

## NOBLE CO-OPERATIVE BANK LTD. NOIDA

## **Account Opening Form**

(For Companies, Partnership Firm, Trusts, Club, Association & Societies)

		Account No.				
			PIN			
The Manager,			Date :	***************************************		
I/We request you to open a Saving Bank/Current Account/Fixed Deposit Account of our Concern under the name and style of M/s  The Account will be operated by the following persons:-						
Name of Authorized per		Name of Father/Husband	Sex	Mobile	Phone	
Surname First Na	ame Middle Name	as applicable	JUN .	No.	No.	
Address of the Regd. Off						
Phone No.						
Address of the Head Office/Admin. Office/Factory :						
Mobile/Phone No.:	F	FaxE	E-mail			
Main Products of the Concern.						
Mode of Operation						
Single/Self Either or Surviver Jointly Other (specify)						
Standing Instructions						
Details of other Bank Accounts (if any): Account No.:  Name and Address of Bank  Nature of facility already enjoying.						
Introduction : I						
the applicant(s) for the lastyear and confirm the applicants identity, photo, address and business as given in this Account Opening Form.						

Signature of Introducer

The Bank, based on this application, from the authorized signtories mentioned under "Mode of Operation" in its absolute discretion and subject to such terms and conditions, as the Bank may stipulate, can make pay ment/premature payment of the proceeds of the deposit at any time.

I/we request and authorize you to honour all cheques or other order drawn by me/us, or bills of exchange or notes drawn by me/us. I/we request you to debit such cheques or other orders, bills of exchange and notes as also amounts of any dishonoured bills, notes and cheques to this account, whether the account be for the time being in credit or overdrawn. In case I/we draw cheques/cash in access of our credit balance in the account with the Bank, as the necessity arises, I/we undertake to repay the amounts overdrawn with interest, immediately. The Bank is hereby authorized to charge interest on the amount overdrawn as per the rule of the Bank in force with or without any advice to me/us.

I/we undertake to be jointly and severally liable to you for any money owing to you in my any account with you, including your commission, interest, and other charges for any debit balances arising in the account for whatsover reason. Hence I/we request you to accept the endorsement jointly and/or severally of us on cheques, orders, bills, notes payable to us. In the event of death, inslovency or withdrawl of any of us, the survivor/survivors of us, shall have full control of any money then and thereafter standing to our credit in our account with you.

I/we, confirm that the rules and regulations of the Bank and the Reserve Bank of India in force for this scheme have been read by/to me/us and I/we agree to abide and be bound by the same. I/we also agree to abide by the rules and regulations, which may modified from time to time. I/we certify that the information furnished above is correct.

Signature of all account holders in above order

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Photograph of first signatory	Photograph of second signatory	Photograph of third signatory
		Service of the skell

## For Office Use Only

Introducer's signature verified by
Letter of thanks sent to the introducer on
Signature scanned byAccount opened in system by
All the above is authorized and checked by: