



हेड ऑफिस: जनता बँक भवन, मेन रोड, इचलकरंजी-४१६ ११५,
जि. कोल्हापूर ☎ +९१ २३० २४२९३००
Website: www.ijsbank.com

Head Office: "Janata Bank" Bhavan, Main Road,
Ichalkaranji - 416 115. Dist. Kolhapur.
Tel: +91 230 2429300 | Fax No.: +91 230 2430434

CURRENT ACCOUNT OPENING FORM

Branch / शाखा : _____

Customer Id No. / ग्राहक क्र. : _____

Account No. / खाते क्र.: _____

Date / दिनांक: _____

I/we wish to open a Current Account as under (मी/आम्ही आपल्या बँकेत खालीलप्रमाणे चालू खाते सुरु करू इच्छितो)

(✓ अशी खूप करावी)
(Mark as ✓)

Account Type :
खात्याचा प्रकार :

Regular
सामान्य

Scheme
योजने अंतर्गत

Other
इतर

Title of Account / खात्याचे नाव

Name / नाव : _____

Name of Proprietor/Partners/Directors
मालक/भागीदार/संचालकांचे नाव/नावे

1 _____

4 _____

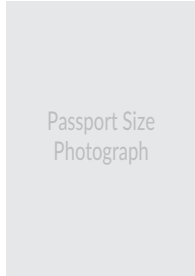
2 _____

5 _____

3 _____

6 _____

Signature of Applicant / अर्जदाराची सही



1st Applicant



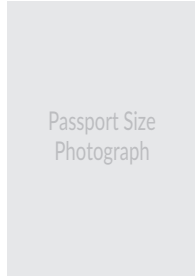
Signature(s)/Thumb Impressions(s) Sole/
First Holder



2nd Applicant



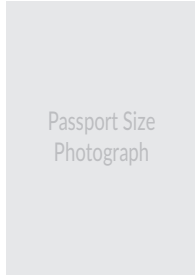
Signature(s)/Thumb Impressions(s) Sole/
Second Holder



3rd Applicant



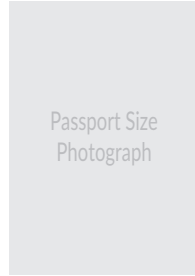
Signature(s)/Thumb Impressions(s) Sole/
Third Holder



4th Applicant



Signature(s)/Thumb Impressions(s) Sole/
Fourth Holder



5th Applicant



Signature(s)/Thumb Impressions(s) Sole/
Fifth Holder



6th Applicant



Signature(s)/Thumb Impressions(s) Sole/
Sixth Holder

Name of person's authorised to operate account / खातेधारकाचे/खाते चालवणाऱ्याचे नाव

Name / नाव

Middle Name / वडीलांचे/पतीचे नाव

Surname / आडनाव

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____



Operational Instruction / खाते व्यवहार करण्यासंबंधी सूचना

- Single Either or survivor Jointly or survivor Former or survivor
 Any one of us or any one of the survivor or the last survivor. Other (Please Specify)

Deposit Details

Payment by Cash Cheque Cheque No. _____ Date : Rs. _____
 Name Of Bank _____ Account Type _____

Customer Details / ग्राहकांची माहिती

Profession/Business : _____ Established on :
 व्यवसाय स्थापना
 Sales Tax/Service Tax/ SSI Reg.No. : _____ PAN / GIR No. _____
 सेल्स टॅक्स/ सर्व्हिस टॅक्स / एएसएसआय रजि. नं. पॅन / जी.आय.आर.नं. : _____
 Annual Turnover / Sales : ₹ _____ Annual Income : ₹ _____
 वार्षिक उलाढाल/विक्री वार्षिक उत्पन्न : _____
 Office : Owned / Rental /
 कार्यालय स्वतःचे भाड्याचे
 Gall No. & Name of Society
 गाळा नं. आणि सासायटीचे नांव : _____
 Road No./Name Area / Locality
 रस्ता क्र./नाव स्थळ / विभाग : _____
 City Nationality PIN
 शहर : _____ नागरीकत्व : _____ पिन :
 Telephone No. (Office)
 दूरध्वनी क्र. : _____ कार्यालयीन : _____
 Mobile E-mail ID
 भ्रमणध्वनी : _____ ई-मेल आयडी : _____
 Previous Banker A/c No.
 पूर्वीच्या बँकेचे नांव : _____ खाते क्र. : _____

Member/ Nominal Member Yes / होय No / नाही Member / Nominal Member No.
 सभासद / नाममात्र सभासद सभासद / नाममात्र सभासद क्रमांक

Account Type[Mark as (✓)] / खात्याचा प्रकार (✓अशी खूण करावी)

- Individual / वैयक्तिक Proprietorship / मालकी हक्क Partnership / भागीदारी Trust / न्यास
 Co-op Society / को-ऑप सोसायटी Company/ कंपनी Co-op Bank / को-ऑप बँक
 HUF / हिंदू अविभक्त कुटुंब प्रमुख LLP / एलएलपी Joint A/C / संयुक्त Other / इतर

NOMINATION FORM-DA-1 / नामांकन फॉर्म - डी ए - १

[For Individual / Sole Proprietorship Account / व्यक्तीगत अथवा एकट्याच्या मालकीची खाती असेल तर]

I/ We nominate following named person as my/our nominee after my/our death and is entitled legally to receive the money as per section 45ZA read with section 56 of Banking regulation Act, 1949 and Rule 2 (1) of the Co-opetative Bank (Nomination) Rules, 1985. माझ्या / आमच्या मृत्युनंतर खालील व्यक्तीस कायदेशीररित्या पैसे मिळण्यास बँकिंग रेग्युलेशन अक्ट १९४९ चे कलम ५६ बरोबर कलम ४५ झेड ए, तसेच को-ऑपरेटिव्ह बँकेचे (नामनिर्देशन), नियम, १९८५ नियम, २(१) नुसार मी/आम्ही खालील व्यक्तीचे नामनिर्देशन करित आहे./ आहोत.

(Only one person can be nominated / एका खात्यासाठी एक व्यक्तीचे नामनिर्देशन होऊ शकते.)

Name & Address / नाव व पत्ता	Age / वय	Date of Birth (In Case of Minor) जन्मतारीख (अज्ञान असल्यास)	Relationship with the Depositor

As the nominee is a minor on this date, I/We appoint Shri./Smt./Miss

आजच्या घडीला नामनिर्देशित केलेली व्यक्ती अज्ञान आहे, म्हणून माझ्या/आमच्या मृत्युच्या वेळी मी/आम्ही श्री/श्रीमती/कुमार _____

Address
पत्ता

to receive the amount of the deposit on behalf of the nominee in the event of my/our death during the minority of the nominee.

या व्यक्तीची अज्ञान व्यक्तीचे वाली म्हणून नेमणूक करतो. नामनिर्देशित केलेली व्यक्ती माझे/आमचे मृत्युचे वेळे अज्ञान असल्याद ह्या व्यक्तीला रकम मिळावी.

Date / दिनांक :

Applicant's Signature / अर्जदाराची सही



कल्लाप्पाणा आवाडे इचलकरंजी जनता सहकारी बँक लि., (मल्टीस्टेट शेड्युलड बँक)

Introducer's Details / ओळख देणाऱ्याचा तपशील

Introducer's Name / ओळख देणाऱ्याचे नाव : _____ Branch / शाखा : _____

Customer ID / ग्राहक क्र.: _____ Account No. / खाते क्र.: _____
 SB CD

Tel./Mob. / दूरध्वनी/मो.: _____ E-mail ID / ई-मेल : _____

I know the applicant/s for the last months/years. I confirm the identity, occupation and address of the applicant/s.

मी अर्जदारास मागील महिने/वर्षापासून ओळखतो/ओळखते. अर्जदाराचा पत्ता, ओळख, व्यवसाय याची मी खात्री देतो/देते.

Date : दिनांक : _____

Introducers Signature / ओळख देणाऱ्याची सही

Declaration / जाहीरनामा

For Proprietorship or Partnership him only / फक्त स्वतःच्या मालकीच्या अथवा भागीदारी संस्थासाठी

To,
The Branch Manager,
KAIJS Bank Ltd.
_____ Branch

Dear Sir,

I/We the undersigned, hereby declare that I am / we are the sole proprietor / Only partners of the firm _____ & am solely/are Jointly & severally responsible for the liabilities thereof. I/we shall advise you in writing of any change that may take place in the constitution / Partnership and I/ all the present partners will be liable to you, on any obligation which may be standing in the firm's name in your book on date of receipt of such notice and until all obligation shall been liquidated.

