued by the Government of India, Ministry of Consumer Affairs, Food & Distributions as also any direct selling guidelines issued by the State Government, where the registered office of the Firm is located. Further, the Firm is not in violation and I undertake not to violate the provisions of Prize Chit.

6. ACCOUNT VARIANT

Regular Current Account (MAB - Rs. 5,000/-) Gold Current Account (MAB - Rs. 1,00,000/-)
 Diamond Current Account (MAB - Rs. 5,00,000/-) Platinum Current Account (MAB - Rs. 10,00,000/-) Others _____

7. SERVICES REQUIRED

CORPORATE INTERNET BANKING : VIEWING RIGHTS <input type="checkbox"/> TRANSACTION RIGHTS <input type="checkbox"/>	BUSINESS DEBIT CARD : PRIDE <input type="checkbox"/> PREMIUM <input type="checkbox"/>
CASH MGMT PRODUCTS <input type="checkbox"/> viz CASH PICK UP <input type="checkbox"/> e-COLLECTION <input type="checkbox"/> e-PAYMENT <input type="checkbox"/>	POS FACILITY (CARD SWIPING MACHINE) <input type="checkbox"/> CHEQUE BOOK <input type="checkbox"/> UPI / QR CODE <input type="checkbox"/> SMS ALERTS <input type="checkbox"/> E-HAND SHAKE INSTA DEPOSIT CARD <input type="checkbox"/>
DO YOU WISH TO REGISTER FOR POSITIVE PAY SYSTEM: YES <input type="checkbox"/> NO <input type="checkbox"/>	

8. MODE OF OPERATION

SINGLY OTHERS : (PLEASE SPECIFY) _____

9. COUNTRY OF RESIDENCE AS PER TAX LAWS *

DETERMINE* WHETHER THE ENTITY IS 'FI' OR 'NFE' [AN ENTITY CAN BE EITHER AN 'FI' OR 'NFE' , IT CAN NOT BE BOTH]

FINANCIAL INSTITUTION (FI) : (IF FINANCIAL INSTITUTION (FI) IS TICKED, PLEASE ALSO FILL ANNEXURE I & ANNEXURE II FOR ALL THE RELATED PERSON)
 (BANKS, INSURANCE AGENCIES, NBFCs ETC.) OR

NON FINANCIAL ENTITY (NFE) : IF ENTITY IS NFE, WHETHER IT IS* : **ACTIVE NFE OR** **PASSIVE NFE**
 (AN ENTITY CAN BE EITHER AN 'ACTIVE NFE' OR A 'PASSIVE NFE', IT CAN NOT BE BOTH - SEE INSTRUCTIONS 'H' IN GENERAL GUIDELINES FOR ACTIVE & PASSIVE NFE)

TAX RESIDENT OF INDIA ONLY AND NOT OF ANY OTHER COUNTRY OUTSIDE INDIA YES **NO** **IF "NO" THEN PLEASE FILL ANNEXURE C - FATCA & CRS ***

10. FORM - 60 (IN CASE PAN IS NOT AVAILABLE)

NAME:

(SAME AS ID PROOF)

IF APPLIED FOR PAN AND IT IS NOT YET GENERATED, ENTER DATE OF APPLICATION & THE ACKNOWLEDGEMENT NUMBER

IF PAN IS NOT APPLIED , FILL ESTIMATED TOTAL INCOME (INCLUDING INCOME OF SPOUSE, MINOR CHILD, ETC) AS PER SECTION 64 OF INCOME TAX ACT 1961 FOR FINANCIAL YEAR IN WHICH THE ABOVE TRANSACTION IS HELD

AGRICULTURE INCOME (RS) OTHER THAN AGRICULTURAL INCOME

VERIFICATION

I..... do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare I do not have a permanent account number and my/our estimated total income (including income of spouse, minor child, etc.) as per section 64 of Income Tax Act 1961 computed in accordance with the provisions of Income Tax Act 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

Verified today, the day of 20.....

Place:

Signature of the Declarant

INDUSTRY CODES

01: AGRI & RELATED SERVICE ACTIVITIES 02: FORESTRY, LOGGING & RELA ACTIVITIES 05: FISHING & RELATED ACTIVITIES 10: MINING OF COAL & LIGNITE 11: PETROLEUM & NATURAL GAS 12: URANIUM & THORIUM 13: MINING OF METAL ORES 14: OTHER MINING/QUARRYING 15: MFG OF FOOD PRODUCTS/BEVERAGES 16: MFG OF TOBACCO PRODUCTS 17: MFG OF TEXTILES 18: MFG OF WEARING APPAREL 19: MFG OF LEATHER PRODUCTS 20: MFG OF WOOD PRODUCTS 21: MFG OF PAPER & PAPER PRODUCTS 22: PUBLISHING/PRINTING	23: MFG OF COAL/COKE/PETRO PRODUCTS 24: MFG OF CHEMICALS PRODUCTS 25: MFG OF RUBBER/PLASTIC PRODUCTS 26: MFG OF NON-METALIC MINERAL PRODUCTS 27: MFG OF BASIC METALS 28: MFG OF FABRICATE METAL PRODUCT 29: MFG OF MACHINERY/N.E.C. 30: MFG OF COMPUTING MACHINERY 31: MFG OF ELECTRICAL MACHINERY 32: MFG OF RADIO/TV/COMMUNICATION 33: MFG OF MEDICAL/OPTICAL EQUIPMENT 34: MFG OF MOTOR VEHICLES/TRAILERS 35: MFG OF OTHER TRANSPORT EQUIPMENT 36: MFG OF FURNITURE/N.E.C. 37: RECYCLING 40: ELECTRICITY/GAS/STEAM SUPPLY	41: WATER SUPPLY 45: CONSTRUCTION 50: WHOLESALE/RETAIL TRADE 51: WHOLESALE/COMMISSION TRADE 52: RETAIL TRADE 55: HOTELS/RESTAURANTS 60: TRANSPORT/STORAGE/COMMUNICATION 61: WATER TRANSPORT 62: AIR TRASPORT 63: SUPPORTING/AUXILIARY TRANSPORT 64: POST & TELECOMMUNICATIONS 65: FINANCIAL INTERMEDIATION 66: INSURANCE/PENSION FUNDING 67: AUXILIARY FINANCIAL INTERMEDIA 70: REAL ESTATE ACTIVITIES 71: RENTING OF MACHINERY/EQUIPMENT	72: COMPUTER & RELATED ACTIVITIES 73: RESEARCH & DEVELOPMENT 74: OTHER BUSINESS ACTIVITIES 75: PUBLIC ADMN AND DEFENCE 80: EDUCATION 85: HEALTH & SOCIAL WORK 90: SEWAGE/SANITATION 91: ACTIVITIES OF MEMBERSHIP ORGANIZATION 92: RECREATIONAL/CULTURAL/SPORTING 93: OTHER SERVICE ACTIVITIES 94: PERSONAL LOANS 98: MULTI-LEVEL MARKETING FIRM (MLM) 99: MISCELLANEOUS
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APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I affirm and declare that I have read over and understood the rules and regulations of the State Bank of India ("Bank") and those relating to various services offered by the Bank including but not limiting to debit card/internet banking/SMS banking/Telebanking/Mobile Banking/ Virtual Banking and any other facilities. I agree to abide by the same as amended/modified from time to time by the Bank/Regulator/Government published through circulars, notifications, notice board/ websites/ newspaper publications, etc. I waive the rights, if any, to have personal notice in respect of such amendments/ modifications. I agree that the transactions and requests executed in my account(s) by me/authorized person through internet, mobile, telebanking or virtual banking under my User ID and password/PIN/OTP will be legally binding on me & I am responsible for the maintenance of secrecy and confidentiality of the authentication credentials and any other information/ details/OTP/PIN, etc., in such matters. I agree that Bank has got all the rights to debit my account for any service charge, expenses or other dues which the Bank is entitled/ liable to recover from me. I also authorise the Bank and agree to close/ discontinue my account without any notice to me in case of any violation of laws/rules/ regulations or terms and conditions of maintaining the account . I hereby undertake to inform the Bank on any change in my communication address or constitution, and I shall submit the address proof in case of transfer of my account from one branch to another branch.
- In respect of accounts opened on the basis of Aadhaar details, I hereby declare that I have submitted the Aadhaar Card issued by UIDAI for identification and / or address proof towards the compliance of KYC norms under the PMLA , 2002 and I hereby agree that the Bank may verify the same with UIDAI and authorise the UIDAI expressly to release the identity and address through biometric authentication to the Bank.
- I confirm and declare that I am not prevented/prohibited/restricted by any applicable legal/regulatory/contractual or other provisions from opening and/or maintaining the accounts or to transact with the Bank in any other way.
- I agree that my personal KYC details may be shared with Central KYC registry or any other competent authority. I hereby consent to receive information from the Bank/Central KYC Registry/Gol/RBI/Credit Bureau Agencies or any other authority through SMS/e-mail on my registered mobile number/ e-mail address. I also agree that the non-receipt of any such SMS/e-mail shall not make the Bank liable for any loss or damage whatsoever in nature.
- I hereby certify that I have declared my status as per the rules applicable under section 285BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes (CBDT) vide Notification No. S.O. 2155(E) dated 7 August 2015 and RBI Circular Ref No. DBR.AML.BC.No.36/ 14.01.001/2015-16 dated 28 August 2015 in the matter including any subsequent modification/amendment thereof.
- I understand, acknowledge and authorize that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government/RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter- Governmental Agreements (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and / or any other similar arrangements.
- I certify & declare that the information provided by me for opening account and availing other services herein or through website/electronically as applicable to me and signed/authenticated by me as well as in the documentary evidence provided by me for opening account and availing other services are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of my account as a U.S. Reportable Account or Other Reportable Account or otherwise. In case any of the information or details provided by me is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I undertake the responsibility to declare and disclose immediately and in no case beyond 30 days from the date of change, any changes that may take place in the information provided herein/ or otherwise, as well as in the documentary evidence provided by me or if any certification becomes incorrect or undergoes a change. I further undertake to provide fresh and valid self-certification along with documentary evidence as and when so required; nevertheless all declaration and undertaking given herein will also be applicable to all such modified/amended documents/information provided by me unless revised self certification as above is provided to the Bank.
- I also agree that my failure to disclose any material fact/information known to me now or in future or my failure to remedy any deficiency in documents/ information/other details within the stipulated period, may invalidate me from transacting in the account and the Bank would be within its right to put restrictions in the operations of my account or to close it or to report to any regulator and/or any authority designated by the Government of India (Gol)/RBI for the said purpose or take any other action as may be deemed appropriate by the Bank under the guidelines issued by CBDT/RBI/Gol from time to time.
- I also agree to furnish and intimate to the Bank any other particulars that are called upon me to provide on account of any change in law either in India or abroad in relating to the operation or maintenance of the account.
- I shall indemnify the Bank from any loss/damage that may be caused to the Bank on account of any defect/mistake in the details provided herein or on account of providing incorrect or incomplete information by me.
- I undertake to submit data/information together with fresh KYC documents for updation of KYC details at periodical intervals as may be required by the Bank.
- I understand that the account will be activated and debits will be allowed only after completion of Customer Due Diligence relating to KYC by the Bank.
- I have been advised of Monthly average/minimum balance requirement for the account to be opened and given to understand that these requirements are subject to revision/change from time to time and such revision/changes will be uploaded in the Bank's site which will be acceptable to me as a notice to that effect. I also undertake to keep MAB (Monthly Average Balance) in the account as prescribed from time to time under the respective account scheme and agree to pay the penalty if MAB is not maintained.
- I Undertake to submit Aadhaar and / or PAN within 6 months from the date of opening of account , failing to which I understand my account will cease to be operational as per GOI guidelines, Prevention of Money laundering (Maintenance of Records) Rules 2005. as amended from time to time (In case the account is opened without Aadhaar / PAN)
- In case, deemed OVDs are submitted for current address at the time of Account opening, I undertake to submit Aadhaar or any of the OVD having Current Address within 3 months from the date of account opening , failing which I understand that my account may cease to be operational as per GOI guidelines at the material time.
- I hereby agree and consent to receive marketing communications through telephone calls/E-mail/ SMS/ WhatsApp messages on various products features promotion offers provided by the Bank and its Group Companies/Associates/ Subsidiaries /Affiliates / Joint Ventures. I also acknowledge and agree that the consent hereby provided by me shall be legally binding on me irrespective of my registration with DND / NCPR registries and shall override such registrations. YES No, I do not Agree (Put a tick mark against the preferred option)
- Notwithstanding the above I acknowledge and agree that the bank may at its absolute discretion disclose any of my information if required or permitted by any law rule or regulation or at the request direction of any statute or regulatory authority or court of law or as such disclosure is required for the purpose of preventing any fraud without any specific consent authorisation from me.
- I declare that I can understand, read and write in English language.
- I hereby confirm that I have read and understood all the SBI Current Account rules as applicable to Current Accounts as well as the General instructions for filling Current Account opening form as available at the Banks website : bank.sbi>>Business>>Current Account Physical copy of General instructions is also available at the Branch.

Please paste photograph here	SIGNATURE OF PROPRIETOR	OFFICER (SIGNATURE)
	NAME : DATE :	NAME : PF No. : SS No. :

CURRENT ACCOUNT RULES

- Whenever the customer does not use alternate channels for opening the Current Account, payments to credit of an account with the Bank should ordinarily be accompanied by a payin slip duly signed by the constituent. Slips with counterfoils will be supplied in book form and the entry of the transactions made in the counterfoil will be authenticated by the initials of an authorised employee of the Bank. The depositor should satisfy himself that the transaction is so certified.
- Cheques must be drawn on the Bank's printed forms. The Bank reserves its right to refuse payment of any cheque drawn otherwise. The bank reserves the right to refuse payment of cheques that have been altered in any way unless the alternation is authenticated by the drawer under full signature. Cheques should be drawn in such a way as to prevent alteration after issue, and the signature should be uniform with that on record at the Bank.
- Constituents should not overdraw their accounts, even for small amounts without having made previous arrangements. Overdraft are granted in current accounts on terms as per extant instructions. Interest will be charged at the rates stipulated by the Bank and calculated upon the daily balances.
- The Bank will register instructions from the drawer regarding cheques lost, stolen, etc. but cannot guarantee depositors against loss in such cases in the event of such a cheque being paid.
- The bank collects bills, drafts, cheques, pay and pension bills, etc. on behalf of constituents. In personal accounts, the Bank offers up to a specified limit immediate credit in respect of cheques, drafts, dividend warrants, etc., payable at outstation branches.
- Local cheques, etc. will be cleared under CTS Clearing
- Cheques, bills, etc. sent in for collection and credit of an account must not be drawn against until they have been realised.
- Bills, notes, etc. not payable on demand, intended for realisation by the Bank, should be sent at least one clear day before due date.
- The Bank accepts standing instructions on accounts for making periodic remittances, etc.
- Statements of accounts will be sent to constituents periodically and can be obtained at any time on application. The entries of accounts should be carefully examined by the constituent, and, if any errors or omissions are discovered, the attention of the Bank must be drawn to them immediately. The Bank will not be responsible for any loss arising from neglect of this precaution.
- Any change in the address of the constituent must be promptly advised to the Bank. In all their correspondence with the Bank and on pay-in slips etc. constituents should clearly mention the account number allotted at the time of opening of the account.
- Accounts may be transferred at the request of the constituents to any other office of the Bank.
- The Bank accepts securities and shares for safe custody and realisation of interest, dividends, etc. on terms which may be had on application.
- The Bank reserves the right to alter/add/delete any of these rules at any time.

