



### CUSTOMER PROFILE-INDIVIDUAL

(This information will be kept strictly confidential) (Please fill information in English and in Block Letters)

Branch : \_\_\_\_\_ Date : \_\_\_\_\_  
शाखा दिनांक

Cust. No : \_\_\_\_\_  
ग्राहक क्र.

Prefix  
Recent  
Passport Size  
Color Photo  
Of  
Applicant

Application Type : ☐ New ☐ Update  
अर्जाचा प्रकार नविन चालू

Signature  
सही.

Last Name (शेवटचे नाव)

First Name (पहिले नाव)

Middle Name (मधले नाव)

a) Name (Same as ID proof) \_\_\_\_\_  
नाव

b) Father/ Spouse Name \_\_\_\_\_  
वडिलांचे / पतीचे नाव

c) Mother Name \_\_\_\_\_  
आईचे नाव

d) Date of Birth : \_\_\_\_\_  
जन्म तारीख

e) Gender ☐ Male ☐ Female ☐ Transgender  
लिंग पुरुष स्त्री इतर

f) Place of Birth : \_\_\_\_\_  
जन्म ठिकाण

g) PAN No : \_\_\_\_\_  
पॅन नं.

h) Form 60 ☐  
फॉर्म ६०

i) Blood Group \_\_\_\_\_  
रक्त गट

j) Marital Status : ☐ Married ☐ Unmarried  
वैवाहिक स्थिती विवाहित अविवाहित

k) Religion : ☐ Hindu ☐ Buddhist ☐ Sikh ☐ Christian ☐ Muslim ☐ Other \_\_\_\_\_  
धर्म हिंदू बौद्ध सिख ख्रिश्चन मुस्लिम इतर

l) Cast : ☐ Open ☐ OBC ☐ SC/ST ☐ Other \_\_\_\_\_  
जात ओपन ओबीसी एस.सी./एस.टी. इतर

m) Citizenship\* : ☐ Indian ☐ Others \_\_\_\_\_  
नागरिकत्व भारतीय इतर

n) Education : ☐ Non SSC ☐ SSC/HSC ☐ Undergraduate ☐ Graduate ☐ Post Graduate ☐ Professional  
शिक्षण

o) Occupation Type : ☐ Service ☐ Business ☐ Retired ☐ Housewife ☐ Student ☐ Other  
कामाचा प्रकार

If other Specify \_\_\_\_\_

p) If Salaried, Employed with : ☐ Pvt. Ltd. Co. ☐ Public Ltd. Co. ☐ Govt. Sector ☐ Multi-National ☐ Other  
नोकरदार असल्यास

If other Specify \_\_\_\_\_

Name of Employer : \_\_\_\_\_

q) If Self employed, ☐ CA ☐ Engineer ☐ Lawyer ☐ Consultant ☐ Software  
स्वयंरोजगार असल्यास

Profession : ☐ Architect ☐ Doctor ☐ Trader ☐ Other

If other Specify \_\_\_\_\_





श्रीधर दगडूरोड हलवाई वगळी दुपट प्रस्थापित  
**सुवर्णयुग बँक**  
 सुवर्णयुग सहकारी बँक मर्यादित, पुणे  
 युग समृद्धीचे... बदलत काळाचे!

☐ Address In The Jurisdiction Details Where Applicant is Resident outside INDIA For Tax Purposes :

☐ Same as Current/Permanent address details ☐ Same as Local/Correspondence Address Details

Address :

#### ☐ Contact Details :

(All Communications will be sent on provided Mobile number / Email Id)

[illegible]

Tel. No. Office :      Mobile No :

[illegible][illegible]

☐ **Banking Relations with other Banks :**

Name of the Bank : \_\_\_\_\_

Branch : \_\_\_\_\_ A/c No : \_\_\_\_\_  
खाते क्र. \_\_\_\_\_

[illegible]☐ Introduction Details : (Not Mandatory)

Introducer's Name : \_\_\_\_\_

Branch : \_\_\_\_\_ A/c No : \_\_\_\_\_  
खाते क्र. \_\_\_\_\_

I know the applicant/s for the last \_\_\_\_\_ Month/Year. I confirm the identity, Occupation & address of the Applicant/s.

मी अर्जदारास मागील \_\_\_\_\_ महिने / वर्षांपासून ओळखतो/ ते अर्जदाराची ओळख, व्यवसाय व पत्ता याची खात्री देतो.

Date : 

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Introducer's Signature

Attached Documentary evidence for Minor/ Senior Citizen (Above 60 Years)  
Consent for Greeting and Banks Schemes Services: Yes/No

Date : 

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Signature Of Customer





☐ **Related Person Details :**

☐ Addition of Related Person ☐ Deletion of Related Person

KYC No. of Related Person (if available) : \_\_\_\_\_

Related Person Type : ☐ Guardian Of Minor ☐ Assigness ☐ Authorised Representative ☐ \_\_\_\_\_

Prefix Last Name First Name Middle Name  
Name : \_\_\_\_\_

If Guardian, Relation of Guardian : \_\_\_\_\_

Address of Guardian : \_\_\_\_\_

☐ **Declaration by Guardian in Case of Minor Applicant :**

I here by declare that the date of birth  of minor who is my \_\_\_\_\_

is true and correct and I am his/her natural guardian/legal guardian appointed by the court order (copy enclosed). I shall represent the said minor in all future transactions of any description in the above until the said minor attains majority. I indemnify the bank against the claim of above minor for any with drawal/ transactions made by me in his/her accounts.

Date :

Guardian Signature

☐ **Proof Of Identity (POI) of Related Person :** \_\_\_\_\_

☐ **Remarks :**

☐ **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 above information is found to be false or untrue or misleading or misrepresenting. I am aware that I may be held liable for it.

☐ I hereby consent to receiving information from Central KYC Registry through SMS Email on the above registered number/email address.

Date :

Place: \_\_\_\_\_

Signature/Thumb Impression of Applicant

☐ **Attestation for Office Use Only:**

Address of the Applicant/s has/have been confirmed, photograph/s has/have been affixed and signed in my presence.

Applicant/s Introducer has/have signed in my presence

KYC Documents Received and Verified ☐ Certified Copies AML Rating - ☐ LOW ☐ MEDIUM ☐ HIGH

Date :

Emp. Code :

KYC Verification carried out by  
Sign of Authorised Official / Branch Manager

**KYC documents audited & found correct & Accounts opening Confirmed**

Emp Name: \_\_\_\_\_

Emp Designation: \_\_\_\_\_

Emp Code :

Date :

Sign of Head Office (Official-CPC)