मी/आम्ही खालील स्वाक्षरी करणार या द्वारे असे जाहीर करतो की,..... मालकी/ भागीदारी संस्थापूर्णपणे माझ्या मालकीची असून मालकी/भागीदारी संस्थेचे फक्त आम्हीच मालक / भागीदार असून या मालकी/भागीदारी संस्थेच्या सर्व व्यवहारांची देणी देण्याचे संपूर्ण जबाबदारी केवळ माझी/ आमचीच आहे. व मालकी/ भागीदारी संबंधी वेळोवेळी होणाऱ्या घटनात्मक बदलाबदल मी / आम्ही बँकेस वेळेवर माहिती देण्याचे जबाबदारी माझी/ आमची आहे. माझी/ आमची मालकी / भागीदारी संस्था बँकेस कोणत्याही प्रकारचे देणे/ कर्ज खात्यावरील नावे रकम व इतर सर्व जबाबदाऱ्या पार पाडण्यास मी/आम्ही सदर बदलची सूचना मिळाल्यावर त्या जबाबदाऱ्या पूर्ण करण्याच्या हमी देत आहोत.

Signature

Signature

Partner/sole proprietor _____

Partner 4 _____

Partner 2 _____

Partner 5 _____

Partner 3 _____

Partner 6 _____

Date / दिनांक : _____

Place / ठिकाण _____

For Office Use Only

Name of Branch Official Visiting _____ IJ No. _____

I have visited the place of business and I found business details correct as mentioned in this form by customer.

Date / दिनांक : _____

Visiting Officer Sign

Verification of Credit facility in other Bank

Having credit facility in other Bank Yes / होय No / नाही

Name of Bank having Credit Facility _____ Name _____

Date of 'No Objection Certificate' letter Send to this Bank _____

Date of Correspondence _____

Correspondence Details _____

Officer / Branch Manager



Bring original documents for verification and please submit self attested copies of documents /
सर्व मूळ दस्तावेज खातरजमा करण्यासाठी सोबत आणावेत. व दाखल करित असलेल्या सर्व कॉपीजवर खातेदाराची सही असणे आवश्यक आहे.

List A- Proof of identity (Any one-Tick the document obtained)

- | | |
|--|--|
| <input type="checkbox"/> Passport | <input type="checkbox"/> Defense ID Card |
| <input type="checkbox"/> Voter ID Card | <input type="checkbox"/> Govt. ID Card |
| <input type="checkbox"/> PAN Card | <input type="checkbox"/> EMp.ID Card |
| <input type="checkbox"/> Driving License | <input type="checkbox"/> Aadhaar Card |
| <input type="checkbox"/> Photo Credit Card | <input type="checkbox"/> Any other Proof (Specify) |

[Mark as (✓) 1]

List B- Proof of Address (Any one-Tick the document obtained)

- | | |
|--|--|
| <input type="checkbox"/> Passport | <input type="checkbox"/> Ration Card |
| <input type="checkbox"/> Voter ID Card | <input type="checkbox"/> Bank A/c Stt. |
| <input type="checkbox"/> Latest Utility Bill | <input type="checkbox"/> Employer's letter with address |
| <input type="checkbox"/> Driving License | <input type="checkbox"/> Letter from public authority with address |
| <input type="checkbox"/> Rent/Lease Deed | <input type="checkbox"/> Aadhaar Card |
| <input type="checkbox"/> Credit Card Stt. | <input type="checkbox"/> Any other proof (Specify) |

For Business Documents [Mark as (✓)] / व्यावसायिक कागदपत्रे (✓ अशी खूण करावी)