NOMINATION :

I WANT TO MAKE A NOMINATION IN MY ACCOUNT **OR**

I DO NOT WANT TO MAKE A NOMINATION IN MY ACCOUNT

NOMINATION FORM (DA1)

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

I _____ nominate the following person to whom in the event of my /our /minor's death the amount of Deposit, particulars whereof are given below, may be returned by State Bank of India _____ (Name and address of branch / office in which the deposit held).

NOMINATION
SERIAL NO.

DETAILS OF DEPOSIT :

Type of Deposit : _____ ACCOUNT NO:

DETAILS OF THE NOMINEE

NAME:

RELATIONSHIP WITH THE DEPOSITOR : _____ AGE: DATE OF BIRTH OF NOMINEE:

ADDRESS:

CITY: PIN: STATE:

CIF NO. OF NOMINEE (to be filled by LCPC):

As the nominee is a minor on this date, I appoint Shri/Smt. _____ age _____ years

Address _____

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

[Note : Nomination in favour of other than Individual is invalid]

SIGNATURE OF PROPRIETOR

FOR OFFICE USE ONLY

1. APPLICANT INTERVIEWED AND PURPOSE ASCERTAINED (SPECIFY THE PURPOSE) : _____

2. WHETHER SELF - CERTIFICATION & DOCUMENTS SUBMITTED BY THE CUSTOMERS HAVE BEEN VERIFIED AND FOUND CORRECT AND RELIABLE: YES NO

(CARE : BRANCH TO PROCEED WITH OPENING OF ACCOUNT ONLY WHEN THIS CERTIFICATION IS "YES")

3. THRESHOLD LIMIT IS RS: _____

4. DOCUMENTS RECEIVED : SELF CERTIFIED TRUE COPIES NOTARY 5. RISK CATEGORY : HIGH MEDIUM LOW

6 IN PERSON IDENTITY AND SIGNATURE VERIFIED YES NO

7. AUTHORISED OFFICIAL HAS VERIFIED THE ACTIVITY OF PROPRIETARY CONCERN AT THE ADDRESS MENTIONED IN ACCOUNT OPENING FORM: YES NO

OFFICIAL NAME : _____ PF NO.: _____ DESIGNATION: _____

DATE: SS NO.: _____

SIGNATURE

OPEN CIF QUEUE NO. INITIALS
DATE: CIF: CIF NUMBER: (AUTHORISED SIGNATORY)

OPEN THE ACCOUNT

BRANCH MANAGER / AUTHORISED OFFICIAL

ACCOUNT OPENED ON:

ACCOUNT NUMBER:

SIGNATURE

REMARKS (IF ANY) : _____

ASSISTANT (SIGNATURE)

NAME : _____

S. S. No. / P.F. No. _____

EMP. / OFF. DESIGNATION _____

EMP. / OFF. BRANCH _____

OFFICER (SIGNATURE)

NAME : _____

S. S. No. / P.F. No. _____

EMP. / OFF. DESIGNATION _____

EMP. / OFF. BRANCH _____

PERSONAL DETAILS OF PROPRIETOR

ANNEXURE - A

APPLICATION TYPE* NEW UPDATE FOR OFFICE USE ONLY

APPLICANT CIF NO.:

Account No.:

CKYC NUMBER:

BRANCH TO AFFIX RUBBER STAMP OF NAME AND CODE NO.

PHOTOGRAPH OF THE PROPRIETOR

1. FIRM NAME

NAME OF FIRM

2. PERSONAL DETAILS* (Please refer Instruction G II)

	P R E F I X	F I R S T N A M E	M I D D L E N A M E	L A S T N A M E
NAME (SAME AS ID PROOF)*:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MAIDEN NAME (IF ANY):	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FATHER NAME*:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SPOUSE NAME :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MOTHER NAME*:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
UID / AADHAAR NO.:	<input type="text"/>	OR	AADHAAR ENROLMENT NO.:	<input type="text"/>
DATE OF BIRTH*:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GENDER:	<input type="checkbox"/> M - MALE	<input type="checkbox"/> F - FEMALE	<input type="checkbox"/> T- TRANSGENDER	
MARITAL STATUS*:	<input type="checkbox"/> MARRIED	<input type="checkbox"/> UNMARRIED	<input type="checkbox"/> OTHERS	NATIONALITY: <input type="checkbox"/> IN-INDIAN <input type="checkbox"/> OTHERS
RESIDENTIAL STATUS*:	<input type="checkbox"/> RESIDENT INDIVIDUAL	<input type="checkbox"/> NON RESIDENT INDIAN	<input type="checkbox"/> FOREIGN NATIONAL	<input type="checkbox"/> PERSON OF INDIAN ORIGIN
CITIZENSHIP*:	<input type="checkbox"/> INDIAN	<input type="checkbox"/> OTHERS		
OCCUPATION TYPE*:	<input type="checkbox"/> S - SERVICE	<input type="checkbox"/> PUBLIC SECTOR	<input type="checkbox"/> PRIVATE SECTOR	<input type="checkbox"/> GOVERNMENT SECTOR
	<input type="checkbox"/> O - OTHERS	<input type="checkbox"/> PROFESSIONAL	<input type="checkbox"/> SELF EMPLOYED	<input type="checkbox"/> RETIRED <input type="checkbox"/> HOUSE WIFE <input type="checkbox"/> STUDENT
	<input type="checkbox"/> B - BUSINESS	<input type="checkbox"/> NOT CATEGORIZED		

ANNUAL INCOME _____

SOURCES OF FUND : SALARY BUSINESS INCOME AGRICULTURE INVESTMENT INCOME PENSION OTHER

POLITICALLY EXPOSED PERSON : YES NO

Politically exposed person are individuals who are or have been entrusted with prominent public function in a foreign country, eg, Heads of States or of Governments, senior government / judicial / military officers, senior executives of state-owned corporations, important political party officials, etc.

