



**Asset Ownership**

Consumer Durable Ownership	<input type="checkbox"/> Computer	<input type="checkbox"/> Home Theatre System
	<input type="checkbox"/> Digital Camera/handycam	<input type="checkbox"/> Air Conditioner
	<input type="checkbox"/> LCD/LED Television	<input type="checkbox"/> Washing Machine
Vehicle Ownership	<input type="checkbox"/> Two Wheeler	<input type="checkbox"/> Four Wheeler
Make & Model of Car	_____	
The house presently you live in	<input type="checkbox"/> Rented	<input type="checkbox"/> Ownership
	<input type="checkbox"/> Office provided	<input type="checkbox"/> Purchased against Loan

**Loan Facility**

Type of Loans	Loan Facilities whether availed	No.of years since you last availed the loan	In the next & Months do you intend availing any of these loans ?
1. Car	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Housing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Customer Durables /PC	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Business	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Loan against Shares	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Education Loan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Travel Abroad	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Loan against Insurance Policy	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >2	<input type="checkbox"/> Yes <input type="checkbox"/> No

How you come to know about our Bank ? \_\_\_\_\_

I/We allow the Bank to approach me/us for its various Banking / non Banking products.

I affirm that, information furnished here in above is true and authentic to the best of my knowledge.

Date 

D	D	M	M	Y	Y	Y	Y
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Signature \_\_\_\_\_

**For Office Use Only**

KYC Compliance(Without this mandatory information Customer ID should not be opened)

<b>Identity Proof</b>	<input type="checkbox"/> Pan Card	<input type="checkbox"/> Passport	<input type="checkbox"/> Election Card
	<input type="checkbox"/> Driving License	<input type="checkbox"/> Defence ID Card	<input type="checkbox"/> Card Issued by the Govt.
	<input type="checkbox"/> Senior Citizen Card	<input type="checkbox"/> Other (Please Specify) _____	
<b>Residential Proof</b>	<input type="checkbox"/> Electricity Bill	<input type="checkbox"/> Telephone Bill	<input type="checkbox"/> Ration Card
	<input type="checkbox"/> Passport (Valid)	<input type="checkbox"/> Employer Letter	<input type="checkbox"/> Other (Please Specify) _____
	<input type="checkbox"/> Govt. Document	<input type="checkbox"/> Income/Wealth Assessment order	
	<b>Photo Received</b>		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

KYC Compliance checked and allowed to open an account.

Signature of Officer \_\_\_\_\_

Date: 

D	D	M	M	Y	Y	Y	Y
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Name of the Officer \_\_\_\_\_

Completed form forwarded to CPC by branch on \_\_\_\_\_

Completed form received from branch to CPC on \_\_\_\_\_

Account opened at CPC on \_\_\_\_\_

Thanks Letter forwarded on \_\_\_\_\_

ATM Card request received on \_\_\_\_\_ forwarded on \_\_\_\_\_

Pin mailer request received on \_\_\_\_\_ forwarded on \_\_\_\_\_