Sole Proprietorship / Partnership / स्वतःच्या मालकीच्या व्यवसाय/भागीदारी संस्था

- | |
|--|
| <input type="checkbox"/> Photographs of Sole Proprietor / All authorized Signatories मालकाचे छायाचित्र/अधिकृत स्वाक्षऱ्या करणाऱ्यांची छायाचित्रे |
| <input type="checkbox"/> Certified Copy of Partnership Deed (in case of Partnership firm) भागीदारी कराराची मोहोरबंद प्रत (जर भागीदारी कंपनी असेल तर) |
| <input type="checkbox"/> Request letter to open the account & mode of operation signed by all partners on letterhead. खाते उघडण्यासाठी विनंती अर्ज आणि सर्व भागीदारांच्या स्वाक्षरीसह लेटरहेडवर खात्यावर व्यवसाय करण्याच्या पध्दती बदल पत्र. |
| <input type="checkbox"/> PAN and Proof of identity for sole Proprietor/All Partners as mentioned above. पॅन आणि मालकाचे / सर्व भागीदारांचे ओळखपत्र. |
| <input type="checkbox"/> Latest Shop Act License अद्यावत शॉप अॅक्ट परवाना |

Private Ltd./Ltd. Company / प्रायव्हेट कंपनी/पब्लिक कंपनी

- | |
|---|
| <input type="checkbox"/> Certified Copy of Memorandum and Articles of Association संस्थेच्या मेमोरंडम आणि आर्टिकल्सची अधिकृत प्रत. |
| <input type="checkbox"/> Certified Copy of Certificate of Incorporation संस्था नोंदणीची अधिकृत प्रत |
| <input type="checkbox"/> Certified Copy of Certificate of Commencement of business (in case of Public Ltd. Co) व्यवसाय/धंदा सुरुकरण्यासंबंधीच्या प्रमाणपत्राची अधिकृत प्रत जर मर्यादित संस्था असेल तर |
| <input type="checkbox"/> Resolution to Open the Account, Mode of Operation & List of Authorize signatories खाते उघडण्यासंबंधीचा ठराव आणि व्यवहार करण्याची पध्दत व सर्व अधिकृत स्वाक्षऱ्यांची यादी |
| <input type="checkbox"/> List of all directors & Addresses सर्व संचालकांची नावे व पत्यांची यादी |

HUF / हिंदू अविभक्त कुटुंब संस्था

- | | |
|---|---|
| <input type="checkbox"/> Photographs of Karta & Co-perceners कर्त्याचे छायाचित्र आणि सर्व सामायिक वारसांची छायाचित्रे | <input type="checkbox"/> HUF letter signed by Karta & all major co-perceners हिंदू अविभक्त कुटुंबाचे कर्त्याने स्वाक्षरी केलेले पत्र आणि सर्व अज्ञान सामायिक वारसांचे संमतीपत्र |
|---|---|

All Account Types / सर्व खात्यासाठी

- | | |
|--|--|
| <input type="checkbox"/> Latest Registration Certificate अद्यावत रजिस्ट्रेशन सर्टिफिकेट. | <input type="checkbox"/> Latest corporation/Municipal corporation permission अद्यावत नगरपालिका / महानगरपालिकेने जारी केलेला परवाना |
| <input type="checkbox"/> Latest CST/VAT Certificate अद्यावत CST/VAT सर्टिफिकेट | <input type="checkbox"/> latest Permission issued by IICA/CS अद्यावत IICA/CS यांनी जारी केलेले परवाना |
| <input type="checkbox"/> Chartered Accountant Certificate चार्टर्ड अकाऊंटंट सर्टिफिकेट | <input type="checkbox"/> Latest Telephone Bills /अद्यावत टेलिफोन बील |

Trust/Club/Society/Association /Bank / ट्रस्ट/क्लब/सोसायटी/असोसिएशन/बँक

- | | |
|---|---|
| <input type="checkbox"/> Photographs of all authorized signatories सर्व अधिकृत व्यक्तींची छायाचित्रे | <input type="checkbox"/> Certified true copy of certificate of Registration नोंदणीप्रमाण पत्राची अधिकृत प्रत |
| <input type="checkbox"/> Certified true copy of trust deed (for trust) विश्वस्त संस्थेच्या उपविधीची अधिकृत प्रत (विश्वस्त संस्था असल्यास) | <input type="checkbox"/> Resolution to open the Account, Mode of operation & List of authorized signatories. खाते उघडण्यासंबंधीचा ठराव आणि व्यवहार करण्याची पध्दत व सर्व अधिकृत स्वाक्षऱ्यांची यादी |
| <input type="checkbox"/> Certified true copy of bye-laws (for Club/Society/Association) घटनेची अधिकृत प्रत (क्लब/सोसायटी/असोसिएशन) | |



Check Points for compliance of KYC Policy (आपला ग्राहक ओळखा)

Description	Yes/No	Description	Yes/No
1 Copy of PAN Card	<input type="checkbox"/>	6 Identity of prospective customer does notmatch with person with known criminal background/banned in individual terrorist	<input type="checkbox"/>
2 Recent photograph/s of the applicant/all the joint applicants obtained	<input type="checkbox"/>	7 Risk Rating has been done & marked in system	<input type="checkbox"/>
3 Proof of identification (as per list A) obtained	<input type="checkbox"/>	8 Personal visit Branch Official	<input type="checkbox"/>
4 Proof of identification (as per list B) obtained	<input type="checkbox"/>	9 Confirmation of cash credit A/c in other bank	<input type="checkbox"/>
5 Business Documents	<input type="checkbox"/>	10 If HUF then Declaration	<input type="checkbox"/>

For Branch Verification

Introducer's signature verified & found correct. I have verified all the relevant Documents and the Account Holder Have signed before me. Particulars of Form DA1 are entered and nomination has been registered.

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Clerk

Officer

Asst. Manager / Branch Manager

Periodical Updation of Customer Identification Procedure

(Once in 2 years in case of High Risk Account, once in 8 years in case of Medium Risk account and once in 10 years in case of low Risk account)

	Date of Updation	Entered in Omni Software Date	Year Of Next Review	Details of Identification Procedure (Including)	Authorised Signature With Date
Please Paste a Latest Passport Size Photo				Name of ID Proof : _____ Name of Address Proof : _____ Photograsph (Latest) Obtained : Yes / No Other Documents, If any : _____	
Please Paste a Latest Passport Size Photo				Name of ID Proof : _____ Name of Address Proof : _____ Photograsph (Latest) Obtained : Yes / No Other Documents, If any : _____	
Please Paste a Latest Passport Size Photo				Name of ID Proof : _____ Name of Address Proof : _____ Photograsph (Latest) Obtained : Yes / No Other Documents, If any : _____	

PERIODICAL REVIEW OF RISK RATING

SL.No.	Date of Review	Risk Rating (Low / Medium / High)	Entered in Omni Software Date	Next Review Due Date	Officer Signature
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					



Terms and Conditions / नियम व अटी

Debit-Cum-ATM Card

1. Meaning: The term 'Bank' refers to the Kallappa Awade Ichalkaranji Janata Sahakari Bank Ltd.: 'ATM' refers to the Automated Teller Machine installed of the branches of the Bank. 'Card Holder' refers to the Authorized User of Debit-Cum-ATM Card. 'ATM Account' refers to the Authority of operating an ATM Account. The context may require, words herein denoting the singular only shall be deemed effective notification to all such persons. If the person who signs and agrees to be bound by terms and conditions is female as the context may require. Words herein denoting the male gender also shall be deemed to mean/include the female gender.

2. ATM: Account Eligibility: a. A satisfactorily conducted savings/current account to be eligible for opening of a Debit-Cum-ATM card. b. The cardholder shall give his preference of such account(s) held by him in writing on the application form for the issue of Debit-Cum-ATM Card.

3. Special Accounts: In case of Partnership Firm, Company, Co-operative Society, Trust and HUF account, Debit-Cum-ATM card will not be allotted.

4. ATM - PIN (Personal Identification Number):

a) Each cardholder shall be issued his or her "Personal Identification Number (PIN)" for accessing the ATM services and to operate the account smoothly. The allotted PIN number is strictly confidential thereby ATM card will be operated only by an authorized account holder. The PIN shall, under no circumstances, be disclosed or opened to any third party or avoid to keep the card and PIN together so as to prevent the misuse or appropriation of funds. The cardholder will be solely responsible for the consequences arising out of the disclosure of his PIN and/or unauthorized use of ATM card and shall be liable for increased liability which he may incur on account of unauthorized use of the PIN & ATM card.

b) PIN Change: It is advisable, for the cardholder:

1. To change his PIN periodically.
2. To change his PIN, if certainly suspects it is no longer confidential.
3. To select a non-easily guessable PIN.

c) PIN Safety: (a) Any wrong PIN feed to motorized card ATM machine for more than three occasions will retain the card in ATM itself. This card will be activated after written request of customer to his/her home branch only.

d) Any wrong PIN feed to DIP card ATM Machines, for more than three occasions will garnish/lock the card and this will be activated after written request of customer to his/her home branch only.