COUNTRY CODE OF TAX RESIDENCE*: (CODE FOR INDIA IS "IN") (ISO 3166)

COUNTRY OF TAX RESIDENCE IN INDIA ONLY AND NOT IN ANY OTHER COUNTRY OR TERRITORY OUTSIDE INDIA* YES NO (IF NO, PLEASE FILL THE DETAILS IN COLOUMN 6 & 7 IN PAGE 2)

PAN / TAX IDENTIFICATION NUMBER OR EQUIVALENT*: (IF JURISDICTION OF RESIDENCE FOR 'TAX PURPOSE' IS INDIA ONLY, THE PAN IN THIS FIELD)

PLACE / CITY OF BIRTH* : COUNTRY CODE OF BIRTH* : (ISO 3166)

3. PROOF OF ADDRESS* (Copies of the document, as applicable, need to be submitted) (Please refer General Instruction 'E')

COPY OF ANY ONE OF THE FOLLOWING OVD WITH CURRENT ADDRESS NEEDS TO BE SUBMITTED

- A- PASSPORT B- VOTER ID CARD C- DRIVING LICENCE D- NREGA JOB CARD
- E- LETTER ISSUED BY NATIONAL POPULATION REGISTER CONTAINING F- AADHAAR CARD

OR

IDENTITY NUMBER :

Issued Date :

Date of Expiry :

Issued at :

Issued by :

PROOF OF ADDRESS IN CASE OVD IN POINT NO 3 ALSO DOES NOT CONTAIN UPDATED ADDRESS.

COPY OF ANY ONE DEEMED OVD NEEDS TO BE SUBMITTED

PROOF OF ADDRESS* : UTILITY BILLS (Not more than two months old) PROPERTY TAX RECEIPT PENSION PAYMENT ORDER (PPO)

LETTER OF ALLOTMENT OF ACCOMODATION FROM EMPLOYER ISSUED BY STATE/CENTRAL/GOVT/STATUTORY OR REGULATORY BODIES/PUBLIC SECTOR UNDERTAKINGS/SCHEDULED

COMMERCIAL BANKS/FINANCIAL INSTITUTIONS/LISTED COMPANIES

4. ADDRESS DETAILS:

LINE 1*:

LINE 2:

LINE 3: CITY / TOWN / VILLAGE*:

DISTRICT*: PIN / POST CODE*:

STATE / UT NAME CODE*: COUNTRY CODE*:
(ISO 3166)

5. CONTACT DETAILS

MOBILE :

EMAIL ID 1:

EMAIL ID 2:

TELE (OFF) : TELE (RES.):

6. MULTIPLE TAX RESIDENCY: Details of Country of Tax Residence (In addition to India) in US and/or in any other Country or Territory Outside India as Under:

COUNTRY OF TAX RESIDENCE#	TAX IDENTIFICATION NUMBER OR EQUIVALENT, IF ISSUED BY JURISDICTION	IDENTIFICATION TYPE (TIN OR OTHER, PLEASE SPECIFY)

In case, country of tax residence is India, PAN is treated as TIN.
 1. A citizen of US including individual born in US but resident in another country (who has not given up US citizenship).
 2. A person residing in US including US green card holder.
 3. Certain persons who spend more than 180 days in US each year.

7. ADDRESS IN OUTSIDE JURISDICTION/COUNTRY - WHERE THE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES

ADDRESS TYPE*: RESIDENTIAL / BUSINESS RESIDENTIAL BUSINESS REGISTERED OFFICE UNSPECIFIED

LINE 1*:

LINE 2:

LINE 3: CITY / TOWN / VILLAGE*:

DISTRICT*: PIN / POST CODE*:

STATE / UT NAME CODE*: COUNTRY CODE*:
(ISO 3166)

8. FORM - 60 (In Case PAN is not Available)

NAME:

(SAME AS ID PROOF)

IF APPLIED FOR PAN AND IT IS NOT YET GENERATED, ENTER DATE OF APPLICATION & THE ACKNOWLEDGEMENT NUMBER

IF PAN IS NOT APPLIED , FILL ESTIMATED TOTAL INCOME (INCLUDING INCOME OF SPOUSE, MINOR CHILD, ETC) AS PER SECTION 64 OF INCOME TAX ACT 1961 FOR FINANCIAL YEAR IN WHICH THE ABOVE TRANSACTION IS HELD

AGRICULTURE INCOME (RS) OTHER THAN AGRICULTURAL INCOME

VERIFICATION

I..... do hereby declare that what is stated above is true to the best of my knowledge and belief. I further declare I do not have a permanent account number and my/our estimated total income (including income of spouse, minor child, etc.) as per section 64 of Income Tax Act 1961 computed in accordance with the provisions of Income Tax Act 1961 for the financial year in which the above transaction is held will be less than maximum amount not chargeable to tax.

Verified today, the day of 20.....

