

Registered Office:

1st Floor, Kapol Bank Building, 19/21, Picket Cross, Road, Kalbadevi, Mumbai-400002. Toll Free: 1800 22 0603 • Email: kapol@kapolbank.com • website: www.kapolbank.com

CUSTOMER PROFILE				
Branch:	Account Type:			
Customer ID:	Date: DDMMYYYY			
Account No:				
Personal Information Sheet(to be filled in by Account holder/Joint A/c holder/Guardian)				
(This information will be kept strictly confidential)				
Name	ster 🗆 M/s. Gender 🗆 Male 🗆 Female			
	San Name			
Surname First Name Middle Name				
Date of Birth: DDMMYYYYY  Place of Birth: DDMMYYYYYY	Pan No:			
[Attach documentary evidence for Minor/Senior Citizen(above 60 Years)] Form 60:  Yes  No				
Residential / Office Address:				
nesidential / Office Address.				
City Pin	State			
Contact No.	E-mail ID:			
Passport No. Issued Date at DDMMYYYY				
Date of Expiry D D M M Y Y Y Y Member/Nominal No:				
Personal Information				
1 crashial information				
Religion: Caste:	Country:			
Marital Status ☐ Single ☐ Married	No. of Children			
Education	SC   Under Graduate   Graduate   Post Graduate			
□ Professional				
Occupation	ss   Retired   Student   House Wife			
☐ Self Employed/Professional	☐ Other			
If Salaried, Employed with	If Self Employed Professional  □ CA □ Engineer □ Doctor			
☐ Public Ltd. Co. ☐ Pvt. Ltd. Co. ☐ Govt. Sector ☐ Multinational.	☐ CA ☐ Engineer ☐ Doctor ☐ Trader ☐ Lawyer ☐ Consultant			
Other	☐ Architech ☐ Other			
Name of the Employer				
	□ Proprietorship □ Trust □ Wholsellar			
Designation    Retailers   Other   Other				
<ul> <li>□ Non-Management</li> <li>□ Middle Management</li> <li>□ Top Management</li> <li>□ Upto Rs. 5000</li> <li>□ 5001-10000</li> <li>□ 1000</li> </ul>				
U middle management U Top management	☐ Upto Rs. 5000 ☐ 5001-10000 ☐ 10001-20000 ☐ 20001-30000 ☐ 30001-50000 ☐ Above Rs. 50000			

	Asset Ow	nership		
Consumer Durable Ownership	☐ Computer☐ Digital Came☐ LCD/LED Tel	ra/handycam   Air Conditi		
Vehicle Ownership	☐ Two Wheeler	_ □ Four Whee	eler	
Make & Model of Car				
wate a woder of oar				
The house presently you live in	<ul><li>☐ Rented</li><li>☐ Office provide</li></ul>	☐ Ownership	) I against Loan	
Loan Facility				
No.of years since you In the next & Months				
Type of Loans	Loan Facilities whether availed	last availed the loan	do you intend availing any of these loans ?	
1. Car       Yes       No       1       2       >2       Yes       No         2. Housing       Yes       No       1       2       >2       Yes       No         3. Customer Durables /PC       Yes       No       1       2       >2       Yes       No         4. Business       Yes       No       1       2       >2       Yes       No         5. Loan against Shares       Yes       No       1       2       >2       Yes       No         6. Education Loan       Yes       No       1       2       >2       Yes       No         7. Travel Abroad       Yes       No       1       2       >2       Yes       No         8. Loan against Insurance Policy       Yes       No       1       2       >2       Yes       No         How you come to know about our Bank?         I/We allow the Bank to approch 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.				
KYC Compliance(Without this manda	For Office tory information Customer ID sho	•		
·	_	· <u> </u>	Cond	
Driv	Card Passport Election Card  g License Defence ID Card Card Issued by the Govt.  r Citizen Card Other (Please Specify)			
Pas	ctricity Bill			
Photo Received Yes	S No			
KYC Compliance checked and allowed to open an account.				
Signature of Officer Date: D D M M Y Y Y Y				
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 Latter forwarded on				
ATM Card request received on forwarded on				
Pin mailer request received on	forwarded on			