5. ATM Card Safety: It is sole responsibility of card holder to preserve the card in good condition. Always ensure to keep ATM card safely in plastic pouch to prevent any physical damage to magnetic strip not expose it to magnetic fields, heat, water and dust anytime. If the card is broken or unreadable, it will be considered as invalid card & now card will be issued on such an application by card holder & on handing over of such invalid card for cancellation to home branch.

6. Debit-Cum-ATM Card Validity: The Debit-Cum-ATM card will be valid maximum for a period of seven years from the date of issuance of card. After expiry, card will be automatically locked and customer has to apply for fresh card.

7. Withdrawal Limit: The customer can withdraw Rs.20,000/- (Rs. Twenty Thousand) per day through the balance amount and can transact up to Rs.50,000/- (Rs. Fifty Thousand) from PoS machine. The exposure limit shall be decided by the bank from time to time as and when required, which will be binding on customers.

8. Minimum Balance: Minimum balance at all times is required to be maintained as may be specified by the bank from time to time while enjoying the Debit-Cum-ATM Card facility. The bank has liberty to entail the penal interest or service charges as per the Bank's rules from time to time. The bank reserves the right to continue or discontinue this service unilaterally without assigning the reason to the customer.

9. Fees/Charges: All fees related to ATM facility as determined by the Bank from time to time shall be payable forthwith on issuance of card and recovered by debiting the ATM card holders account if not paid in cash. In case of insufficient balance to debit account Bank has full right to stop the operation of ATM card and/or cease account or Bank shall withdraw the ATM card facility.

10. Non transferability: Debit-Cum-ATM card is non transferable under any circumstances.

11. Duplicate Card: The Debit-cum-ATM card shall be offered free of cost and Rs. 100/- (Rs. One Hundred) will be charged for duplicate card.

12. Loss of card: a) ATM card will be issued to the account holder in lieu of lost/stole on payment of card fees/charges or recovered by debiting cardholder's account.

b) In case of lost/misplace of ATM-cum-Debit Card, the cardholder will have to make an Indemnity Bond of Rs.200/- and Rs. 100/- shall be charged for duplicate ATM card. c) In case of misplaced or theft of the ATM card, the cardholder shall intimate to the bank immediately on same date. After intimation, if cardholder found ATM card, then card will be surrendered to bank and such card cannot be used. The cardholder, however, shall be responsible and liable for all transactions effected by the utilization of card till the cancellation of card.

13. Refusal / Termination / Withdrawal of ATM CARD: As ATM card is the belonging of the bank, the bank has liberty to withdraw the ATM card or terminate services without assigning any reason thereupon. It shall be obligatory on customer to surrender the card to bank and any charges against that will not be paid by the bank to the cardholder.

14. Account Status Change: Any change in the mode of operation or ATM card account shall not be allowed unless Bank's written permission is sought. For replacement of ATM card, old card will have to be surrendered to the bank and a fresh card will be issued on payment of fees/charges.