Place:

Signature of the Declarant

9. APPLICANT DECLARATION

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- My personal KYC details may be shared with Central KYC Registry.
- I hereby consent to receive information from Central KYC Registry through SMS/ email on the above registered number /email address.
- I hereby certify that I have declared my status as per the rules applicable under section 285 BA of the Income Tax Act, 1961 as notified by Central Board of Direct Taxes cbdt vide notification No. S.O. 2155(E) dated 7 August 2015 and RBI circular Ref No. DBR.AML.BC.No.36/14.01.001/2015-16 dated 28 August 2015 in the matter including any subsequent modification/ amendment thereof.
- I understand, acknowledge and authorise that as per the provisions of Income Tax Act, Rules made thereunder and the guidelines issued by the Government/RBI in the matter, depending upon the residential status and/or other criteria stipulated therein, the Bank may have to report the details in respect of my account as per the prescribed format to the Central Board of Direct Taxes (CBDT) or other Government Agencies to comply with the obligations as per the Inter-Governmental Agreements (IGA) in respect of Foreign Accounts Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) and/or any other similar arrangements.
- I certify & declare that the information provided by me for opening account and availing other services herein or through website/ electronically as applicable to me and signed/ authenticated by me as well as in the documentary evidence provided by me for opening account and availing other services are, to the best of my knowledge and belief true, correct and complete and that I have not withheld any material information that may affect the assessment/ categorisation of my account as a U.S. Reportable Account or Other Reportable Account or otherwise. In case any of the information or details provided by me is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.
- I undertake the responsibility to declare and disclose immediately and in no case beyond 30 days from the date of change, any changes that may take place in the information provided herein/ or otherwise, as well as in the documentary evidence provided by me or if any certification becomes incorrect or undergoes a change. I further undertake to provide fresh and valid self-certification along with documentary evidence as and when so required, nevertheless all declaration and undertaking given herein will also be applicable to all such modified /amended documents /information provided by me unless revised self certification as above is provided to the bank.
- I also agree that my failure to disclose any material fact/ information known to me now or in future or my failure to remedy any deficiency in documents /information/ other details within the stipulated period, may invalidate me from transacting in the account and the bank would be within its right to put restrictions in the operations of my account or to close it or to report to any regulator and/ or any authority designated by the Government of India (GoI)/ RBI for the said purpose or take any other action and may be deemed appropriate by the bank under the guidelines issued by CBDT/RBI/ GoI from time to time.
- I also agree to furnish and intimate to the bank any other particulars that are called upon me to provide on account of any change in law either in India or abroad in relating to the operation or maintenance of the account.
- I shall indemnify the bank from any loss / damage that may be caused to the bank on account of any defect/ mistake in the details provided herein or on account of providing incorrect or incomplete information by me.
- In case, deemed OVDs are submitted for current address at the time of Account opening, I undertake to submit Aadhaar or any of the OVD having Current Address within 3 months from the date of account opening, failing to which I understand that my account may cease to be operational as per GOI guidelines at the material time.
- In respect of account opened on the basis of Aadhar, I hereby declare that I have submitted the Aadhar card issued by UIDAI voluntarily for identification and / or address proof towards the compliance of KYC norms under the PMLA 2002 and I hereby consent that the bank may verify the same with UIDAI and authorise the the UIDAI expressly to release the identity and address through biometric authentication to the bank.
- I hereby confirm that I have read and understood all the SBI Current Account rules as applicable to Current Account as well as the General instructions for filling Current Account opening form as available at the Banks website : bank.sbi>>Business>>Current Account
Physical copy of General instructions is also available at the Branch.

DATE:

Signature of the Applicant

PLACE: _____

ATTESTATION / FOR OFFICE USE ONLY

DOCUMENTS RECEIVED: SELF-CERTIFIED TRUE COPIES NOTARY

RISK CATEGORY: HIGH MEDIUM LOW

IN PERSON VERIFICATION CARRIED OUT BY IDENTITY VERIFICATION: DONE

DATE:

EMP/OFFICIAL SIGNATURE _____ EMP/OFF. NAME: _____

S.S No. / P.F No.: _____ EMP/OFF. DESIGNATION: _____ EMP/OFF. BRANCH: _____

**Declaration cum Undertaking for Opening/Continuing Current Account
(Annexure to Current Account Opening Form)**

CURRENT ACCOUNT OPENING/CONTINUING ELIGIBILITY

1.	Do you have any CC/OD (Cash Credit/Overdraft) Facility (ies) with any Bank including SBI?	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, proceed to Sl. No.2 If No, please proceed to Sl. No. 3.
2.	<p>In case you are exempted by RBI to open a Current Account even after having a CC/OD Facility, please tick exemption criteria : (Refer para 1 of RBI Circular RBI/2020-21/79 DOR.No.BP.BC.30/ 21.04.048/ 2020-21 dated 14.12.2020)</p> <p>If exempted, then you can open / continue* current account</p> <p>If not exempted, opening/continuance* of current account is not permissible as per RBI instructions.</p>	<input type="checkbox"/> i. Accounts for real estate projects mandated under Section 4 (2) I (D) of the Real Estate (Regulation and Development) Act, 2016 for the purpose of maintaining 70% of advance payments collected from the home buyers. <input type="checkbox"/> ii. Nodal or escrow accounts of payment aggregators/prepaid payment instrument issuers for specific activities as permitted by Department of Payments and Settlement Systems (DPSS), Reserve Bank of India under Payment and Settlement Systems Act, 2007. <input type="checkbox"/> iii. Accounts for settlement of dues related to debit card/ATM card/credit card issuers/acquirers. <input type="checkbox"/> iv. Accounts permitted under FEMA, 1999. <input type="checkbox"/> v. Accounts for the purpose of IPO / NFO / FPO/ share buyback /dividend payment / issuance of commercial papers/allotment of debentures/gratuity, etc. which are mandated by respective statutes or regulators and are meant for specific/limited transactions only. <input type="checkbox"/> vi. Accounts for payment of taxes, duties, statutory dues, etc. opened with banks authorized to collect the same, for borrowers of such banks which are not authorized to collect such taxes, duties, statutory dues, etc. <input type="checkbox"/> vii. Accounts of White Label ATM Operators and their agents for sourcing of currency <input type="checkbox"/> viii. Current accounts which are stipulated under various statutes and instructions of other regulators/ regulatory departments (not covered under i to vii above). Give details of such regulations and attach regulation copy(ies) <hr/> <input type="checkbox"/> ix. To open a current account for project specific facilities like Term Loan/ Lease Rental Discounting (LRD) term loan for receiving/monitoring cash flows of a specific project, I / We have not availed any CC/OD facility for that specific project. Give details and attach relevant proofs (FAQ 11). I / We undertake to ensure that cash flows will be coming in this account are from that specific project only. <input type="checkbox"/> x. to open current accounts for borrowers having credit facilities only from NBFCs/FIs/ /co-operative banks/non-bank institutions. Give details and attach relevant proofs (FAQ 12)
3.	Have you availed any Credit Facility (ies) (Other than CC/OD) with any Bank including SBI ?	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, then proceed to Sl. No. 4. If No, you can open/continue* current account.

4.	<p>If the answer to the question no. 3 is Yes, Please Select the range of Amount availed under Credit Facility (ies) (Other than CC/OD) For instance.....:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 33%;">Bank</th> <th style="width: 33%;">Fund Based like TL/DL</th> <th style="width: 33%;">Non Fund based like LC/BG</th> </tr> </thead> <tbody> <tr> <td>SBI</td> <td></td> <td></td> </tr> <tr> <td>Bank 1</td> <td></td> <td></td> </tr> <tr> <td>Bank 2</td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td></td> <td></td> </tr> </tbody> </table> <p>Add additional rows / separate sheet (duly signed), if required</p> <p>The instructions are applicable to Scheduled Commercial Banks and Payments Banks. Accordingly, the aggregate exposure for the purpose shall include exposures of these banks only.</p> <p>All fund based and non-fund-based credit facilities sanctioned by the banks and carried in their Indian books shall be included for the purpose of aggregate exposure.</p>	Bank	Fund Based like TL/DL	Non Fund based like LC/BG	SBI			Bank 1			Bank 2			Total			<p>A. <input type="checkbox"/></p> <p>Credit Facility (ies) with any Bank including SBI Less than Rs.5 Crores</p>	<p>You can open/continue* current account, subject to the following undertaking:</p> <p><input type="checkbox"/> I / We undertake to inform you immediately if and when the sum of my/ our availed Credit Facility(ies) becomes Rs. 5 Crore or more.</p> <p><input type="checkbox"/> I / We understand that if and when the sum of my/ our availed Credit Facility(ies) becomes Rs. 5 Crore or more, my/our Current account shall be governed by the provisions of Para 4 (B) or 4 (C) of this Declaration cum undertaking, as the case may be.</p>
Bank	Fund Based like TL/DL	Non Fund based like LC/BG																
SBI																		
Bank 1																		
Bank 2																		
Total																		
		<p>B. <input type="checkbox"/></p> <p>Credit Facility (ies) with any Bank including SBI Rs.5 Crores or more but Less than Rs.50 Crore</p>	<p>Whether availed any of these Credit Facility (ies) from SBI? Yes <input type="checkbox"/> or No <input type="checkbox"/></p> <p>If Yes, current account can be opened/continued* with SBI.</p> <p>If No, only a collection account can be opened/ now continued* with SBI. you can only open/now continue* a collection account with SBI. In such a collection account:</p> <ul style="list-style-type: none"> Only Credits will be allowed in these collection accounts and debits in these accounts shall be limited to the purpose of remitting the proceeds to the Current account with the Lender Bank of the Credit Facility (ies), at agreed intervals \$\$\$. Thus, while there will be no prohibition on amount or number of credits, debits in this account shall be limited to the purpose of remitting the proceeds to the said Current account. Balances cannot be used as margin for availing any non-fund-based credit facilities. 															
		<p>C. <input type="checkbox"/></p> <p>Credit Facility (ies) with any Bank including SBI Rs.50 Crore or more</p>	<p>Whether availed any of these Credit Facility (ies) from SBI? Yes <input type="checkbox"/> or No <input type="checkbox"/></p> <p>a. If No, current account cannot be opened/continued* with SBI. b. If Yes, SBI is either your Escrow managing Bank or the sole lender, for the Credit Facility (ies)? <input type="checkbox"/> Yes or <input type="checkbox"/> No</p> <p>If answer to question (b) is (Yes), then Current Account (as an Escrow Account) can be opened/ continued* with SBI. If the answer to question (b) is (No), you can only open/now continue with* a collection account with SBI. In such a collection account:</p> <ul style="list-style-type: none"> Only Credits will be allowed and debits shall be limited to the purpose of remitting the proceeds to the escrow account with the Escrow Managing Bank of the Credit Facility (ies), at agreed intervals \$\$\$. Thus, while there will be no prohibition on amount or number of credits, debits in this account shall be limited to the purpose of remitting the proceeds to the said escrow account. Balances cannot be used as margin for availing any non-fund based credit facilities. 															

