



सुवर्णयुग सहकारी बँक मर्यादित

युग समृद्धीचे... वरदान बाप्पाचे!

मुख्यालय : ११०२/१११०/११११, बुधवार पेठ, पुणे ४११ ००२.

फोन : २४४८९९७३, २४४८६०३९ फॅक्स : २४४७३११८

Email : headoffice@suvarnayugbank.com | Web : www.suvarnayugbank.com Branch: _____

Date

Customer ID Number

RE - KYC FORM (NON-INDIVIDUAL)

Name of Firm / Company / Trust / Society / Institution _____

Registered / Factory _____

Address _____

Nearest Landmark _____ City _____

State _____ Country _____ Pincode _____

Office /Communication _____

Address _____

Nearest Landmark _____ City _____

State _____ Country _____ Pincode _____

Contact Details STD Code Tel. (Factory) Tel.(Office) Mobile

Email : _____ Member / Nominal Member No.

PAN No.: TAN No.: CIN NO.:

Place of Incorp/Formation _____ Business Activity _____ Date of Establishment

Constitution

- Sole Proprietorship Institute Non-Profit Organization Partnership Firm
- Association of Persons Trust Private Limited Company HUF
- Co-operative Society Public Limited Company Co-operative Credit Society Club
- Non-Scheduled Urban Co-operative Bank Company Registered u/s 8 of Companies Act 2013.
- LLP Other (Please Specify) _____

Registration Numbers & Date

Registration Numbers & Date	Date
Registration No. (Shop Act, Company Act etc) _____	<input type="text"/>
GST No. _____	<input type="text"/>
Udyog Aadhar Number _____	<input type="text"/>
SSI No. _____	<input type="text"/>
TAN No. _____	<input type="text"/>

Name of Proprietor / Partners / Director / Trustees / Karta	Related Person Type	Customer ID
1) _____	_____	<input type="text"/>
2) _____	_____	<input type="text"/>
3) _____	_____	<input type="text"/>
4) _____	_____	<input type="text"/>

Please fill up Individual Customer Profile for Proprietor, Partners, Trustees, Members, Director Authorised Signatories

(The Information will be kept strictly confidential)

KYC DOCUMENT SUBMITTED (SELF CERTIFIED) (Tick any one of the following)

Pan Card / Aadhar Card / Electricity Bill / Shop Act / Udyog Aadhar / Udaym / ITR Return / GST Reg. Certificate / FDA Licence / Visit Report / Other

CUSTOMER'S DECLARATION : I hereby declare that the details submitted by me for my identify and address are true to the best of my knowledge and belief. I authorised the bank to update my KYC details / address as per information provided by me. I undertake to inform you of any changes therein, immediately. In case the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Applicant's Signature / अर्जदाराची सही

Officer's/ Branch Manager / अधिकारी / शाखाधिकारी स्वाक्षरी