15. Authority & Responsibility:

- i. The Bank shall not be responsible for any loss or damage arising directly or indirectly as a result of any malfunction/failure of Debit-Cum-ATM Card or the ATM or for the temporary Insufficiency of funds in such machine or otherwise whatsoever.
- ii. The Bank reserves the right to limit the amount which may be withdrawn by card holder daily any time without given, any pre-notice. The Bank also reserves the right to restrict the ATM to certain Hours of the day as may be notified and displayed from time to time.
- iii. The Bank reserves the right to amend, add or delete any of terms & conditions or rules without prior notice to account Holder.
- iv. It is sole responsibility of the cardholder, for the transaction done by Debit-Cum-ATM card as with card holder's knowledge or authority express or implied.
- v. The cardholder should not withdraw without confirming the sufficient balance required for withdrawal. Checking of balance will be the sole responsibility of cardholder. In any case, the amount of deposit falls short than minimum required balance as aforesaid or overdraft; bank reserves the right to transfer such amount from cardholder's account. If shortfall continues for more than one day, then interest @ 19.50% p.a. will be charged. Bank can levy penalty for such shortfall as decided from time to time.
- vi. If cardholder notices any illegal/unauthorized transactions in his/her account, then such cardholder should immediately intimate bank in writing about such transactions.
- vii. The cardholder shall be liable or responsible to pay the amount whichever is embezzled, appropriated or committed fraud by him/her, knowingly or negligently.
- viii. The bank will not be liable for any compensation arisen due to technical problem in machinery or any system. Bank will not be responsible for any inconvenience caused due to system/technical system. Moreover, the concerned customer will be solely responsible for any transactions effected through Debit-cum-ATM card.
- ix. The cardholder is not authorized to stop/cancel the commands given in the ATM or PoS machine.

16. Joint Account: In case of joint account, the card shall be offered in the first name, who will be authorized to utilize this card. But all account holders in joint account will be held responsible for every transaction made through ATM.

17. Refund of Amount: The cardholder shall have to make a written application, within 7 days to the concerned branch, in case the amount is not received by other Bank's ATM. The information in this regard shall be sent to ATM switch (i.e. NPCI) and the decision given by them will be the final and binding for which 15 days duration will be taken.

18. Instant Debit Card: Instant Debit card will be provided in Well-Come kit. This Debit Card doesn't have printed card holders name. Except this, all other terms and conditions as above said are same for Instant debit card. If any customer wants his/her name printed on card, then he/she have to make an application for personalized debit card and needs to submit Instant Debit Card to bank.

19. The transaction made after Bank's working hours shall be recorded on the account of cardholder on next working day as value date.



DECLARATION / जाहीरनामा

Any Branch Banking:

1. The Bank shall facilitate payment and collection of cheques through all its branches while I/we shall have one account at the branch (for short 'Home Branch'). Bank shall also accept cash from me/us/ and pay in cash against presentation of cheques drawn by me/us in favor of myself/ourselves with the Home Branch as per the applicable limits for the account. The cash transaction will be on the same lines as is the case when deposits/withdrawals take place at the home branch. Charges for cash deposit in branch other than home branch will be as per bank rules.
2. While the instruments for and on my/our behalf will be collected in local clearing, the credit in respect of the proceeds there under will be afforded at the home branch on and subject to realization at the respective center(s) Branch(es).
3. The Bank entitle to debit by its home and any other branch(es) in my/our account as its base branch against the cheques presented at various branches of the Bank.
4. My/our written intimation of "stop payment" to the various branches of the Bank will be at my/our risk and I/we agree to grant a lead time of at least 24 hours for intimation of such "stop payment" instruments to all its branches. In case of any mutilated and/or erroneous information which may emerge by of due any communication error and if the "stop payment" is not carried out in good faith based in the said information, the bank shall not be held responsible for the said act.
5. I/We agree to inform my/our existing bankers for the availment of any of the facilities hereby granted to me/us. I/we also agree from time to time to furnish such information details and the documents to the existing bankers and also the bank as is mandatory under the law and force from time to time or as the bank regards necessary and/or expedient under the banking practice/procedure.
6. The agreement herein contained shall not affect prejudice or derogate from the bank's rights and privileges under the law including the right to claim set off general and the bankers disposing or retaining lien or similar rights pertaining to my our credit balance in the account with the bank.
7. In the event of any malfunctioning and/or break down in the working of the said network for the reasons beyond the control of the bank, the benefits and the facilities hereby granted to me/us will stand suspended during such break-down in which case the bank will not in any manner be liable and /or responsible to me/us for any damages/compensation and/or for any other consequences arising out of such suspension.
8. I/we agree to hold the Bank indemnified in case the bank suffers any loss in account of operation of the scheme for my/our benefit.