(Credit facility is sanctioned credit facility / limits)

I undertake to inform SBI in case of any changes in the above declaration cum undertaking regarding my CC/OD/ other credit facilities. I also understand that it will be my sole responsibility to inform SBI regarding any changes to the above facts/ aspects stated by me, by medium of the above declaration cum undertaking. I also agree to provide fresh declaration cum undertaking in case of any changes to the above facts /aspects stated by me in the above declaration cum undertaking and /or in case a fresh declaration cum undertaking is warranted in view of applicable law/ regulation. I also agree to close the Current Account as and when demanded by SBI and Bank is empowered to close /discontinue the account if I fail to respond in reasonable time.

Signature of the Customer

** Please strike off the inapplicable option.*

\$\$ Customer to advise the frequency (daily / weekly / monthly etc.,) through a letter signed by authorised signatory(ies)

TAX RESIDENT OF US : YES NO (IF YES ; PLEASE PROVIDE US TIN) US TIN

IF TAX RESIDENT OF US, WHETHER THE PERSON IS

A US PERSON : YES NO (A TAX RESIDENT OF US IS US PERSON SEE INSTRUCTION "J")

A SPECIFIED US PERSON (SEE INSTRUCTION "K") YES NO (IF SPECIFIED US PERSON IS YES, THEN THE ENTITY IS US REPORTABLE)

TAX RESIDENT OUTSIDE INDIA OTHER THAN US : YES NO

IF YES, PLEASE PROVIDE COUNTRY CODE & TIN / FUNCTIONAL EQUIVALENT :

IF TAX RESIDENT OUTSIDE INDIA & OTHER THAN US IS "YES", WHETHER ENTITY FALLS IN ANY OF THE FOLLOWING CATEGORY (TICK FROM FOLLOWING CATEGORY) AS APPLICABLE - IF NONE OF THE FOLLOWING CATEGORY IS MARKED "YES" THEN THE ACCOUNT IS AN "OTHER REPORTABLE ACCOUNT"

I. ANY CORPORATION THE STOCK OF WHICH IS REGULARLY TRADED ON ONE OR MORE ESTABLISHED SECURITIES MARKET YES NO

II. ANY CORPORATION THAT IS A RELATED ENTITY OF A CORPORATION DESCRIBED IN (I) ABOVE YES NO

III. A GOVERNMENTAL ENTITY YES NO

IV. AN INTERNATIONAL ORGANIZATION YES NO

V. A CENTRAL BANK YES NO

VI. A FINANCIAL INSTITUTION YES NO

NO RESIDENCE FOR TAX PURPOSE YES NO

IF "YES" PLEASE PROVIDE COUNTRY CODE WHERE THE PRINCIPAL OFFICE OF THE ENTITY LOCATED

COUNTRY CODE

MULTIPLE TAX RESIDENCY * YES NO (IF "YES" PLEASE ALL THE TABLE BELOW)

IF ANY OF THE ITEM (I) TO (VI) IS TICKED "YES" THE ACCOUNT IS NOT AN "OTHER REPORTABLE ACCOUNT"

IF ENTITY IS NEITHER TAX RESIDENT OF INDIA OR US NOR A TAX RESIDENT OUTSIDE INDIA OTHER THAN US, THEN THE FIELD NO RESIDENCE FOR TAX PURPOSE WILL BE "YES"

1. IF AN ENTITY IS A SPECIFIED US PERSON AND ALSO HAS A TAX RESIDENCY OUTSIDE INDIA OTHER THAN US, THE ENTITY HAS MULTIPLE TAX RESIDENCY.
2. IF IS NOT A SPECIFIED US PERSON BUT HAS TAX RESIDENCIES OUTSIDE INDIA OTHER THAN US IN MORE THAN ONE COUNTRY THE ENTITY, HAS MULTIPLE TAX RESIDENCY.

COUNTRY OF TAX RESIDENCE OUTSIDE INDIA OTHER THAN US	TAX IDENTIFICATION NUMBER OR EQUIVALENT, IF ISSUED BY JURISDICTION	IDENTIFICATION TYPE (TIN, COMPANY IDENTIFICATION NUMBER (CIN), EIN OR OTHER, PLEASE SPECIFY)

ADDRESS

LINE 1: <input type="text"/>	CITY: <input type="text"/>
LINE 2: <input type="text"/>	STATE: <input type="text"/>
LINE 3: <input type="text"/>	PIN: <input type="text"/>

COUNTRY OF TAX RESIDENCE OUTSIDE INDIA OTHER THAN US	TAX IDENTIFICATION NUMBER OR EQUIVALENT, IF ISSUED BY JURISDICTION	IDENTIFICATION TYPE (TIN, COMPANY IDENTIFICATION NUMBER (CIN), EIN OR OTHER, PLEASE SPECIFY)

ADDRESS

LINE 1: <input type="text"/>	CITY: <input type="text"/>
LINE 2: <input type="text"/>	STATE: <input type="text"/>
LINE 3: <input type="text"/>	PIN: <input type="text"/>

Signature of Declarant