Saving Deposit Account:

1. The saving bank accounts should be used to route the transactions of only non-business/non-commercial nature. In the event of occurrence of such transactions or any such transactions that may be constructed as dubious or undesirable, the Bank reserves the right to unilaterally freeze operations in such accounts and/or close the accounts. Third Party instruments enclosed in favor of the account holder will not be accepted.
2. Interest on Saving Bank deposit is calculated at a rate fixed by RBI or bank from time to time. This interest will be paid half yearly on the daily balance in the account.
3. The customer should maintain minimum balance as may be required from time to time in the account and communicated at the time of opening of the account. Changes in the bank/service charges or minimum balance requirements are displayed on the notice board of the branches and on the website. The non-maintenance of the adequate balance shall automatically entitle the Bank to levy the charges for non-maintenance of balance. In such an event, the Bank shall have first right to set-off any available credit that may be available in the account including from amounts flowing into said account for collection proceeds or any deposits. Notwithstanding the above, if the Bank is of opinion that if the customer does not maintain minimum balance and/or if the account remains a Zero balance and/or the overall conduct of the account is not satisfactory, the Bank shall have a right to close the account by issuing reasonable period notice. In the event, if the said account is funded within reasonable period, the Bank may not exercise the said right to closure. If not, the Bank shall close the account without any further notice to customer.
4. If there is no transaction in the account for 2 years, the account automatically gets classified as a 'dormant account' whereupon further debit transactions are not permitted in the ordinary course. A request for activation of the account along with complete KYC has to be made by the customer.
5. Satisfactory conduct of the account entails maintaining stipulated minimum balance as well as sufficient balance to honour cheques issued to third parties. If there are high incidences to the contrary, the Bank reserves the right to close the accounts without any further notice to the customer.
6. Any special instructions, both financial and non-financial in nature, like Standing Instructions, Stop Payment Instructions, Issuance of cheque books, Demand Drafts, Pay Orders, request for ATM card, ECS Credit & Debit, Issuance of duplicate card/PIN must be communicated in writing. Otherwise, it shall not be binding on the Bank to comply with such instructions, Charges as applicable will be leviable to customer.
7. The Saving Bank Account entitles free access to The Kallappanna Awade Ichalkaranji Janata Sahakari Bank Limited, Internet Banking unless otherwise stated.
8. All other charges for services like RTGS, NEFT, E-Tax payment facility, SMS Banking, ATM Card Usage and any other services etc. will be applicable as per banks rules issued from time to time.
9. Any change of address or contact details should be immediately communicated in writing to the bank along with address proof. If bank is unable to inform any changes in rules or service charges due to wrong submission of contact details or due to failure to submit the updated contact details by applicant, then it will be sole responsibility of applicant and all the changes will be binding.
10. There is no restriction on number of deposits that can be made into the account.
11. The account holder can withdraw money personally from his/her Saving Bank Account by using Banks Standard withdrawal form. The pass book must accompany the withdrawal form. Debit-Cum-ATM card can also be used in ATMs for cash withdrawal. Third party payments through withdrawal forms are not permitted. The maximum number of debit entries i.e. withdrawals or cheque or transfer etc. permitted in account is 96 per year or as decided by bank from time to time.
12. Accounts may be transferred between branches of the Bank at the request of account holder(s). Request for closure of account should accompany with pass-book, unused cheque leaves and Debit-Cum-ATM card. Joint accounts can be closed only at the request of all such joint signatories.

Declaration:

I/We read the terms and conditions on the Bank's Website (www.ijsbank.com) and detailed in the terms and conditions available at Branch, governing the opening of account with bank and those relating to use of various services including but not limited to above explained i.e. ATM cum Debit Card facility, Branch Banking and Saving Deposit Account etc. I/we have understood the same and agree to abide by such/any other terms and conditions that may be in force from time to time. I /we have also read the Bank's Schedule of charges for the respective and agree to abide by the same. I/we have also understood that all the terms & conditions and the service charges are subject to change without any prior notice. The information furnished / declaration given by me/us in this form is true and I/we shall be held responsible for the same at all time. I/We also understand that the continuation of the accounts is at the Bank's sole discretion, and in case of dissatisfaction with the conduct of the account, the bank has right to close the account after giving suitable notice of withdraw some/all services /concessions granted to me/us.

Date / दिनांक :

D	D	M	M	Y	Y	Y	Y
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Applicant's Signature / अर्जदाराची सही